# Determining the prevalence of severe asthma in children in UK primary care

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### Administrative details

#### **EU PAS number**

EUPAS50650

#### **Study ID**

50651

#### DARWIN EU® study

No

#### **Study countries**

United Kingdom

#### **Study description**

It is a retrospective epidemiological database study that aims to determine the annual prevalence of severe asthma in children in the UK community using primary care data, and applying different criteria for defining severe asthma.

#### Study status

Ongoing

# Research institutions and networks

### Networks

Respiratory Effectiveness Group (REG)
Belgium
Denmark
France
Germany
Greece
Hungary
Italy
Netherlands
Spain
Sweden
United Kingdom
First published: 07/07/2021
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Network ENCePP partner

### Contact details

Study institution contact

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Study contact

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Primary lead investigator Steve Turner Primary lead investigator

# Study timelines

Date when funding contract was signed Planned: 18/01/2023 Actual: 18/01/2023

**Study start date** Planned: 12/06/2023 Actual: 28/06/2023

Date of final study report Planned: 30/09/2024

# Sources of funding

• Pharmaceutical company and other private sector

### More details on funding

Sanofi

# 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:

Non-interventional study

#### Scope of the study:

Disease epidemiology Drug utilisation

#### Main study objective:

A descriptive characterisation of children with potentially severe asthma including a comparison between those who have been referred to a secondary care specialist with those who have not been referred.

# Study Design

#### Non-interventional study design

Other

#### Non-interventional study design, other

Retrospective epidemiological database study

# Study drug and medical condition

#### Medical condition to be studied

Asthma

### **Population studied**

#### Age groups

Children (2 to < 12 years) Adolescents (12 to < 18 years)

#### **Estimated number of subjects**

0

# Study design details

#### Outcomes

1) To determine the annual incidence of children in UK with severe asthma using primary care data. 2) Applying different criteria for defining severe asthma (ref: Ahmed H, Turner S. Severe asthma in children-a review of definitions, epidemiology, and treatment options in 2019. Pediatr Pulmonol. 2019 Jun,54(6):778-787. doi: 10.1002/ppul.24317. Epub 2019 Mar 18. PMID: 30884194). The annual incidence of: 1. new-onset severe asthma in children with asthma, 2. prevalence of high SABA use, 3. referral to a secondary care specialist, 4. children meeting the NICE eligibility criteria for biologic treatment, 5.children with severe asthma referred to a secondary care specialist with those who are not referred to a secondary care specialist and remain treated solely in UK primary.

#### Data analysis plan

The data for the 2-5 yr age group and the 6-16 yr old age group will each be analysed separately. We will calculate the percentage of patients with severe asthma that are identified in the patient's primary care records by GPs as having severe asthma, and also the percentage of patient's who are identified in the UK primary care records by GPs as having severe asthma despite not meeting our criteria for severe asthma. The 2 cohorts, those referred to a secondary care specialist and those not referred to a secondary care specialist, will be compared. Continuous variables will be given a mean and standard deviation, and differences in characteristics between the groups assessed with Kruskal-Wallis tests. Categorical variables will be given as count and percentage by category, and differences in characteristics between the groups will be assessed with chi-squared tests/Fisher's exact tests. The incidence of severe asthma remission of children who met the criteria will also be calculated.

### Data management

Data sources

#### Data source(s)

**Optimum Patient Care Research Database** 

### **Data sources (types)** Electronic healthcare records (EHR) Other

#### Data sources (types), other

Historical electronic medical records (EMRs)

### 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