

Therapy Guide

Asthma and COPD



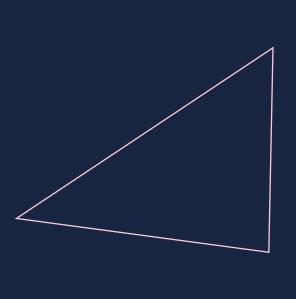
The GKA Difference

Conditions that affect the respiratory system, be they chronic such as asthma or progressive such as chronic obstructive pulmonary disease or COPD, can greatly impact the quality of life. With huge market potential on a global scale, it is little wonder that it is a highly attractive and competitive arena for healthcare companies.

Despite their relatively high incidence rates, and even though patients tend to take a more active role in the management of their condition, asthma and COPD can be particularly challenging when it comes to conducting healthcare market research studies. To deal with reduced patient mobility and an often over-contacted patient population, effective fieldwork agencies such as GKA are using creative approaches to successfully recruit and research an active patient population.

In fact, thanks to its innovative techniques, GKA now has extensive experience across COPD and asthma. GKA have recruited for a range of methodologies including face to face, online (including online focus goups and communities) and telephone. As a result, it has built a very strong panel comprising GP's, chest physicians, practice and respiratory nurses as well as key opinion leaders and therefore the fieldwork agency is ideally placed to offer effective solutions to many healthcare market research problems.





The Lowdown

Asthma is a common long-term or chronic condition that affects the smaller airways (bronchioles) of the lung. It can cause coughing, wheezing, chest tightness and breathlessness. The extent of the narrowing, and how long each episode lasts, can vary greatly¹. While asthma can usually be kept under control symptoms can occasionally worsen in what is known as an asthma attack or an exacerbation². Sadly, severe asthma can lead to death if left untreated, with adults four times more likely to die from a severe asthma attack than children¹⁶.

COPD is the name used to describe a number of conditions affecting the lungs, such as emphysema and chronic bronchitis. COPD is a progressive illness and patients can suffer from more than one condition. Their airways become inflamed and the air sacs in the lungs are damaged making it harder to breathe. This can make day-to-day activities difficult³. There is no cure for COPD but there are treatments available to help manage the condition, improve the symptoms and thus quality of life.

Some facts and figures about Asthma and COPD



5.4 million

people in the UK are currently receiving treatment for asthma



Women

are more affected by asthma than men



3 million

people in the UK affected by COPD



Is the main cause of COPD

- 1 http://www.patient.co.uk/health/asthma-leaflet
- 2 http://www.nhs.uk/Conditions/Asthma/Pages/Introduction.aspx
- 3 http://www.blf.org.uk/Page/what-is-COPD

Understanding Asthma and COPD

Asthma can start at any age but it most commonly starts in childhood. Some 5.4 million people in the UK are currently receiving treatment for asthma; at least 1 in every 12 adults and 1 in every 11 children. Asthma in adults is more common in women than men⁴.

COPD usually affects people over the age of 35 who are, or have been, heavy smokers. While some 900,000 people have been diagnosed with COPD in the UK, it is estimated the true number could be over 3 million⁵,

Causes



While asthma is caused by inflammation in the airways, it is not clear why this inflammation occurs. However, it can be triggered by a range of factors such as pollen, house dust mites, animal fur, cigarette smoke, viral infections and even exercise. Asthma can be inherited but many people with asthma have no other family members affected. It can occur at any age⁶.

The main cause of COPD is smoking but it can also be caused by long-term exposure environmental factors such as pollution, fumes and dust from the workplace. People with long-term severe asthma, can also develop COPD. Although unusual, it can also be inherited through a genetic condition called alpha-1 antitrypsin deficiency⁷.

Symptoms



The symptoms of asthma tend to range from mild to severe with most people only experiencing them occasionally. The main symptoms, which often worsen at night or early in the morning, include: wheezing, shortness of breath, a tight or constricted chest, and coughing. While some people see attacks build over several days, others experience the rapid and unexpected onset of symptoms⁸.

Typical symptoms of COPD include: increasing breathlessness when active, a persistent cough with phlegm, and frequent chest infections⁹. People with COPD may experience these symptoms all the time, or the symptoms might appear and/or become worse when they have an infection or breathe in smoke or fumes¹⁰.

- 4 http://www.nhs.uk/Conditions/Asthma/Pages/Introduction.aspx
- 5 www.hse.gov.uk (Chronic Obstructive Pulmonary Disease (COPD) in Great Britain in 2014)
- 6 http://www.nhs.uk/Conditions/Asthma/Pages/Introduction.aspx
- 7 http://www.blf.org.uk/Page/causes-and-symptoms-of-COPD
- 8 http://www.nhs.uk/Conditions/Asthma/Pages/Symptoms.aspx



Diagnosis



Asthma can be difficult to diagnose in children as many of the tests are not suitable for them. As with COPD, Asthma is diagnosed using tests such as a spirometer and a peak flow meter. Other methods used to diagnose the condition include testing the airways for signs of inflammation either through a mucus sample or by testing the concentration of nitric oxide on exhalation. Some patients may also be tested for specific allergies¹¹.

Most people are not diagnosed with COPD until they are in their 50s. The earlier people are diagnosed, the sooner treatment can start to slow down the deterioration of the lungs¹². COPD is diagnosed through a lung function test using a spirometer. A spirometer takes two measurements: the volume of air a patient can breathe out in one second (known as a forced expiratory volume) and the total amount of air you breathe out (forced vital capacity). In addition, a blood test, chest x-ray, electrocardiogram, echocardiogram or peak flow meter may also be used to confirm the diagnosis¹³.

- 9 http://www.nhs.uk/conditions/chronic-obstructive-pulmonary-disease/Pages/Introduction.aspx 10. http://www.bif.org.uk/Page/causes=and-symptoms-of-COPD
- 11 http://www.nhs.uk/Conditions/Asthma/Pages/Diagnosis.aspx
- 12 http://www.nhs.uk/conditions/chronic-obstructive-pulmonary-disease/Pages/Introduction.aspx
- 13 http://www.nhs.uk/Conditions/Chronic-obstructive-pulmonary-disease/Pages/Diagnosis.aspx

Treating Asthma and COPD

People with asthma tend to use two medicines, both delivered via an inhaler. One is used to prevent symptoms and the other to relieve them. A preventer inhaler is used every day to prevent symptoms from developing and usually contains a steroid to reduce inflammation. On the other hand, the reliever inhaler is used to ease symptoms once they occur and works by relaxing the muscle in the airways allowing them to open more fully. Some people may take a long-acting bronchodilator as well as their preventer inhaler. However, while inhalers work well in most patients, others may have to take additional, oral steroids to effectively manage their condition¹⁴.

There are a number of medicines that can help relieve the symptoms of COPD. The type of medicine prescribed depends on the severity of the condition and the symptoms but they are usually oral medicines or drugs delivered via inhalers.

Oral medicines range from theophylline tablets, which relax the airways, to mucolytic tablets, which thin the mucus making it easier to cough up phlegm. Some

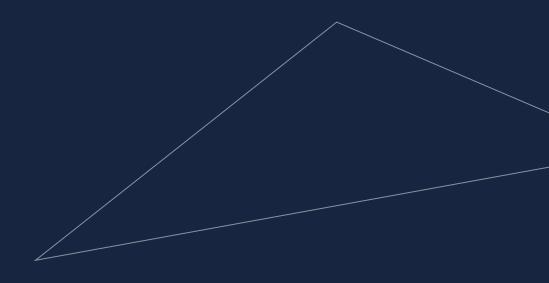
patients also use steroids or antibiotics.

Inhaled medicines used to treat COPD include:

- Short-acting and long-acting bronchodilators such as beta-2 agonist inhalers (eg: salbutamol) or antimuscarinic inhalers (eg: ipratropium)
- Corticosteroid inhalers¹⁵

- 14 http://www.patient.co.uk/health/asthma-leaflet
- ${\tt 15-http://www.nhs.uk/Conditions/Chronic-obstructive-pulmonary-disease/Pages/Treatment.aspx}$
- 16 https://www.aafa.org/asthma-facts





We are GKA.

If you have been asked to carry out a healthcare market research study surrounding COPD, Asthma or one of the related conditions, why not give us a call today?