Addressing the burden of respiratory disease in General Practice: A real-life implementation study focusing on high risk asthma and COPD patients

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Administrative details

PURI

https://redirect.ema.europa.eu/resource/38200

EU PAS number

EUPAS38199

Study ID

38200

DARWIN EU® study

No

Study countries

] Australia

Study description

To identify high-risk asthma and COPD patients and reduce subsequent avoidable hospitalisations through a focused approach on the prevention of frequent disease flare-ups (exacerbations) and improved management of chronic and complex health conditions, associated with preventable factors.

Study status

Planned

Research institutions and networks

Institutions

Woolcock Institute of Medical Research

First published: 01/02/2024

Last updated: 01/02/2024

Institution

Networks

Optimum Patient Care (OPC) Network United Kingdom (Northern Ireland)

First published: 26/09/2015

Last updated: 14/08/2024



ENCePP partner

Contact details

Study institution contact

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Study contact

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Primary lead investigator

Sinthia Bosnic-Anticevich

Primary lead investigator

Study timelines

Date when funding contract was signed

Planned: 16/11/2020

Study start date

Planned: 01/02/2021

Date of final study report

Planned: 28/02/2023

Sources of funding

- Pharmaceutical company and other private sector
- Other

More details on funding

GSK, Observational Pragmatic Research Institute

Regulatory

Was the study required by a regulatory body?

No

Is the study required by a Risk Management Plan (RMP)?

Not applicable

Methodological aspects

Study type

Study type list

Study type:

Not applicable

Scope of the study:

Assessment of risk minimisation measure implementation or effectiveness Disease epidemiology Drug utilisation

Effectiveness study (incl. comparative)

Main study objective:

To identify patients with a COPD and/or asthma diagnosis at high risk of exacerbation utilising technology to support improved disease management by primary care providers and reduce the high-cost burden of respiratory events on the health care system by preventing otherwise avoidable hospitalisations.

Study drug and medical condition

Medical condition to be studied

Chronic obstructive pulmonary disease
Asthma

Population studied

Age groups

Adults (18 to < 46 years)

Adults (46 to < 65 years)

Adults (65 to < 75 years)

Adults (75 to < 85 years)

Adults (85 years and over)

Estimated number of subjects

2748

Study design details

Outcomes

For asthma exacerbations, a 20% reduction in exacerbations is anticipated. For COPD exacerbations, a 20% reduction in exacerbations is anticipated. Time to first, and rate of, asthma-related crisis events for at-risk patients. The percentage of all registered asthma patients with an asthma-related crisis event, their rate of, and time to, first asthma-related crisis events.

Data analysis plan

The OPC Clinical Audit consists of an electronic clinical audit using secure and confidential patient data from GP sites. Patients with asthma and/or COPD including a screen for undiagnosed COPD will be included. Patient-reported outcomes will be collected for identified high-risk asthma and COPD patients. A list of patients at risk of exacerbation or that have undiagnosed COPD will be generated (re-identified) and invited to the study as part of the Audit Group. A face-to-face review of the re-identified high-risk patients with the practice nurse followed up with a consultation with the GP utilising clinical decision support advice from OPC.

Data management

ENCePP Seal

Composition of steering group and observers

Sinthia Bosnic-Anticevich_CV.pdf(602.04 KB)

Data sources

Data source(s)

Optimum Patient Care Research Database

Data source(s), other

Optimum Patient Care Research Database (OPCRD)

Data sources (types)

Administrative healthcare records (e.g., claims)

Use of a Common Data Model (CDM)

CDM mapping

No

Data quality specifications

Check conformance

Unknown

Check completeness

Unknown

Check stability

Unknown

Check logical consistency

Unknown

Data characterisation

Data characterisation conducted

No