

OP-05

HOW WELL CONTROLLED ARE ASTHMA PATIENTS IN PAKISTAN

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OBJECTIVE: Asthma is common problem in developing countries like Pakistan. Quality of life of asthma patient is dependent on the level of asthma control. A variety of methods have been used to assess the level of disease control. We used Asthma control test (ACT), a relatively new tool, which is based on five simple questions that are answered by the patient in an out patient setting. Each question has a score of 0 to 5. A score of 25 is considered as "total control", between 20-24 "well control" and <20 as "poor control".

METHOD: Asthmatics, as labeled by their physician, and who were >12yrs were included in this study. A standard ACT questionnaire was administered by a junior doctor before the patient was seen by the consultants.

RESULT: 150 patients were included. 68 (45%) were male and 82(55%) female. 61(41%) were first time attendees and 89(59%) follow-ups. 46(31%) patients were in the step 1 management of asthma as defined by the ATS/ERS, and 52(34.5%) in stage 2 and 3. Of these patients only 10(7.0%) patients had an ACT score of 25. 47(31.0%) had a score between 20-24 and 93 (62%) patients had a score < 20. 57(61%) patients with 'poorly controlled' asthma were females.

CONCLUSION: As assessed by this particular tool, over 60% of patients visiting the chest clinic have poorly controlled asthma. There is a need for further studies in developing countries to find out the reasons for the poor control of asthma.

OP-06

RECENT SERIOUS EXACERBATION IS A KEY PREDICTOR OF UNCONTROLLED ASTHMA

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BACKGROUND: Various factors are thought to influence the level of asthma control, but systematical data on the involvement of these factors in the severity of asthma exacerbations are scarce. In this study, we investigated whether patients with uncontrolled asthma differ with respect to various exogenous and endogenous factors and the predictive value of these factors in predicting current disease control.

METHODS: Eighteen adult patients with uncontrolled asthma who have a history of a recent serious exacerbation were compared with 22 controlled asthma patients. Serious exacerbation of asthma is defined initiations of systemic corticosteroid as part of the management for aggravated asthma condition. Uncontrolled asthma was defined as an absence of control despite optimal management. Control was measured using the Asthma Control Questionnaire.

RESULTS: Fifty-four percent of subjects had severe, 32% had moderate, 4% had mild persistent asthma. A systematic diagnostic protocol was used to assess the potential risk factors. Factors significantly associated with control of disease included: chronic sinus disease (odds ratio (OR) 2.3), FEV1% (OR=1.6), and recent severe exacerbations (OR=6.8), whereas recent severe exacerbation was the only independently associated factor for disease control (adjusted OR=4.9; p=0.001).

CONCLUSION: Although pulmonary function, some co-morbid factors, and recent serious asthma exacerbation predict current disease control, recent serious exacerbation history is the strongest independent factor predicting asthma control. Adding a history of severe asthma exacerbation to the asthma control measures is likely to improve the ability of these clinical tools to predict current disease control and future clinical course.

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