EDITORIAL

National review aims to reduce asthma deaths

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IN THE UK, AROUND 1,200 PEOPLE DIE FROM ASTHMA EVERY YEAR. STUDIES HAVE IDENTIFIED PREVENTABLE factors in more than 70% of asthma deaths.[1-3] The Health Survey for England 2010 found that asthma affects about 10% of the UK population, 40% of whom had suffered an asthma attack in the previous year.[4]

It is extremely encouraging that the Department of Health has funded a National Review of Asthma Deaths (NRAD). This has been commissioned by the Healthcare Quality Improvement Partnership. NRAD, led by the Royal College of Physicians, in collaboration with a consortium of professional bodies and patient organisations, will consider, in detail, all asthma deaths in the UK during the 12 months from 1 February 2012.

NRAD involves three processes: an in-depth prospective medical audit of the care of people thought to have died from asthma; a multidisciplinary confidential enquiry to determine which deaths were caused by asthma; and interviews with a selected sample of bereaved families to gain a better insight into the effect asthma had on the life of the sufferer.

With the help of a multidisciplinary group of clinicians, all experts in asthma care, and patient representatives, NRAD has agreed a set of 26 asthma management standards, based on current UK asthma guidelines,[5] to be used as a benchmark for determining the quality of care provided for these patients.

NRAD will help to establish an accurate figure for the annual number of deaths from asthma in the UK. The review will also determine the nature and prevalence of preventable or avoidable factors in the management of these individuals. Any lessons learned will form the basis of recommendations for planning and implementing improved care for asthma patients.

Continuing medical education includes significant event analysis and medical audit. Through reflection on practice, utilising both these activities, clinicians are able to learn lessons from their management of patients. Those who are participating in the NRAD, by auditing the records of their own patients who have died from asthma or by joining the confidential enquiry panels, will be able to learn from these cases as well as provide evidence towards their own revalidation. GPs taking part will be able to include this in their appraisal documentation.

Structured care for asthma patients includes assessment of asthma control, appropriate adjustment of treatment and providing patients with asthma action plans to help them recognise attacks and know when to call for help.

The fact that the 2010 Health Survey found about 40% of people with asthma had had an attack in the past 12 months demonstrates that we are not managing these patients effectively. This is important and relevant as there is recent evidence that patients with poor asthma control are six times more likely to have an attack.[6]

‘Studies have identified preventable factors in more than 70% of asthma deaths’

There is thus an urgent need to ensure that assessment of asthma control, to reduce attacks, hospitalisations and therefore deaths, becomes part of an asthma review by health professionals.[7]

Asthma UK has launched a new test – Triple A: Avoid Asthma Attacks – in an innovative approach to help patients assess their own asthma control and encourage them to seek assistance from their doctors (www.asthma.org.uk).

NRAD will also be evaluating the management of patients’ asthma in the 12 months before they died; this will provide vital information in terms of current routine provision of asthma care.

Further information and details on how to participate in the review (UK clinicians) are available from: www.rcplondon.ac.uk/NRAD

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