190 Abstracts

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ABS17: Linking evidence to policy — lessons from the national evaluation of the Asthma 3+ Visit Plan in Australia

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Introduction: The Asthma 3+ Visit Plan (rewarding systematic asthma care in primary care) is unique to Australia. Based on the Six Step Asthma Plan, it comprises three GP visits over four months for patients with moderate to severe asthma. GPs receive an incentive payment on completion of the three visits. Objectives: The Aim was to establish the degree of uptake of the Plan. Objectives included identifying barriers and enhancers to uptake for consumers and GPs. Subjects: GPs, CP or a risations and consumers (including non English speaking and Aboriginal and Torres Strait Islander peoples).

Methods:

- Statistical analysis of Medicare CF or vm 2nt data
- A semi structured phone interview of all 120 National GP Organisations
- A GP Survey (of a stratified sample of GPs)
- Consumer interviews
- Focus groups with non English speaking Australians
- Aboriginal and Torres Strait Islanders uptake analysis

Data from all these elements were analysed and triangulated and this paper reports on this extensive analysis. *Results*: Uptake remains low and has not increased notably since a peak six months after introduction in 2001. Key barriers identified were:

- Structure of the incentive
- Lack of consumer education
- General Practice systems

The current Plan is not appropriate for Aboriginal and Torres Strait Islander or CALD populations. *Conclusion*: A "one size fits all" policy does not meet the range of needs across the Australian community. The value of rewarding systematic asthma care in primary care was however demonstrated. Flexibility, multi-disciplinary participation and a recognition of differing practice circumstances is required and efficient general practice systems are demonstrated as the key to systematic chronic disease interventions. Consumer education is needed around preventive health care.

Conflict of interest and funding

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ABS18: Role of hypertonic saline in bronchoprovocation for the diagnosis of bronchial asthma

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Introduction: Bronchoprovocation is performed to evaluate bronchial hyper-responsiveness. Almost all asthma patients demonstrate bronchial hyper-responsiveness. and method: 50 non-smoking adults with complaints of breathlessness, cough, chest tightness & positive family history of bronchial asthma, baseline FEV1 > 70% of predicted (mean FEV1 = 84, median value = 81.7) were included in this study. Patients underwent bronchoprovocation using methacholine followed by hypertonic saline, 7 days apart or vice versa. Results: Of 50 patients, 34 were male,16 were female with a mean age of 26.44 years. With 1 mg/ml of methacholine fall of FEV1 > 20%, 10-20%, <10% was observed in 36 (72%), 8 (16%) & 6 (12%) patients respectively. With 14% hypertonic saline >20% fall was observed in 32 (64%), >10-20% in 4 (8%), 5-10% in 2 (4%) & <5% in 2 (4%) patients. No response was observed in 10 patients. Conclusion: This study shows that hypertonic saline is an equally effective but more specific bronchoprovocative agent than methacholine in bronchial asthma. Since hypertonic saline is very cheap and easily available, we propose that it should be considered as a reliable bronchoprovocative agent for the diagnosis of bronchial asthma in poor countries.

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ABS19: Parents perception; or astima in children aged 2-5

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Introduction: There is reluctance on the part of clinicians to diagnosis asthma in young children consequently parents of children with asthma express anxieties about how to manage their child's symptoms. Objective: To explore the significance of a diagnosis on parents. Methods: The purposive sample consisted of parents of 28 children with newly diagnosed asthma aged 2–5 years. Data were analysed using the principles of grounded theory. Results: During the pre-diagnosis phase parents learned that asthma is variable. Conflicting advice from professionals influencing their view about preventative treatment. Parents had few concerns about steroids although this view changed by the 2nd interview. Conclusion: Parents views of asthma were shaped by the events leading up to the diagnosis and these influenced how they managed the condition now and in the future.

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ABS20: Developing a community based spirometry service for east London

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Introduction: Spirometry is the gold standard for the diagnosis and classification of severity in chronic obstructive pulmonary disease (COPD). It also provides a valuable tool