

## Asthma

When designing asthma services, consider the following interventions as ways to achieve specific productivity improvements whilst maintaining the quality and safety of clinical care. This approach is being trialled as a beta product alongside the Map of Medicine Asthma in adults and Asthma in children and adolescents pathways, which cover all areas of a patient's care.

### Inhaler therapy

#### Inhaled corticosteroid (ICS) therapy

Prescribe the least costly ICS device.<sup>1,2</sup>

National Institute for Health and Clinical Excellence (NICE) guidance on ICS for the treatment of chronic asthma in children younger than age 12 years, published in 2007, concluded that there was no difference in clinical effectiveness between different ICSs, either at low or high doses.<sup>1</sup> Therefore, it is recommended that for those in whom treatment with an ICS is recommended, the least costly device should be used.<sup>1</sup>

NICE guidance on ICS for the treatment of chronic asthma in adults and children age 12 years and older, published in 2008, concluded that there was no difference in clinical effectiveness between different ICSs, either at low or high doses.<sup>2</sup> Therefore, it is recommended that for those in whom treatment with an ICS is recommended, the least costly device should be used.<sup>2</sup>

#### ICS plus long-acting beta agonist (LABA) therapy

Prescribe the least costly single combination device, rather than separate devices, when introducing a LABA for patients already taking ICS therapy.<sup>1,2</sup>

NICE guidance on ICS for the treatment of chronic asthma in children younger than age 12 years, published in 2007, concluded that treatment with an ICS plus a LABA in a single combination device was at least as clinically effective as using the same therapies in separate devices.<sup>1</sup> The use of a single combination device is cost-saving compared with using separate devices.<sup>1</sup> For the budesonide/formoterol combination device, yearly savings range from £35 to £190 per patient, while yearly savings for the fluticasone/salmeterol device range from £132 to £274.<sup>1</sup>

NICE guidance on ICS for the treatment of chronic asthma in adults and in children age 12 years and older, published in 2008, concluded that treatment with an ICS plus a LABA in a single combination device was at least as clinically effective as using the same therapies in separate devices.<sup>2</sup> The use of a single combination device is cost-saving compared with using separate devices.<sup>2</sup> For the budesonide/formoterol combination device, yearly savings range from £36 to £227 per patient, while yearly savings for the fluticasone/salmeterol device range from £39 to £185.<sup>1</sup>

#### Key dates

The Map of Medicine systematically monitors the medical literature for the latest productivity interventions and will update this document as new evidence emerges.

Last update: 28-Jan-2011

Version: 1.0

#### Methodology

The productivity considerations presented in this document are relevant to the UK. They were identified by systematically searching for and appraising productivity evidence from multiple sources, including NICE guidance, health economic databases and Zynx Health (a sister company of Map of Medicine).

A productivity message explicitly states interventions that can reduce the cost of care, whilst maintaining or improving patient outcomes. Actions that are believed to lead to improved productivity, but lack unequivocal clinical or economic evidence, are not included.

Some productivity considerations are informed by more recent evidence than that included in relevant national guidelines.

The document has been peer reviewed by an independent group of experts.

#### Feedback

This approach to productivity guidance is being trialled as a beta product alongside the Map of Medicine Asthma in adults and Asthma in children and adolescents pathways. We welcome your feedback. If you know of additional resources that describe cost-effective interventions, please forward the reference information to us at [productivity@mapofmedicine.com](mailto:productivity@mapofmedicine.com).

#### References

1. National Institute for Clinical Excellence (NICE). [Inhaled corticosteroids for the treatment of chronic asthma in children under the age of 12 years](#). Technology Appraisal Guidance 131. London: NICE; 2007.
2. National Institute for Clinical Excellence (NICE). [Inhaled corticosteroids for the treatment of chronic asthma in adults and in children aged 12 years and over](#). Technology Appraisal Guidance 138. London: NICE; 2008.

#### Disclaimer

This document is not to be substituted for a healthcare professional's diagnosis or clinical decisions.