COPD is a highly prevalent disease that has a large impact on quality of life. To examine the symptoms that are related to communication, a questionnaire has been developed by a Dutch speech and language therapist (Vossen, 2008). It consists of 4 self-report scales concerning breathing, speech, voice & swallowing and a performance assessment in which a short text is read. Each item is rated on a 12 point (Borg) scale. The Dutch version proved to be a reliable and valid tool (Lenders et al, 2015; Marien et al, 2016) and thus was translated into German (Hille & Lemberg, 2015). In this study the internal consistency, test-retest reliability (self-report items), intra-observer reliability (performance assessment) and the discriminant validity according to GOLD stages of the German version were examined. 53 Germans suffering from COPD were recruited via sport lung groups, self-help groups, hospitals and general practitioners offices. 50 people, of which 26(52%) females, completed the questionnaire twice in a two week time period and 30 allowed the performance of reading a text to be recorded for analysis. The mean age was 66 (sd= 9.3), ranging between 41 and 83, and 33(66%) were retired. The majority 42(84%) did not smoke (anymore). Most prevalent (n=18/36%) was GOLD stage II and the other stages varied between 9 and 5 people. From 10 people the GOLD stage was not reported. According to the self-report items the main difficulties concerning communication were breathing while experiencing strain (100%) and voice production (64%). The least problems were reported in swallowing (26%). The internal consistency in both measurements was high (Cronbach alfa >0.8) for the total scale, the breathing scale and the reading scale, sufficient (Cronbach alfa = 0.7) for the voice scale and poor (Cronbach’s alfa = resp.0.6/.44) for the swallow scale. The correlation calculated via resp. weighed kappa and ICC between the first and second measurements of the self-report items ranged between >0.8 and 0.93 for all subscales and total scores. The intra-observer analysis showed a weighed kappa of 0.96. There were significant differences (p<0.05) in scores between GOLD I and GOLD II & IV. The sample size of GOLD III was only 5 people, which was most likely too small for ANOVA testing. While several other health questionnaires focus on consequences of COPD, so far no reliable instrument concentrated on communication difficulties caused by COPD. This questionnaire is reliable and can be used to record communication problems in a German population with COPD. Even though further validity testing is recommend, the results of this study may help raise awareness that the impact on communication is larger than expected. The role of speech therapy in COPD treatment within the German Health Care system should be further investigated.