

COVID-19 & Asthma Care Policy Takeaways

CONTEXT

The pandemic has affected the way we care for patients with asthma in several ways. Most drastically, loss of access to lung function testing has severely affected practitioner's ability to diagnose and monitor asthma symptoms.

How has limited access to spirometry testing affected asthma patient care?

Spirometry testing is used for asthma diagnosis, monitoring and follow-up. Lack of capacity in spirometry testing has long been an issue across the country. Pre-pandemic, more than half of asthmatics were already not being offered spirometry tests despite the fact that spirometry is needed to properly diagnose asthma. These issues have now been exacerbated as labs are working at a very limited capacity.

One Ottawa study found that if you take individuals who have been diagnosed with asthma without the use of spirometry, one-third of them don't actually have asthma when properly tested. Likely during the pandemic, more people are being diagnosed with asthma and treated for asthma that don't actually have the disease.

In addition to this, lung function testing is used to monitor the management of asthma. Once practitioners lose the ability to test, they must rely on symptoms to determine whether a patient has declining lung function. Making determinations solely based on symptoms is unreliable and could translate into more acute events including emergency room visits and hospitalizations.

How have patients with severe asthma, in particular, been impacted by the pandemic?

The pandemic has had a much more profound personal impact on individuals with severe asthma. There is growing evidence around how COVID-19 interacts with asthma that indicates that asthmatics are overrepresented in diagnostics cohorts. While this is likely due to the fact that asthmatics are being tested disproportionately, evidence suggests that individuals with severe asthma are more vulnerable to severe illness and death if they contract COVID-19. In particular, individuals with severe asthma who are using steroids as a treatment option are susceptible to complications given their immunocompromised status.

The pandemic has spotlighted the consequences of missed opportunities for chronic disease management. The symptoms associated with asthma exacerbations, for instance, are very similar to those of COVID-19. This leads to both testing and hospital capacity being overburdened due to the mismanagement of asthmatic patients. A key lesson coming from this is the need to ensure implementation of asthma quality standards. For adult patients with severe asthma, there continues to be challenges and knowledge gaps among healthcare providers in diagnosing and treating severe asthma.

Clinicians face barriers to effectively following the standards including time constraints, lack of training and knowledge, work flow issues etc. and must be empowered with the proper tools and resources to do so.

Key Policy Takeaways

1. Increase availability and access to spirometry testing.

Even before COVID-19, average wait time for spirometry testing in Canada was about 4.51 weeks. It is critical that greater access to spirometry testing in conjunction with practitioner training and quality assurance practices are pursued.

2. Promote the need to properly implement asthma quality standards and provide clinicians with the appropriate tools to do so.

Provinces including Ontario have released quality standards for adults with asthma, yet we see that in practice not all of the standards are being implemented. Technologies have been designed to aid clinicians in implementing standards, however there remains a need to promote the use of these innovations.

3. Enhance the use of certified respiratory educators (CRE) in asthma management.

CRE's can play a crucial role in helping asthma patients understand and manage their disease yet there are only 1,362 across Canada and they are underutilized. A strategy that encourages more professionals to become certified as respiratory educators, and examines their role to determine where they can be better utilized should be developed.