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INTRODUCTION

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This supplement contains the proceedings of an evening symposium entitled ''Defining essential maintenance therapy in COPD'', sponsored jointly by Boehringer Ingelheim (Ingelheim, Germany) and Pfizer Inc. (New York, NY, USA), at the 15th Annual Congress of the European Respiratory Society, held in Copenhagen, Denmark, in September 2005. The symposium provided a forum for discussion and review of the critical factors that define essential maintenance therapy in chronic obstructive pulmonary disease (COPD). International guidelines recommend tiotropium or long-acting β_2-agonists as first-line maintenance treatment in COPD. Although the choice of agent may be influenced by individual patient characteristics, the ability of the therapy to improve not only lung function, but also patient-centred outcomes, such as dyspnoea, exercise tolerance, exacerbations and health-related quality of life, is an important consideration.

The initial paper focuses on the role of cholinergic constriction as a major reversible component of airway obstruction in COPD [1]. The next three papers address the impact of pharmacological interventions on a spectrum of patient-centred outcomes: from breathlessness and exercise tolerance [2], through deconditioning [3], to exacerbations and associated hospitalisations [4]. The final paper reviews the effects of long-acting β_2-agonists and tiotropium on these patient-centred outcomes [5].

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