

European Respiratory Society Annual Congress 2012

Abstract Number: 4955

Publication Number: P2164

Abstract Group: 5.1. Airway Pharmacology and Treatment

Keyword 1: Asthma - management **Keyword 2:** Primary care **Keyword 3:** Pharmacology

Title: Patient and physician perspectives on asthma control and management strategies are discordant; a primary care survey in Canada

Prof. Kenneth R. 30793 Chapman kchapman@ca.inter.net MD ¹, Dr. Jacques 30794 Bouchard jacques.bouchard@videotron.ca ², Ms. Renata M. 30795 Rea renata.m.rea@gsk.com ³ and Dr. Graham W. 30796 Bishop brunswickbishop@aol.com ⁴. ¹ Asthma & Airway Centre, University Health Network, Toronto, ON, Canada, M5T 2S8 ; ² Clin Med Fam de la Malbaie, Clin Med Fam de la Malbaie, La Malbaie, QC, Canada, G5A 1W7 ; ³ Medical Affairs, GlaxoSmithKline Canada Inc., Mississauga, ON, Canada, L5N 6L4 and ⁴ Department of Medicine, Dalhousie University, St. John, NB, Canada, E2M 5J7 .

Body: Background: Patients and physicians' evaluations of asthma are often discordant. We undertook this study to compare prescribed management strategies to patients' actual strategies. Methods: In 136 primary care practices, patients with asthma described their control using the asthma control test (ACT), current medication use, number of caregivers and health care utilization. Their physicians provided their understanding of each patient's care while blinded to the patients' responses. Results: Of 904 patients (65% women, 21% current smokers), 54% had ACT scores < 20 although only 9% would describe their asthma as poorly controlled or uncontrolled. By contrast, 73% of physicians felt that the majority of patients had achieved control. In the 12 months prior, urgent care for uncontrolled asthma was obtained by patients in the following settings: 32% in their physicians' offices; 19% at a walk-in clinic; 13% in the emergency room; and, 3% in hospital. 21% of respondents had received at least one short course of prednisone. Of 247 patients described by their physicians as taking single maintenance and reliever therapy (SMART) only 60 (25%) used medications consistent with this regimen; 39% had separate relievers as well as their maintenance drug and 35% were not using a budesonide/formoterol inhaler. Conclusion: Physicians overestimate the asthma control achieved by their patients; in Canada, patients are commonly uncontrolled and have frequent need for urgent asthma care. Physicians have not successfully implemented SMART therapy, either because prescribing is confounded by other caregivers or because physicians misunderstand the strategy.