

Modifiable Risk Factors in patients referred to Severe Asthma Services: Implications for Primary Care Education and Referral

Could medicine optimisation and improved patient adherence in primary care reduce the number of patients referred to the secondary care difficult asthma service?

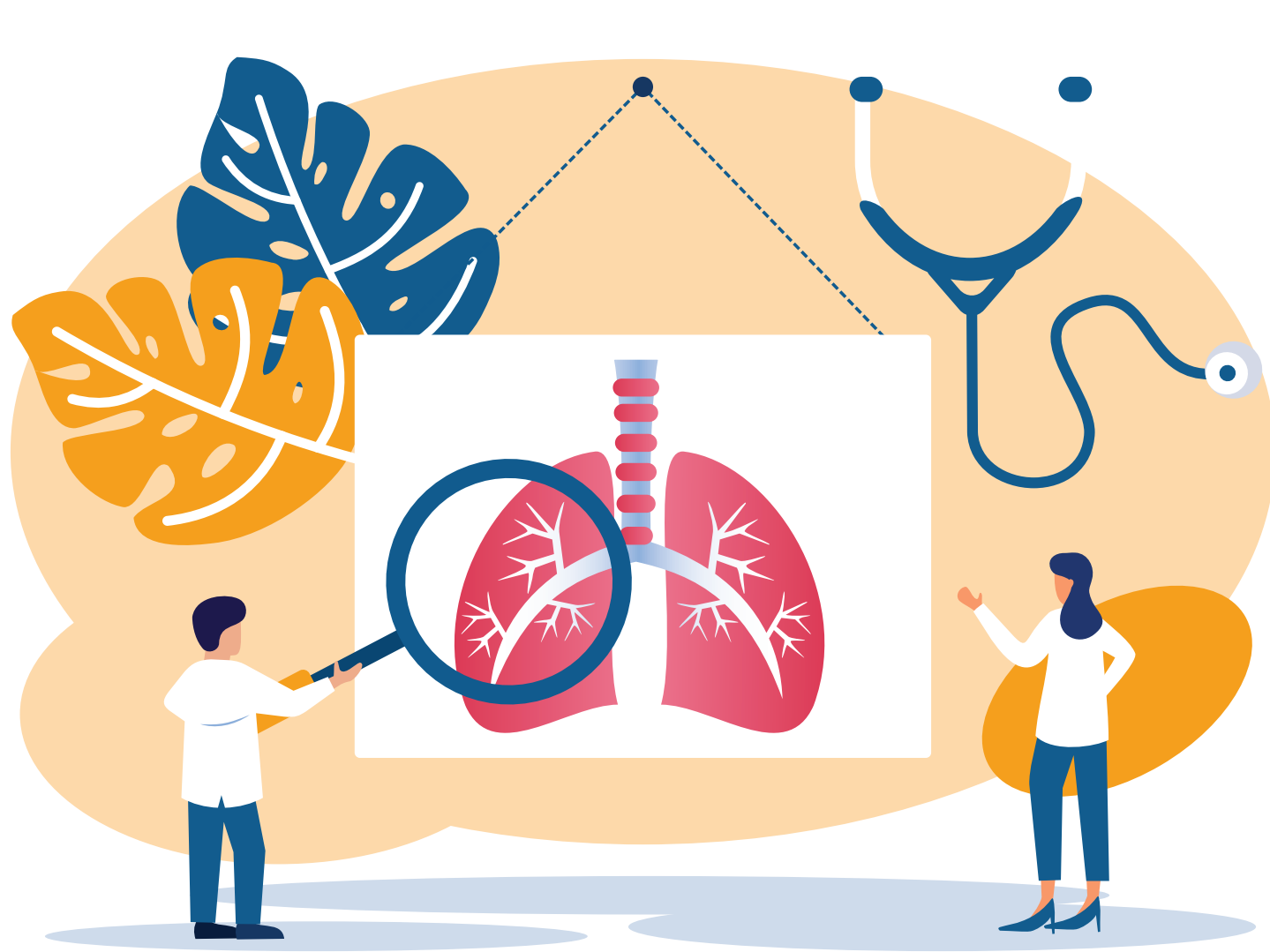
Sonia Greenwood¹, Michelle O’Driscoll¹, Samantha Beswick¹, John Haughney², Eddie McKnight¹
1 - National Services for Health Improvement (NSHI) 2 - Honorary Senior Clinical Research Fellow, University of Aberdeen

Background
NSHI delivered nurse-led triage for patients referred to severe asthma centres (CSA) across eight NHS Trust and Health Boards in England and Wales.

Data was analysed to define whether modifiable risk factors (MRF) treated in Primary Care could reduce admissions/referrals.

Clinical Context
Non-adherence, smoking, inadequate medication, GORD and absent Personalised asthma action plan (PAAP) are strongly associated with asthma morbidity and preventable admissions¹²³. These factors could be identified in Primary Care.

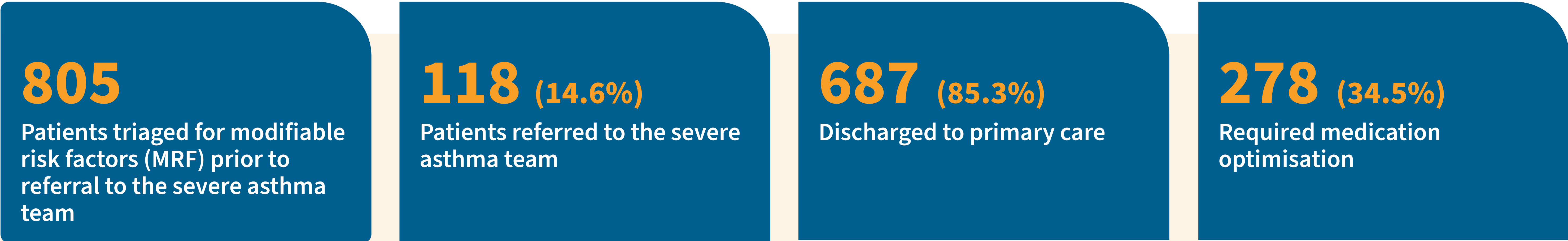
Conclusions
Medicine optimisation was achieved in all MRF Groups, suggesting that this together with training the patient on effective inhaler technique and counselling on medicines adherence should be done routinely in primary care and prior to referral. The greater the number of MRF the higher percentage of patients who required optimisation. patient.



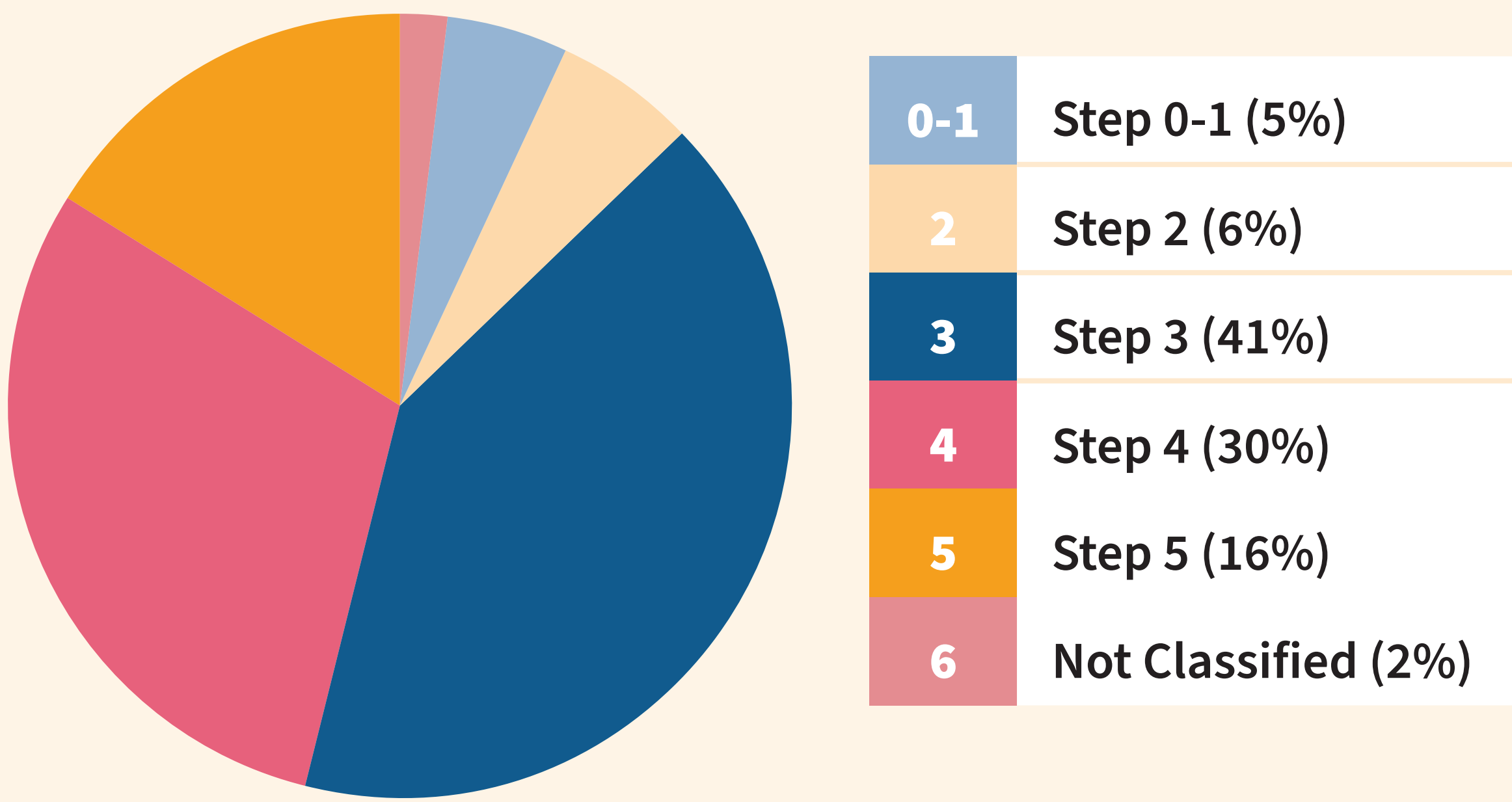
Service Impact
Review 1
89.5%
With ≥1 MRF
Reduction in MRF across all parameters. 500 patients discharged after 1 review

Discussion
66.2% of patients were discharged to GP without specialist escalation suggesting structured primary care review could have deferred/avoided referral.

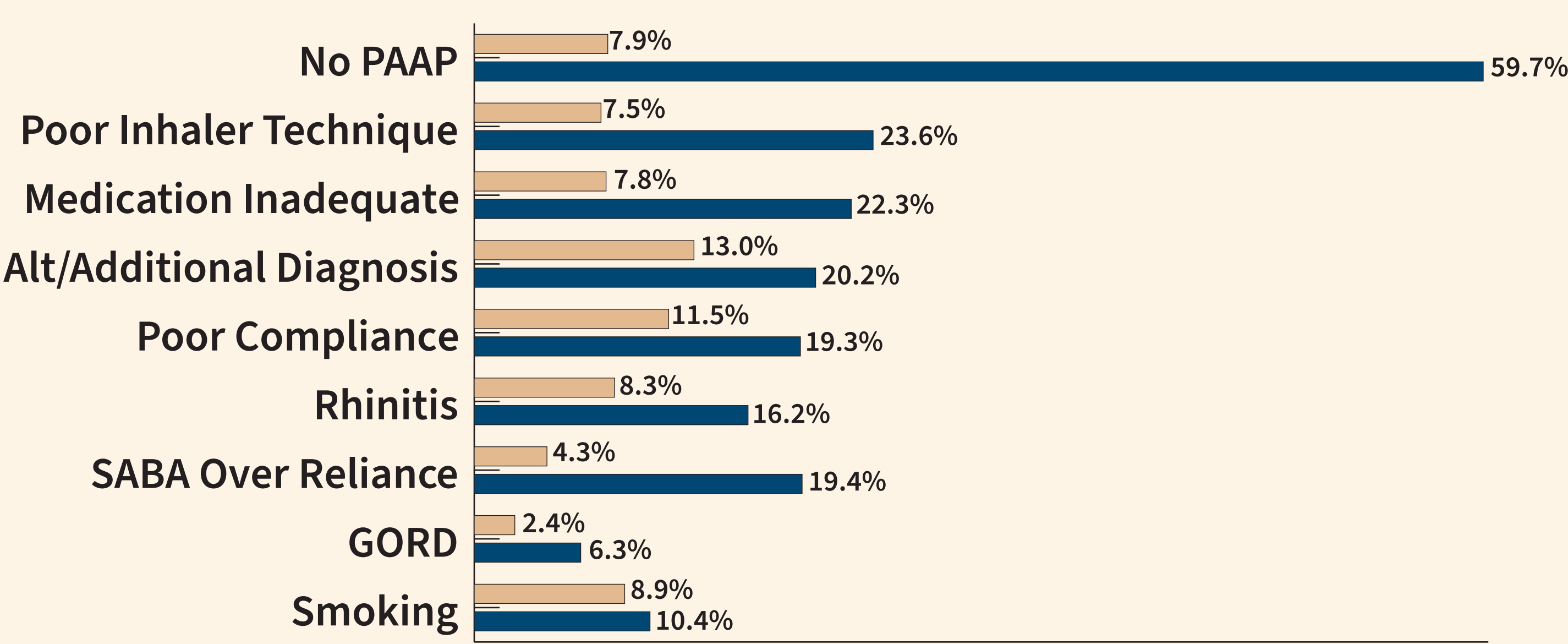
The CSA service functioned as an effective triage demonstrating value in this nurse-led model.



BTS³ Distribution at initial review - based on 2019 stepwise



MRF Prevalence*



*Patients may have more ≥ 1 MRF
■ First review
■ Second review

References
1 GINA (2026) ginasthma.org/2026-gina-strategy-report/
2 NICE (2024) nice.org.uk/guidance/ng245
3 BTS/SIGN (2019) <https://www.brit-thoracic.org.uk/document-library/guidelines/asthma/btssign-guideline-for-the-management-of-asthma-2019-sign-158/>

Chiesi Limited has provided an arm’s length grant to NSHI to support the management of uncontrolled patients within Severe Asthma Centres during 2025