

## Review of: "Risk Factors of Pulmonary Embolism in Patients with Acute Exacerbation of Chronic Obstructive Pulmonary Disease: A retrospective clinical study"

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Potential competing interests: The author(s) declared that no potential competing interests exist.

At present, PE is mainly diagnosed by biomarkers (such as fibrin degradation products D-dimers), echocardiography, pulmonary angiography, and CT pulmonary angiography. In COVID-19 patients with raised D-dimer levels on admission or sudden clinical worsening, CT pulmonary angiography should be conducted.

Include these articles:

Mariano RZ, et al. COVID-19 and pulmonary embolism: Do not forget the association! Rev Soc Bras Med Trop. 2020 Jun 8;53:e20200234. doi: 10.1590/0037-8682-0234-2020.

Rotzinger DC, et al. Pulmonary embolism in patients with COVID-19: time to change the paradigm of computed tomography. *Thromb Res.* 2020;190:58–59. doi: 10.1016/j.thromres.2020.04.011.

How was done the diagnosis in the cases of PE?

Describe TC findings in the discussion.

## INCLUDE IN THE DISCUSSION:

Quantification is important in the assessment of diseases, such as Chronic Obstructive Pulmonary Diseases (COPD), which lead to an increase in the residual lung volume and SARS-CoV-2, demonstrating abnormal patterns as an inflammatory process, fibrosis, emphysema, ground-glass, and others. And also, of great importance when a reduction in lung volume occurs due to diseases that cause pulmonary focal obstruction of a given airway.

Include these articles in the reference

Alves AFF, et al. (2021) Automatic algorithm for quantifying lung involvement in patients with chronic obstructive pulmonary disease, infection with SARS-CoV-2, paracoccidioidomycosis and no lung disease patients. PLoS ONE 16(6): e0251783.

Dai WC, et al. CT Imaging and Differential Diagnosis of COVID-19. Can Assoc Radiol J. 2020 May;71(2):195-200. doi: 10.1177/0846537120913033