Additional File 1

Supplementary Table 1. Studies reporting non-pharmacological treatment efficacy in patients with mild COPD#

Study	Population	Intervention	Finding
Symptom burden			
Jácome <i>et al</i> . 2014 [1]	Mild COPD	Pulmonary rehabilitation (exercise training and psychoeducation)	Improved dyspnoea, functional balance, muscle strength, exercise tolerance and SGRQ symptom, activity and total scores after 12 weeks
Physical activity and			
exercise tolerance			
Jácome et al. 2016 [2]	Mild or moderate/severe COPD	Pulmonary rehabilitation (exercise training and psychoeducation)	Improved 6MWT and physical activity in both mild and moderate/severe. Reduced exacerbations and improved SGRQ in both, greater in moderate/severe
Burtscher <i>et al.</i> 2009 [3]	Patients at risk for or with mild COPD	Intermittent hypoxia versus normoxia	Increased haemoglobin mass, total exercise time and exercise time to anaerobic threshold
Clark et al. 2000 [4]	With/without mild COPD	Weight training versus control	Improved muscle function and whole body endurance in mild COPD

Lung function decline

Kanner et al. 2001 [5]	Smokers with mild COPD	Smoking cessation	Fewer lower respiratory illnesses in sustained
	$(FEV_1/FVC < 0.7 \text{ and } FEV_1$	intervention	quitters than continuing smokers. FEV1 stable in
	55–90% predicted)		sustained quitters, decreased in smokers.

6MWT: 6-minute walk test; COPD: chronic obstructive pulmonary disease; FEV₁: forced expiratory volume in 1 s; FVC: forced vital capacity; SGRQ: St George's Respiratory Questionnaire. #: mild COPD defined as GOLD 0 and/or 1 COPD, unless otherwise stated.

References

- 1 Jácome C, Marques A. Pulmonary rehabilitation for mild COPD: a systematic review. *Respir Care* 2014: 59: 588-594.
- Jácome C, Marques A. Short- and long-term effects of pulmonary rehabilitation in patients with mild COPD: a comparison with patients with moderate to severe COPD. *J Cardiopulm Rehabil Prev* 2016: 36: 445-453.
- Burtscher M, Haider T, Domej W, Linser T, Gatterer H, Faulhaber M, Pocecco E, Ehrenburg I, Tkatchuk E, Koch R, Bernardi L. Intermittent hypoxia increases exercise tolerance in patients at risk for or with mild COPD. *Respir Physiol Neurobiol* 2009: 165: 97-103.
- 4 Clark CJ, Cochrane LM, Mackay E, Paton B. Skeletal muscle strength and endurance in patients with mild COPD and the effects of weight training. *Eur Respir J* 2000: 15: 92-97.
- 5 Kanner RE, Anthonisen NR, Connett JE. Lower respiratory illnesses promote FEV₁ decline in current smokers but not ex-smokers with mild chronic obstructive pulmonary disease: Results from the Lung Health Study. *Am J Respir Crit Care Med* 2001: 164: 358-364.