

FRESH AIR Uganda Study

Letter 3: November 2011

Since the IPCRG Scientific Meeting in May 2010 in Amsterdam a lot has happened. Eventually we received a grant of € 150.000,- from MundiPharma. The terms and conditions were signed between with the IPCRG during the ERS in September in Amsterdam. The University Medical Center Groningen (UMCG), receiving the fund from the IPCRG, will sponsor the survey, and work in close collaboration with the Leiden University Medical Center (LUMC), University of Makerere (Uganda) and Mulago Hospital (Uganda).

The research protocol of the FRESH AIR UGANDA survey has been submitted to the Research and Ethics Committee of the University of Makerere. In addition, a summary of the protocol, translations of the questionnaires (Swahili and Lunyoro), done by the University of Makerere, a collaboration agreement between UMCG and UoM, informed consent and certificate of consent (also translated in Swahili and Lunyoro), data collection items and curriculum vitae of all the researchers, has been included.

The survey is planned to start in February 2012 and will take about 4 months. The survey will call for at least 300 men and 300 women, aged 30 years and older in 4 rural areas in Masindi district, using pre-BD spirometry and a validated screening questionnaire. The participants with an airflow limitation will undergo a post-BD spirometry with the CCQ. This section of the survey will be conducted by local healthcare workers (nurses and health officers). The indoor pollution levels will be measured with a SidePak device, and be conducted by medical students. At the same time they will use a semi-structured questionnaire investigating local cooking tradition amongst patients with COPD.

During the first 2 months and thereafter the second 2 months, 2 medical students (one from UMCG and one from UoM) will be in Masindi and do a lot of work. They will conduct the measurements with the SidePak and have close contact with the healthcare workers conducting the spirometry, as they will collect all the measurements on a weekly basis, and email the results to the UMCG. The 2 students will have a major responsibility and help the local healthcare workers as much as they can. They will be a sort of jack-of-all-trades. The physicians in Uganda are willing to coordinate the field activities and go to Masindi whenever needed (it's a 3½ hour drive).

At the same time, an education program will start for all healthcare workers in Masindi District (nurses, health officers and clinical officers). This will be coordinated by one of the physicians in Kampala and John Turyagaruka, the District Health Officer of Masindi. At the beginning of the survey, the first education programs will be initiated by Thys van der Molen personally.

A major priority will be to increase the awareness amongst physicians and other healthcare workers about the health effects of biomass fuel smoke inhalation and tobacco use, which can improve prevention actions as well as diagnosis and treatment of affected persons. The results of this survey will be vital to provide key policy-makers with convincing evidence for the impact of COPD on local communities and the implementation of culturally appropriate interventions to control COPD and its risk factors.

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