

Integrated Therapy for Breathlessness & Cough: Why Speech & Physiotherapy Belong in Neighbourhood Care

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WHY WE NEEDED CHANGE:

Chronic breathlessness and cough are major drivers of healthcare utilisation and place a disproportionate burden on communities experiencing socioeconomic deprivation.

Traditional single-specialty approaches frequently fail to address the multifactorial causes of symptoms. The Assessment of Breathing Clinic (ABC) was developed as an integrated MDT service bringing together medical, nursing and therapy expertise to identify treatable traits, support self-management and improve care planning.

KEY ACTIVITY:

Referrals Received	457
Offered Assessment	448
Attended Assessment	365
Mean Age	62
Female	64%

HEALTH INEQUALITIES:

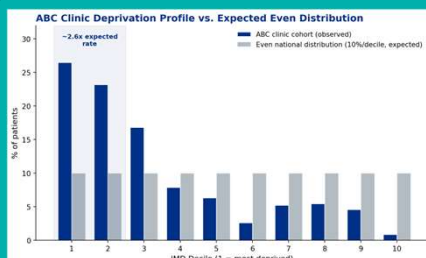


Figure 3. IMD distribution of ABC referrals compared with expected national distribution.

66%

Of patients lived within the 2 most deprived IMD Deciles

KEY MESSAGE:

Patients from **the most deprived communities** were substantially **over-represented** within the service, emphasising the **need for neighbourhood-based models** capable of addressing complexity, access and healthcare inequalities.

THE ABC MODEL:

ABC Clinic: Multidisciplinary Breathlessness & Cough Pathway

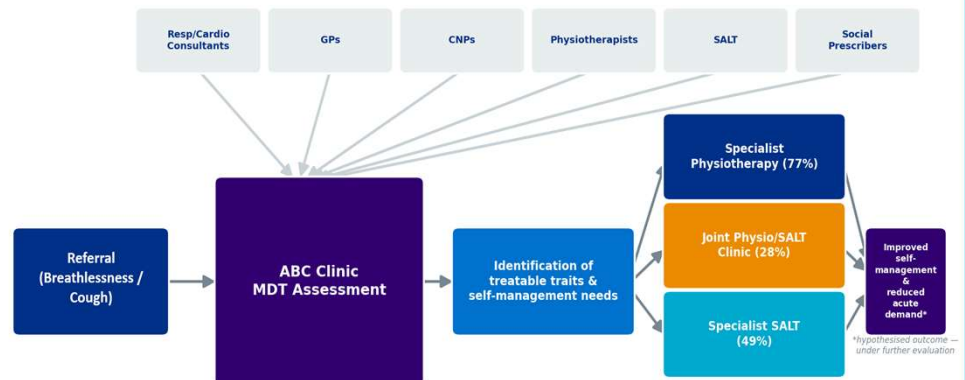


Figure 1. Integrated MDT pathway demonstrating the central role of assessment, identification of treatable traits and referral into specialist Physiotherapy and SALT services.

THERAPY INPUT IS NOT OPTIONAL:

Following MDT assessment:

- 77% required specialist Physiotherapy
- 49% required specialist SALT
- 28% required joint intervention

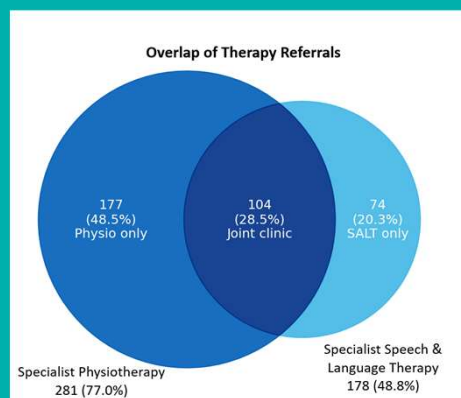


Figure 2. Overlap of Physiotherapy and SALT referrals following MDT assessment.

KEY MESSAGE:

Nearly **80%** of patients required specialist **Physiotherapy** and almost **half** required **SALT** input. This highlights the importance of integrated therapy within breathlessness and cough pathways.

CONCLUSIONS:

- ✓ Physiotherapy and SALT formed a substantial component of MDT care.
- ✓ A high proportion of patients required non-pharmacological intervention.
- ✓ Joint working between Physiotherapy and SALT was common.
- ✓ The service reached communities experiencing significant deprivation.
- ✓ Integrated therapy appears feasible and valuable within neighbourhood breathlessness pathways.

TAKE HOME MESSAGE:

Physiotherapy and Speech & Language Therapy should be viewed as **integral**, rather than adjunct components of, multidisciplinary breathlessness and cough services. Embedding therapy within MDT assessment supports the identification of treatable traits and more appropriate care planning in populations with high healthcare need.