

Asthma in Practice Position Paper 4

Asthma management: The Patient's Perspective

Østrem A, Thomas M, Price D, van der Molen T, van Schayck CP

Many patients have poorly controlled asthma, though many will often over-estimate control unless asked specific questions.¹

Practice Point 1: Eliciting poor control is crucial to good asthma management. Ask specific key questions about sleep disturbance, daytime symptoms (persistent cough, wheezing, cough on exertion), exacerbations and relationship between symptoms and interference with daily activities.

Factors other than lung function or airways inflammation may affect control, and these vary between individual patients. Cigarette smoking adversely affects asthma control. Compared to non-smokers, smokers with mild, persistent asthma are less sensitive to the therapeutic effects of low-dose ICS treatment.² Clinically diagnosed allergic rhinitis is associated with significantly worse asthma control.^{3,4} Dysfunctional breathing may be responsible for apparent poor asthma control.⁵ Moreover, asthma patients' perception of dyspnoea affects consultation frequency. "Hyper-perceivers" are more likely to consult their GP.⁶ Depression, panic, anxiety and socio-economic factors are also all positively correlated with asthma symptoms.⁷

Psychosocial factors and poor adherence factors may be responsible for at least a quarter of cases of poor control in people with severe asthma,^{8, 9} suggesting a need to characterise patients with severe asthma to ensure appropriate treatment.

Practice Point 2: Identify patients whose persisting symptoms may be related to co-morbid factors, such as: COPD, smoking, rhinitis, dysfunctional breathing and anxiety/depression. Targeted treatment of co-morbid factors may improve asthma control.

Many factors contribute to the level of adherence to treatment, including beliefs about the benefits of the treatment, concerns about potential adverse effects of treatment, perceived asthma severity and duration of asthma. Many patients experience asthma as an intermittent problem and this belief is associated with poor adherence and poor outcomes. Many patients report that they do not receive enough information for them to appreciate fully the importance of taking their medication as prescribed.

Practice Point 4: Work with patients to address their needs and increase their expectations of treatment thereby, potentially, improving asthma control. Identify patient's coping style, health beliefs and concerns.

References

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