SAND abstract No. 129 from the BEACH program 2008–09

Subject: Asthma in general practice patients

Issues: Prevalence of asthma in general practice patients; severity of asthma; frequency of general practice visits for any reason by patients with asthma; frequency of asthma management; types of medications taken by patients with asthma; involvement of practice nurse in asthma management.

Sample: 3,068 patients from 103 GPs; data collection period: 06/05/2008—09/06/2008.


Summary of results

The sex distribution of patients in this sample was similar to the sex distribution of all patients in BEACH in 2007–08. Compared with the overall BEACH sample in 2007–08, there were significantly fewer patients aged 15–24 years (6.9%, 95% CI: 5.7–8.1 compared with 9.5%, 95% CI: 9.0–9.9) and 25–44 years (18.5%, 95% CI: 16.5–20.5 compared with 23.4%, 95% CI: 22.7–24.1) and significantly more patients aged 75 years and over (19.2%, 95% CI: 16.5–22.0 compared with 14.7%, 95% CI: 13.9–15.5).

Of 3,068 patients, 461 (15.0%, 95% CI: 13.3–16.7) had been diagnosed with asthma. The highest prevalence of asthma was in patients aged 5–14 years (29.5%), followed by those aged 15–24 years (19.9%). There was no significant difference in the prevalence among male and female patients (14.3% and 15.4% respectively). Of the 456 patients with asthma for whom age was reported, 75 (16.5%) were classified as children (0–17 years) and 381 (83.6%) were adults (18 years and over).

Of the children with asthma, 72.7% had infrequent asthma and 2.6% had ‘persistent’ asthma. Of the 371 adults for whom severity was reported 39.9% had ‘very mild’ asthma, 32.1% had ‘mild’ asthma, 22.9% had ‘moderate’ asthma and 5.1% had ‘severe’ asthma.

Of 453 patients with asthma for whom visit frequency was recorded, 7.5% had not visited a GP in the previous 12 months for any reason and 22.5% had visited 2–4 times. The number of visits at which their asthma had been managed was reported for 447 patients. For 24.2% of these their asthma had been managed at one GP visit in the previous 12 months and 43.9% stated they had not had their asthma managed at all in the previous 12 months.

Information about medications taken for asthma was provided for 443 patients. There were 581 asthma medications being taken by 341 respondents. There were 102 patients not currently taking asthma medication. Short-acting beta-2 agonists (SABA) accounted for half of all medications (50.3%), and combination products of inhaled corticosteroids with long acting beta-2 agonists (ICS/LABA) accounted for 30.6%. At the generic level, salbutamol was the most common medication taken for asthma (45.4% of all medications), followed by fluticasone/salmeterol (21.0%). One in five patients was taking both a SABA and an ICS/LABA (21.0%). Of the 435 patients who responded to the question about practice nurse involvement with asthma management, 24 patients (5.5%) indicated that a practice nurse had been involved with their asthma management.

Correspondence to: Julie O’Halloran, AGPSCC
## Severity of asthma reference card

### Children

<table>
<thead>
<tr>
<th>Severity*</th>
<th>Common features</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infrequent episodic</td>
<td>Episodes 6-8 weeks or more apart and from 1 to 2 days up to 1-2 weeks duration; usually triggered by URTI or environmental allergen; attacks generally not severe; symptoms rare between attacks; normal examination and lung function except when symptomatic.</td>
</tr>
<tr>
<td>Frequent episodic</td>
<td>Attacks &lt;6 weeks apart; attacks more troublesome; minimal symptoms such as exercise induces wheeze between attacks; normal examination and lung function except when symptomatic; commonly troubled through winter months only.</td>
</tr>
<tr>
<td>Persistent</td>
<td>Symptoms most days; nocturnal asthma &gt; 1/wk with sleep disturbance; early morning chest tightness; exercise intolerance and spontaneous wheeze; daily use of beta2 antagonist; abnormal lung function; history of emergency room visits or hospital admissions.</td>
</tr>
</tbody>
</table>

### Adults

<table>
<thead>
<tr>
<th>Severity*</th>
<th>Common features</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very mild</td>
<td>Episodic</td>
</tr>
<tr>
<td>Mild</td>
<td>Occasional symptoms (up to 2/wk); exacerbations &gt;6-8 weeks apart; normal FEV1 when asymptomatic</td>
</tr>
<tr>
<td>Moderate</td>
<td>Symptoms most days; exacerbations &lt;6-8 weeks apart which affect day-time activity and sleep; exacerbations last several days; occasional emergency room visit.</td>
</tr>
<tr>
<td>Severe</td>
<td>Persistent; limited activity level; nocturnal symptoms &gt; 1/wk; frequent emergency room visits and hospital admission in past year; FEV1 may be significantly reduced between exacerbations.</td>
</tr>
</tbody>
</table>

* The severity classes are adapted from the NAC Asthma Management Handbook 1998 edition, updated March 2002
PLEASE READ CAREFULLY
The shaded section of the following forms asks questions about ASTHMA MANAGEMENT.
You may tear out this page as a guide to completing the following section of forms.

INSTRUCTIONS
Ask ALL of the next 30 PATIENTS the following questions in the order in which the patients are seen.
Please DO NOT select patients to suit the topic being investigated.

Presence of asthma
Please use the tick boxes to advise whether this patient suffers from asthma.
If 'no' you should end the questions here for this patient.
If 'yes' please answer the following questions about the patient’s asthma. You may need to ask the patient or check their notes. If you do not know the exact number please give your best estimations.

GP visits for asthma management
Please advise the approximate number of occasions when asthma was managed during the past 12 months, either as the main or secondary reason for the patient’s visit.

Severity of asthma
Please use the tick boxes to advise the current severity of this patient’s asthma. Use the ‘Severity of asthma reference card’ included in your research pack to estimate the severity level.

Number of visits to a GP
Please use the tick boxes to advise the approximate number of times the patient has consulted a GP for ANY reason, including asthma management, during the past 12 months. Do not include today’s visit in this estimation.

Previous management
If the patient’s asthma was not managed in the past 12 months, please advise how long since the most recent visit where asthma was managed.

Current medication use
Please advise the medications the patient is currently taking for asthma. In the space provided please give the name and form and regimen of each medication the patient is currently taking.
If the patient has NOT had their asthma managed in the past 12 months, how long (approximately) since asthma was last managed?

Has this patient ever been diagnosed with asthma?
☐ Yes
☐ No → End questions

Has the patient seen a nurse in this practice about their asthma?
☐ Yes - today
☐ Yes - in the past
☐ No

Practice nurse involvement
Please advise whether the nurse at this practice has been involved in the management of this patient’s asthma.

How many times has the patient visited a GP for any reason in the past 12 months (apart from today)?
☐ None
☐ 1-2 times
☐ 3-4 times
☐ 5-6 times
☐ >6

At how many visits was their asthma managed?
☐ None
☐ 1-2 visits
☐ 3-4 visits
☐ >4 visits