

1. Personal Information

Family Name: Leuppi
First name: Jörg Daniel
Academic degree: Prof. Dr. med.
Date and place of birth: March 25th, 1964, Basel
Marital status: Married, 3 children
Citizenship: Swiss
Institution: Medizinische Universitätsklinik,
Kantonsspital Baselland
Rheinstrasse 26, CH – 4410 Liestal
Phone +41 (0) 61 925 21 81
Email: joerg.leuppi@ksbl.ch



2. Education

- 1984 – 1990 Study of Medicine, University of Basel
- 1990 Final exams („Staatsexamen“)
- 1991 Medical doctorate (Dr. med.), University of Basel
„Hemmung der exokrinen Pankreasfunktion durch Somatostatin 28 beim Menschen“ (Evidence for hormonal inhibition of exocrine pancreatic function by somatostatin 28 in humans)
Supervisor: Prof. Ch. Beglinger, Gastroenterology, University Hospital Basel
- 1997 Specialist in Internal Medicine, FMH
- 1998 Special training in manual medicine
- 1997 – 2001 Postgraduate course (PhD), University of Sydney, Australia
- 2002 Specialist in Respiratory Medicine, FMH
- 2003 Doctor of Philosophy (PhD) „Factors which influence asthma control“
Supervisors: Prof. Ann J Woolcock and Prof. Christine Jenkins
- 2005 Venia docendi („Habilitation“) in Internal Medicine, especially in Respiratory Medicine: “Clinical implication of airway hyperresponsiveness“, University of Basel
- 2010 Honorary Professor („Titularprofessor“) in Internal Medicine, especially in Respiratory Medicine, University of Basel
- 2013 Clinical Professor of Internal Medicine, University of Basel

3. Employment history

Since March 2013 Clinical Professor and Head University Clinic of Medicine, Cantonal Hospital Baselland
Jan 2010 to Feb 2013 Deputy Head, Clinic of Internal Medicine, University Hospital Basel
Jun 2008 to Feb 2013 Consultant in Internal Medicine, University Hospital Basel:
Responsible for the organization of the clinic (organization, processes, collaboration with nursing department), Employment of assistant physicians (53 positions), Supervision of ward rounds on general wards. Management of own in- and outpatients
Mar 2005 to May 2008 Consultant in Respiratory Medicine, Head lung function lab, University Hospital Basel

4. Institutional responsibilities

- **Clinical Tasks:** Fully responsible for the whole University Clinic of Medicine on three sites. Supervising and managing of in- and outpatients in General Internal Medicine, Respiratory Medicine.
- **Teaching:** Supervision/teaching of residents, fellows, medical students.
- **Research:** Translational and clinical studies in the field of Chronic Diseases, especially in Respiratory Medicine including asthma and COPD.

5. Approved research projects

- RECUT trial (“Reduction of corticosteroid use in outpatient treatment of exacerbated COPD - a randomized, double-blind, non-inferiority study“): This trial is conducted in collaboration with the Institute of Primary Care, University of Basel, and more than 100 general practitioners in Switzerland (SNF-Nr.: 32003B_160072). PI
- Swiss COPD cohort: Ongoing assessment of COPD management in Primary Care. Registered grant by Boehringer Ingelheim GmbH and Novartis AG Switzerland. PI

6. Supervision of young researchers

- Master thesis: *Completed:* J. Mundwiler (Sports Sciences)
- MD thesis: *Completed:* D. Vakil-Gilani, S. Ristic, R. Benz, D. Gassmann, A. Kruker, E. Kaiser, K. Henny, A. Handschin, P. Urwyler, ML. Prons
Ongoing: D. Buess, S. Kind, E. Thesenvitz, B. Janisch, H. Scheerle, T. Junker, A. Deman, A. Irandi, S. Schwarz-Zindel, M. Premstaller
- PhD thesis: *Completed:* S. Brighenti-Zogg (Movement Sciences)
Ongoing: C. Gregoriano (Pharmaceutical Sciences)

7. Teaching activities

- Graduate Teaching: Basic and advanced clinical courses in the fields of basic competencies, general Respiratory Medicine for bachelor and master students in Medicine
- Postgrad. Teaching: Regular training courses for office- and hospital-based physicians in the fields of Respiratory Medicine

8. Memberships in panels, boards, etc.

- Since 2006: Member of the Executive Board of the Lung League Basel, since 2015 president
- Since 2006: Member of the Training Committee of the Swiss Society of General Internal Medicine
- Since 2010: Member of the Executive Board of the Swiss Society of Pneumology (responsible for DRG)
- Since 2012: Member of the Executive Board of the Swiss Society of General Internal Medicine
- Since 2013: Member of the Executive Board of the Swiss Medical Head Association
- Since 2013: Trustee Board, Institute of Clinical Epidemiology
- Since 2013: Director Board, Clinic of Barmelweid

9. Active memberships in scientific societies

- Swiss Society of Internal Medicine
- Swiss Society of Pneumology
- FMH-Member
- American Thoracic Society
- European Respiratory Society

10. Organization of conferences

- Since 2012: Member of the Organizing Committee of the MedArt Congress in Basel
- 2012 – 2016: Co-Chair of the Swiss Society of Internal Medicine (SGIM) Great Update Conference
- 2015: Organization of the Annual Meeting of the SGIM Congress (Chair)

11. Awards

- 2013: Best publication Award for REDUCE Trial, Swiss Society of General Internal Medicine
- 2015: 3rd rank, Novartis best Poster Award, Swiss Society of General Internal Medicine

12. Career interruptions

None.

Major scientific achievements

My main areas of interest and expertise relate to respiratory physiology and obstructive lung diseases, in particular asthma and chronic obstructive pulmonary disease (COPD). After graduating from the medical school of the University of Basel in 1990, I obtained a Doctor of Philosophy (PhD) at the University of Sydney, Australia in 2003 ("Factors which influence asthma control"). My clinical research also encompassed clinical implications of airway hyperresponsiveness. After my habilitation in 2005, I worked in the Departments of Pneumology and Internal Medicine at the University Hospital of Basel, where I was also Head of the pulmonary function laboratory. In 2010, I became Associate Professor in Internal Medicine. Until 2012, I worked as a Professor and Deputy Head of the Department of Internal Medicine at the University Hospital in Basel. During my time at the University Hospital, my activities and responsibilities included training and supervision of the medical team, organization of the unit, staff planning, clinical activities (in both in- and out-patient settings) as well as continual teaching commitment. I also serve as a consultant for several pharmaceutical companies and sit on a number of advisory boards and steering committees.

In 2013, I moved with my research group to the Cantonal Hospital Baselland in Liestal, where I am currently the Head of the University Clinic of Internal Medicine and full Professor of Internal Medicine, University of Basel. My research group is based in Liestal and affiliated to the University of Basel. Currently, my research is funded by grants from the Gottfried and Julia Bangerter-Rhyner-Foundation and the SAMW, the Lungenliga Schweiz, the Swiss National Accident Insurance Institution (SUVA) as well as by grants-in-aid from different pharmaceutical companies (Boehringer Ingelheim, Astra Zeneca, Glaxo Smith Kline and Novartis).

I have authored and co-authored one hundred of scientific publications. My research focuses on pulmonary diseases, specifically the two most common chronic lung diseases asthma and COPD. The approach of our research is multidisciplinary and so are the qualifications and areas of expertise of our team members. We have and encourage close collaboration between lung physicians, clinical investigators, human movement scientists as well as pharmaceutical scientists and experts in the field of family medicine.

More recently, my research has focused on patient-centred care and translational research with the aim to close the gap between academic research and daily clinical practice. The concept behind this is that provision of optimal treatment is not only about short-term improvement in patients' clinical conditions and quality of life, but also about reducing long-term side-effects of treatments to a minimum. As such, our goal is to improve diagnostic accuracy as well as delivering optimized healthcare to patients with cardiopulmonary diseases.

Our group is currently enrolling the first and largest COPD cohort in Switzerland. In this study, general practitioners (GPs) play a key role, because they are asked to enter data on their patients' routine examinations anonymously into a centralized electronic database. Until now, we have recruited more than a thousand patients and we want to follow the natural course of their disease. We are particularly interested in evaluating GPs adherence to guidelines as well as prediction and early diagnosis of COPD exacerbations. Preliminary data show that more than 30% of patients are not treated according to international guidelines. Prediction of disease course is clinically important. Therefore, we evaluated the ADO Index (age, dyspnea and airflow obstruction index) as a predictor of 2-year mortality in a primary care setting. The ADO index showed excellent prediction properties in an out-of-population validation. More recently, we have studied systemic effects of COPD, in particular muscle dysfunction, impact on daily physical activity and quality of life. We have been able to demonstrate that average daily steps and functional capacity are independent determinants of health-related quality of life. We have also shown that different symptom severity scales do not provide comparable conclusions when stratifying patients into risk groups. The amount of daily steps decreased with increasing COPD risk groups. Overall, these results emphasize the importance to remain active and mobile, which, in turn, is associated with better quality of life. Finally, we lately performed a hospital-based, multicentre, placebo-controlled, non-inferiority study (REDUCE Randomized Clinical Trial). The most relevant finding is that in acute exacerbation of COPD, systemic corticosteroid treatment duration of five days is not inferior to a common fourteen-day course with regards to re-exacerbation rate or mortality. Clearly, considering the large number of COPD patients treated in outpatient settings, treatment guidelines need to be urgently verified in this specific setting. A follow-up study called the RECUT trial is currently conducted in collaboration with the Institute of Primary Care, University of Basel, and more than 100 general practitioners in Switzerland. This is also a randomized, double-blind, multicentre, non-inferiority study investigating the reduction of corticosteroid use from 5 to 3 days in outpatient treatment of exacerbated COPD. With these trials we were able to form a broad network of collaborating general practitioners with regards to future multicentre studies.

Liestal, 05.10.2018



Prof. Dr. med. Jörg Daniel Leuppi