The British Lung Foundation Asthma Management Programme - Improving asthma control for children in Staffordshire

Background:

The 10-year asthma programme in Finland showed that informing and educating healthcare workers, patients and families leads to major reductions in hospital admissions and asthma-related deaths (1). The Department of Health and the Scottish Government funded a pilot project through the British Lung Foundation to determine whether an asthma improvement programme based on the Finland model could improve asthma control here in the UK (2).

Methods:

The project involved the training and education of doctors, nurses and other healthcare workers in 48 separate general practices in Staffordshire and Scotland. Here we report the Staffordshire experience. Data were then extracted from primary care databases to determine the effect of this primary care based intervention on reported asthma incidence, control (using the RCP 3 questions) and treatment.

Results:

The intervention involved practices serving populations of just over 250,000 in Staffordshire. Of these there were 2,804 children with a diagnosis of asthma in 2014 and 2,816 children with a diagnosis of asthma in 2015. Following the intervention there was a significant improvement (p<0.0001) in asthma control in children within participating practices in Staffordshire. In 2014 166/2804 (5.9%) had controlled asthma; 1646 had partly controlled asthma (58.7%); 603 (21.5%) had uncontrolled asthma and 389 (13.9%) had unknown asthma control. In 2015 the proportion with controlled asthma increased significantly with 753/2816 (26.7%) reporting controlled asthma; 1493 (53.0%) with partly controlled asthma, 218 (7.7%) with uncontrolled asthma and 352 (12.5%) with unknown control status. There were no significant effects on either the recorded incidence of asthma in children or the amount of treatment received.

Conclusions:

A multimodal and sustained educational intervention aimed at health care professionals in primary care results in highly significant improvements in reported asthma control in children within the population.

References:

1. Haahtela T, et al. Thorax 61, 663–670 (2006).

2. Lenney W, et al. Primary Care Resp Med 26, 15075 (2016).