## **European Respiratory Society Annual Congress 2013**

**Abstract Number: 4830** 

**Publication Number:** P4312

Abstract Group: 7.2. Paediatric Asthma and Allergy

Keyword 1: Asthma - management Keyword 2: Lung function testing Keyword 3: Children

Title: Asthma control in children: Comparison of different lung function parameters

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**Body:** Background: Recently Green et al. reported a lack of agreement among common measures of asthma control in children (FE $_{NO}$ , spirometry, asthma control test; Chest 2013; 143: 117-122). In Germany bodyplethysmography is additionally widely used for asthma monitoring. However, its value is still not clear. Objectives: This study was undertaken to examine agreement between FE $_{NO}$ , spirometric and bodyplethysmographic measures and asthma control in children. Methods: As part of two preceding studies on fractionated breath condensate sampling in asthmatic children we measured exhaled nitric oxide (FE $_{NO}$ ), FEV $_1$ , FEV $_1$ /VC, FEF $_{25-75}$ , sR $_{tot}$ , RV/TLC and assessed asthma control in 85 asthmatic children (age 5-17 years). Z-scores for FEV $_1$  and FEF $_{25-75}$  were calculated with the desktop software by the Global Lung Initiative. Z-scores below -1.645, FEV $_1$ /VC < 80%, sR $_{tot}$  > 1,0 kPa\*s, FE $_{NO}$ > 35 ppb, RV/TLC > 0,33 were considered without normal limits, an asthma control test (ACT) score < 20 was considered as uncontrolled asthma. Agreement was analysed between ACT scores and each lung function parameter by kappa statistics. Results: 22/85 children were classified as uncontrolled asthmatics. Kappa quotients showed slight agreement for asthma control with FEF $_{75-25}$  (k: 0,105) and no agreement with RV/TLC (0,063), FEV $_1$  (0,051), FEV $_1$ /VC (0,015), FE $_{NO}$  (0,004), sR $_{tot}$  (-0,08). Conclusions: Bodyplethysmographic indices were not superior to spirometric parameters in terms of agreement with asthma control.