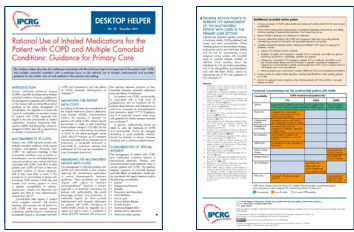


IPCRG President's Report 2020

Breathing and feeling well through universal access to right care



www.ipcrg.org/desktophelpers

www.ipcrg.org

Desktop helpers and position papers

Teach the Teacher programmes eg Children with Asthma; Treating Tobacco Dependence

E-Quality "bottom up" programmes responding to open calls for innovative education pilots

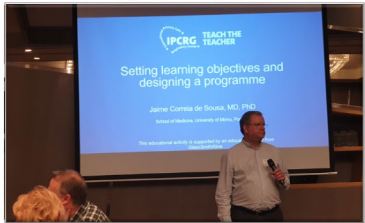
E-learning eg Medscape partnership on difficult to manage asthma

Research capacity building eg Research Schools, peer review of protocols, abstracts and papers

Opportunities to present research for peer review, network and collaborate eg world conferences

Research prizes and small grants for pilots

Talent spotting and mentoring new researchers



Teach the Teacher Malaysia



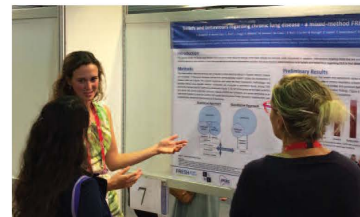
Breathe Well study, China



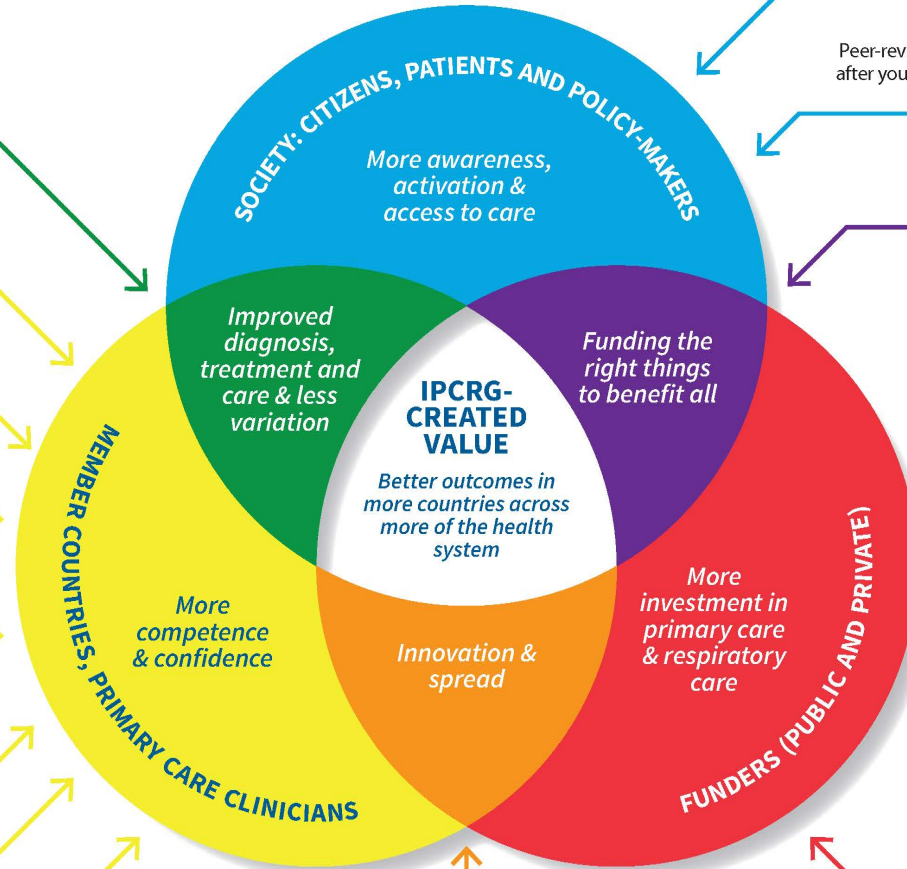
Prizewinners at 2019 Scientific Meeting, Slovenia



Research School Prizewinners Project Team



Supporting Early Career Researchers



Public events at conferences

Peer-reviewed recommendations about looking after your respiratory health from IPCRC, national members and trusted partners

Patient engagement in projects via patient representative organisations eg GAAPP, and individuals

Meaningful and feasible proposals for education, research and leadership programmes eg Asthma Right Care, FRESH AIR, UNLOCK

Dissemination of research findings eg FRESH AIR, RESPIRE, Breathe Well, Global RECHARGE

High value opportunities at our conferences and meetings to build partnerships and to showcase the value of primary care and its multi-disciplinary workforce



World COPD Day - Bangladesh



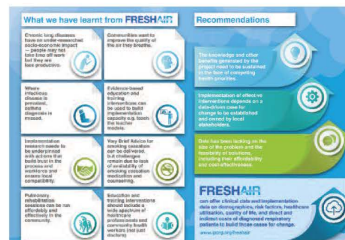
Experience-led care workshop on personalisation in asthma care



www.ipcrg.org/asthmarightcare



Porto Conference 2018



FRESH AIR findings infographic: www.theipcrg.org/freshair



IPCRC world activities map

- Asthma Right Care
- Breathe Well
- Children with Asthma
- Conference
- FreshAir
- Global Bridges
- Join 2019
- Medscape
- RECHARGE
- RESPIRE

2019 Highlights

International Primary Care • 6th IPCRG Scientific Meeting
IPCRG
Respiratory Group •
24-25 May 2019, Bucharest, Romania



ASTHMA RIGHT CARE

CHANGE THE CONVERSATION



ASTHMA SLIDE RULE

1. Questions for prescriber/dispenser to ask themselves and a person with asthma
Using this slide rule, how much short-acting beta₂ agonist (SABA) also known as reliever/rescue/salbutamol/albuterol inhaler would you think was acceptable for a person with asthma to take in a year, week or day before you thought a review was necessary? What made you choose that?



	Increasing SABA use*											
Number of SABA inhalers Rx per year	1	2	3	4	5	6	7	8	9	10	11	12
Puffs of SABA used per year	200	400	600	800	1000	1200	1400	1600	1800	2000	2200	2400
Puffs of SABA used per week	4	8	12	15	19	23	27	31	35	39	42	46
Puffs of SABA used per day	<1	1	2	2	3	>3	4	>4	5	6	>6	7
Symptoms												

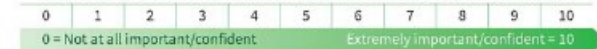
*Some devices do not contain 200 puffs. Check the number in the devices you prescribe/dispense or use, and modify these messages accordingly
Suggestion: Try asking a person with asthma question 1 after asking the ACT™ question: (www.nip.org/provider/asthma/Survey_ACT_atdall_EN.pdf)
During the past 4 weeks, how often have you used your rescue inhaler or nebulizer medication (such as albuterol):
3 or more times per day / 1 or 2 times per day / 2 or 3 times per week / Once a week or less / Not at all
Asthma Right Care Guidance Notes available at www.ipcrg.org/asthmarightcare



ASTHMA SLIDE RULE (reverse side: push slider back to left to begin)

2. Questions for prescriber to ask themselves and a person with asthma
Reflecting on your answer to Question 1, and using the number scale 0-10 below, slide to the number that reflects:

- How important is it that you organise a review? What made you select [number]? What would have made it a higher number [eg 8]
- How confident do you feel to have a conversation about reducing the dose? What made you select [number]? What would have made it a higher number [eg 8]?

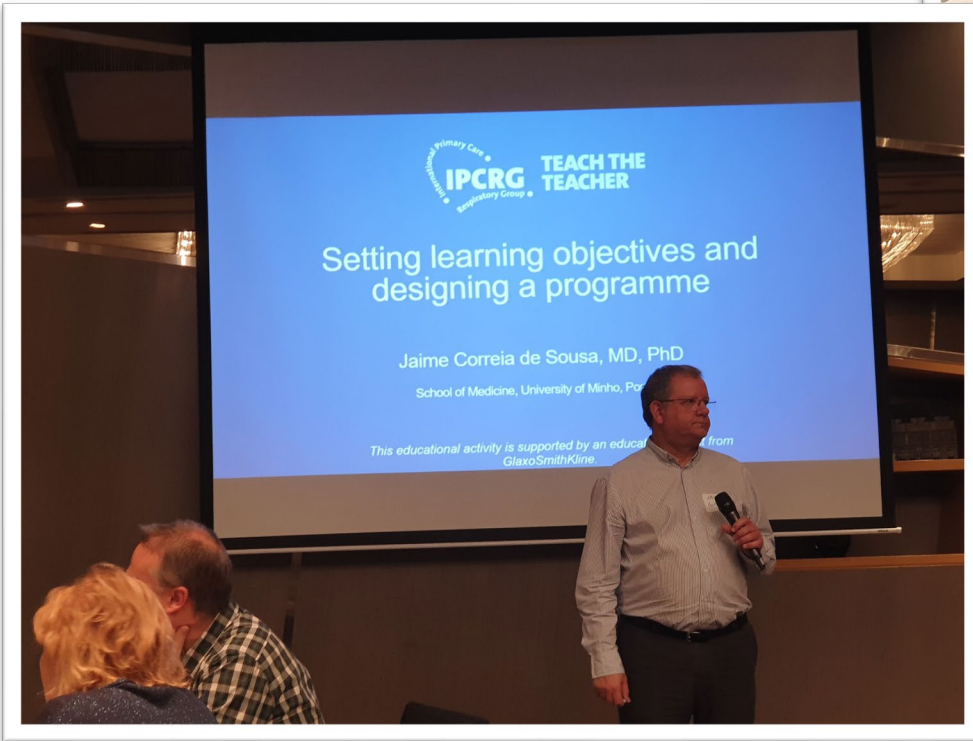


Note: Global Strategy for Asthma Management and Prevention 2018 (www.ginasthma.org) guidance is that SABAs alone are only for adolescents or adults with asthma who have just daytime symptoms of a few hours less than twice a month, no night waking in the last month and normal lung function. Anyone experiencing more symptoms or who has risk factors for an asthma attack needs to have their prescribing reviewed to include an inhaled corticosteroid (ICS).

Created and designed by IPCRC www.ipcrg.org/aboutus
IPCRC received funding from AstraZeneca to develop the Asthma Right Care Initiative



www.ipcrg.org/asthmarightcare



From Medscape Education

Identifying Severe Asthma in Primary Care Practice and When to Refer

Authors: Hilary Pinnock, MD; Jaime Correia de Sousa, MD, MSc, PhD; Catalina Panaitescu, MD **Faculty and Disclosures**

CPD Released: 9/27/2019 **Valid for credit through:** 9/27/2020

Educational Impact Challenge

The goal of this activity is to increase knowledge on the assessment of patients with uncontrolled asthma in order to improve competence in early identification and referral of severe asthma patients.

Before you begin this activity, please assess your clinical knowledge by completing this brief survey. Answering these questions again after the activity will allow you to see what you learned and to compare your answers with those of your peers.

Question 1 of 4

The 'SIMPLES' review process is a structured primary care management approach in adults with uncontrolled and difficult to manage asthma. Which of the following criteria is evaluated in this structured review process?



[CPD Information](#)

[Download Slides](#)

[Activity transcript](#)

[Additional Resources](#)

GHRN (Global Health Respiratory Network)



THE UNIVERSITY
of EDINBURGH



RECHARGE



UNIVERSITY
of York



International Multidisciplinary
Programme to Address
Lung Health & TB in Africa





RECHARGE



BUILDING RESEARCH ACROSS
THE WORLD IN LUNG DISEASE

FUNDED BY

NIHR | National Institute
for Health Research



Breathing and feeling well through universal access to right care

What we have learnt from FRESHAIR

Chronic lung diseases have an under-researched socio-economic impact — people may not take time off work but they are less productive.



Communities want to improve the quality of the air they breathe.



Where infectious disease is prevalent, asthma diagnosis is missed.



Evidence-based education and training interventions can be used to build implementation capacity e.g. teach the teacher models.



Implementation research needs to be underpinned with actions that build trust in the process and workforce and ensure local compatibility.



Very Brief Advice for smoking cessation can be delivered, but challenges remain due to lack of availability of smoking cessation medication and counselling.



Pulmonary rehabilitation sessions can be run affordably and effectively in the community.



Education and training interventions should include a wide spectrum of healthcare professionals and community health workers (not just doctors).



Recommendations

The knowledge and other benefits generated by the project need to be sustained in the face of competing health priorities.



Implementation of effective interventions depends on a data-driven case for change to be established and owned by local stakeholders.



Data has been lacking on the size of the problem and the feasibility of solutions, including their affordability and cost-effectiveness.



FRESHAIR

can offer clinical data and implementation data on demographics, risk factors, healthcare utilisation, quality of life, and direct and indirect costs of diagnosed respiratory patients to build those cases for change.

www.ipcr.org/freshair





GLOBAL ALLIANCE AGAINST CHRONIC RESPIRATORY DISEASES

Breathing and feeling well through universal access to right care



10th IPCRG
WORLD
CONFERENCE
DUBLIN 2021
Breathing & Living Well
CROKE PARK • 6–8 MAY

Breathing and feeling well through universal access to right care



**Makerere University Lung
Institute (MLI), Uganda**



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More to celebrate in 2020

Breathing and feeling well through universal access to right care



About us Conferences Network Projects Themes Resources News Q

COVID-19 open source sources of information

Click here to access our list of useful information on COVID-19 which will be updated regularly



Research Prioritisation

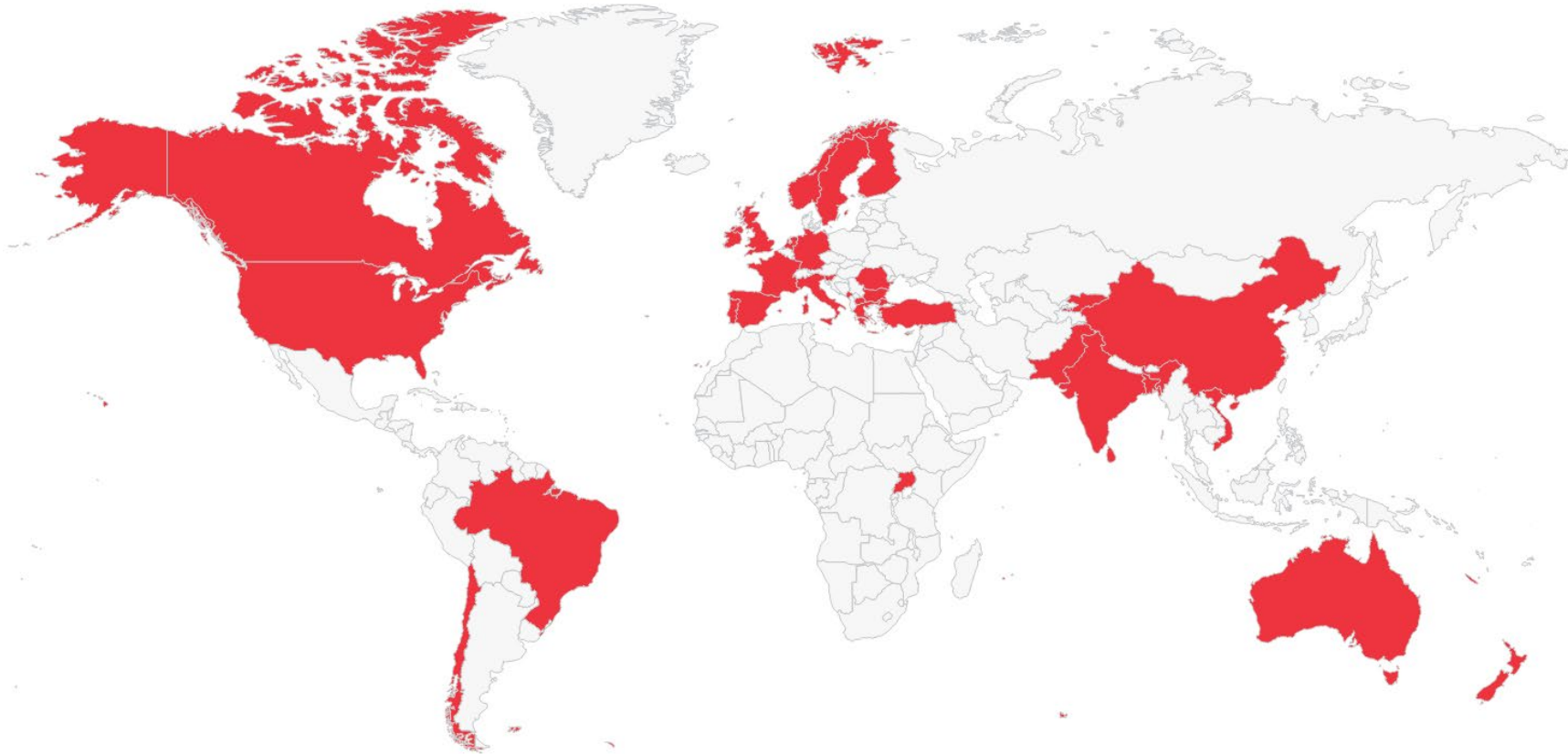


Breathing and feeling well through universal access to right care

**New ideas that we hope
will come to fruition in
the next 2 years...**

Breathing and feeling well through universal access to right care

IPCRG Network



Professor Ioanna Tsiligianni
IPCRG President

Breathing and feeling well through universal access to right care