

# ASTHMA CONTROL IN CANADA™ SURVEY

2016

B R E A T H E  
the lung association

BREATHING *as* ONE.

# BREATHING PASSION AND COMPASSION

Our reason for being can really be summed up in one word: Breathe. The Lung Association is the leading organization in Canada working to promote lung health and prevent and manage lung disease. We do this by funding vital research, pushing for improved treatments, going to bat for smarter policies, and helping patients manage their health.

Through a strong federated model of 10 provincial organizations, a national office, and a partnership with the Canadian Thoracic Society, we are the go-to resource for patients, their families, caregivers, health professionals and the general community. We are a leading organization in Canada working to save lives, and prevent and improve lung health through research, advocacy, education and support.

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# THE LUNG ASSOCIATION'S GOAL

To lead the way to breathing breakthroughs through research, policies and programs.

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# TABLE OF CONTENTS

3	Preface
4	Foreword
5	Executive Summary
6	Key Insights and Findings: A False Sense of Control
8	The Impact of Poor Asthma Management in Canada
9	A Way Forward
10	References

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#### **Advisory Committee**

Dr. Paul O'Byrne, Respiriologist, Dean and VP McMaster Health Sciences; Jaimie Peters, Registered Nurse, Certified Respiratory Educator, Lung Association of Saskatchewan; Carole Madeley, Registered Respiratory Therapist, Certified Respiratory Educator, Ontario Lung Association.

Citations of this report should read: The Lung Association, Asthma Control in Canada™ Survey, 2016.

## PREFACE



**DEBRA LYNKOWSKI**  
CEO, The Lung Association

“Based on these collective insights, we have reason to be positive about the future and feel empowered to drive change. There is a clear path forward.”

Canada is at a crossroads in understanding and managing lung health. An estimated 317 people<sup>1</sup> are diagnosed with asthma every day in Canada, with our health care system accommodating more than 70,000 emergency room visits per year from those affected.<sup>2</sup>

While there is no cure for asthma, it can be treated and symptoms managed so Canadians can live an active and relatively symptom-free life. For most people living with asthma, it is possible to achieve good, even excellent, asthma control. If a person with asthma experiences many asthma attacks – a sudden worsening of asthma symptoms – their asthma is likely not as controlled as it could be.

Canadians with asthma deserve an improved quality of life. At the same time, our health care system is strained. It is estimated that by the year 2030, asthma will cost Canadians more than \$4 billion per year, which is double its current cost to the economy.<sup>3</sup>

As an organization committed to helping Canadians breathe easier, The Lung Association recently commissioned a national survey reaching out to Canadians living with asthma and general practitioners (GPs) who treat

asthma. Our goal was to better understand the current asthma landscape in Canada. The survey also probed to understand how we can work together to address potential challenges identified in the survey. In 2012, The Conference Board of Canada also released a compelling cost risk analysis identifying opportunities for policy changes that would reduce the prevalence of asthma as well as result in significant cost savings.

Based on these collective insights, we have reason to be positive about the future and feel empowered to drive change. There is a clear path forward. By working together, those living with asthma, healthcare professionals and policy makers alike can relieve the physical, social and financial impact of the disease.

The Lung Association is committed to increasing awareness and education to get asthma under control. We will continue to identify gaps in asthma management and opportunities for advancements in policy and care. And we will harness the collective power and passion of everyone who cares about breathing to ensure that all Canadians can breathe easier in the future.

A handwritten signature in black ink, which appears to be 'Debra Lynkowski'.

# FOREWORD



**PAUL O'BYRNE,**  
Respirologist,  
Dean and VP  
McMaster Health Sciences

**“The purpose of asthma management is to achieve total asthma control.”<sup>4,5</sup>**

As I look over the past decade in asthma management, the unfortunate reality is that asthma control in Canada remains relatively unchanged. As we embarked on this project, I had hoped to see an improvement in the understanding of proper asthma management by patients, given the availability of effective and generally safe medications in Canada. The Asthma Control in Canada™ Survey however, confirmed that asthma management in our country has not noticeably improved over the last 10 years.

Asthma control falls under two domains: current control which reflects the day-to-day symptoms, and future risk, which consists of asthma exacerbations or flare-ups that results in irreversible decrease in lung function, and possible side-effects from asthma medications.<sup>4</sup>

What is evident is that as healthcare professionals, we need to work more closely with our patients to clearly communicate

what asthma control is. The message is not being heard or internalized; this is having a greater impact beyond the individual, to our already strained healthcare system.

Severe asthma exacerbations can occur in any person with asthma, and its impact can be long-term. The fact is most severe exacerbations develop gradually over five to seven days, and when not recognized, result in an event requiring urgent medical intervention.<sup>6,7</sup>

The Asthma Control in Canada™ Survey highlights an issue that my peers and I continue to observe and have written about extensively; the greatest opportunity to further improve outcomes in patients with asthma is to increase adherence to the effective treatments that are available in this country.

I hope this new survey reinforces this message. As healthcare professionals we can work more closely with our patients living with asthma so they understand that for the majority, asthma control is possible.

# EXECUTIVE SUMMARY

## BACKGROUND

A reported 2.4 million Canadians are living with asthma.<sup>8</sup> Asthma is a serious chronic lung disease mainly caused by inflammation of the airways in the lungs. It is often accompanied by wheezing, tightness in the chest and/or coughing that vary over time. Though there is no cure for asthma, with proper treatment, people living with asthma can lead normal and active lives.

The Lung Association commissioned a national survey – Asthma Control in Canada™ – of Canadians living with asthma and GPs who treat asthma, to get a better understanding of the asthma landscape in Canada and how this data can help inform meaningful change for asthma management in Canada.

## Methodology

A survey of 1,002 Canadians with asthma and 101 GPs who treat asthma, was completed online between July 25 and August 14, 2016 using Leger Marketing's online panel, LegerWeb.

A probability sample of the same size would yield a margin of error of +/-3.1%, 19 times out of 20 for the consumer portion and +/-9.8%, 19 times out of 20 for the GP portion. Serving as advisors on the project were Dr. Paul O'Byrne, Respirologist, Dean and VP, McMaster Health Sciences; Jaimie Peters, Registered Nurse, Certified Respiratory Educator, Lung Association of Saskatchewan; and Carole Madeley, Registered Respiratory Therapist, Certified Respiratory Educator, Ontario Lung Association.

## ASTHMA IS NOT WELL-CONTROLLED IF A PATIENT ANSWERS **YES** TO ONE OR MORE QUESTIONS

### Defining Asthma Control

According to the most recent (2012) Canadian Thoracic Society Guidelines,<sup>9</sup> asthma is not well-controlled if a patient answers yes to one or more of a series of questions, including, have you:

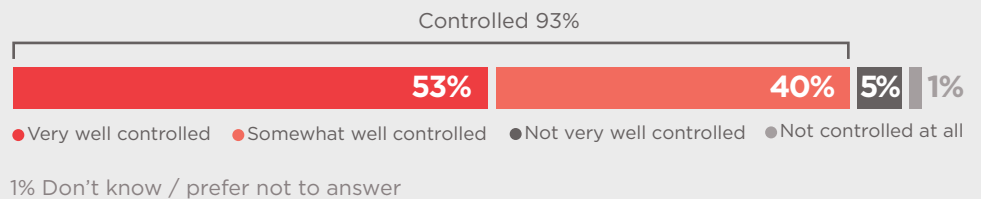
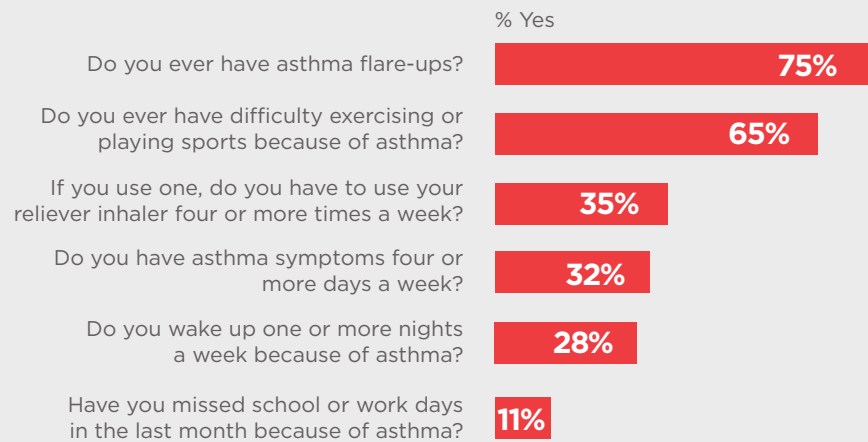
- Missed school or work days in the last month due to your asthma?
- Woken up one or more nights a week because of asthma?
- Had asthma symptoms four or more days a week?
- Used your reliever inhaler four or more times a week?
- Had difficulty exercising or playing sports due to your asthma?
- Recently had asthma flare-ups?

### Asthma is well-controlled if:<sup>9</sup>

- A patient experiences daytime asthma symptoms three times a week or less
- A patient doesn't miss school or work because of asthma symptoms
- A patient's asthma doesn't get in the way of exercise and physical activity
- A patient's symptoms disturb sleep only one night a week, or not at all
- A patient needs rescue medicine (blue puffer) less than four times a week

# KEY INSIGHTS AND FINDINGS: A FALSE SENSE OF CONTROL

90%  
SAY YES TO AT LEAST  
ONE STATEMENT



Through the Asthma Control in Canada™ Survey, The Lung Association's goal was to uncover if Canadians with asthma understood what optimal management of asthma is, and what barriers may be preventing asthma control in our country.

The findings identified barriers to proper asthma control, including perceptions about the seriousness of asthma, as well as behavioural and financial considerations.

## Canadians living with asthma don't understand what it means to have their asthma under control.<sup>10</sup>

- The survey found that 93% of Canadians with asthma believe their condition is "well-controlled"
- Nine in 10 Canadians with asthma do not have it under control per the definition of control defined by the Canadian Thoracic Society Guidelines criteria (page 5)

**Despite the availability of effective medications, not all Canadians with asthma are adhering to treatment as prescribed by their physician.<sup>10</sup>**

- 14% of Canadians with asthma (translating into about 336,000 Canadians) are not taking their medication as prescribed
- Among those saying they do not take their medication as prescribed by their doctor, 65% only take it when they need it
- Of those not taking their medication as prescribed, 27% do not like taking too many prescription drugs
- Almost half (46%) of GPs do not believe that their patients with asthma strictly adhere to medications as prescribed

**Cost-effective treatments may be a barrier to optimal asthma management.<sup>10</sup>**

- Three in 10 Canadians with asthma (31%) believe that the lack of affordable treatment options is a barrier to improving asthma care
- In fact, of the 14% not taking their medications as prescribed, 11% cite medication costs as a reason why they do not take their medication (translating into about 36,960 Canadians)
- 83% of GPs wish there were more cost-effective treatment options

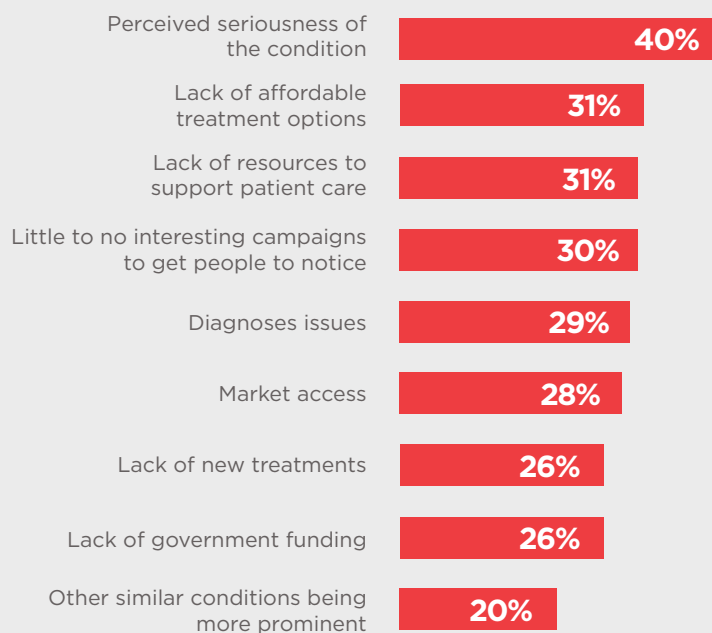
**Perceptions about the seriousness of asthma may be contributing to less than optimal asthma management.<sup>10</sup>**

- Eight in 10 (81%) GPs surveyed believe patients do not take their asthma treatment seriously
- Four in 10 (40%) Canadians with asthma believe a barrier towards improving asthma care is the perceived seriousness of asthma
- One-quarter (25%) of Canadians living with asthma currently smoke, vape, or use e-cigarettes

**Canadians living with asthma and GPs agree that asthma can be managed.<sup>10</sup>**

- The majority (90%) of Canadians with asthma believe they can live full and active lives with proper treatment
- Nearly all GPs (94%) believe that treatments available today can control asthma so that patients can lead normal, symptom-free lives
- GPs are enthusiastic about new treatments on the horizon, including biologics that may treat people with severe asthma in the future

**WHICH OF THE FOLLOWING DO YOU BELIEVE ARE BARRIERS TOWARD IMPROVING ASTHMA CARE?\***



\* Canadians living with asthma



# THE IMPACT OF POOR ASTHMA MANAGEMENT IN CANADA

While the majority of Canadians with asthma believe their condition is “well-controlled,”<sup>10</sup> the survey results reveal an alarming perception gap when compared to measures of asthma control. The impact of this gap is significant and widespread.



70,000  
EMERGENCY ROOM  
VISITS

## The impact on Canadians living with asthma.<sup>10</sup>

- 75% of Canadians with asthma report having asthma flare-ups, also known as an asthma attack (shortness of breath, chest tightness or pain, coughing and wheezing)<sup>9,10</sup>
- 65% of Canadians with asthma have had difficulty exercising because of asthma
- One-third (32%) of Canadians with asthma experience symptoms four or more days per week and use a reliever inhaler four or more times per week

## The impact on Canada's healthcare system.

- Last year there were more than 70,000 emergency room visits due to asthma attacks in Canada<sup>2</sup>
- An average of 115,832 asthma cases are diagnosed per year<sup>1</sup>

## The impact on Canada's economy.

- The direct and indirect costs of asthma – including medical/nursing care and medication – are expected to double from \$2.1 billion to more than \$4 billion per year by 2030<sup>3</sup>

## The Impact on Society.<sup>10</sup>

- Almost half of Canadians with asthma (45%) report having a hard time breathing with day-to-day activities
- 43% of Canadians have missed out on activities they wanted to pursue because of asthma
- Four in 10 (40%) Canadians with asthma have not exercised at all because of their asthma
- Lost productivity is also apparent: one-third of Canadians with asthma have missed school, work, or other social engagements due to their asthma



# A WAY FORWARD

More must be done to reduce the burden of asthma in Canada, including the direct and indirect costs to our healthcare system. There is a role for Canadians living with asthma, healthcare professionals and government in driving change.

The survey findings confirm that asthma control and management remain suboptimal in Canada, despite the availability of effective medications and national evidence-based guidelines.

Given the current state of asthma in Canada and gaps revealed in the Asthma Control in Canada™ Survey, four key opportunities were identified to improve overall asthma management in Canada, including:

## 1 Behavioural Changes

- Implement strategies that improve asthma management understanding. This includes understanding how to use medication properly, understanding asthma symptoms and knowledge of asthma triggers and how to avoid them
- Look to curb behaviours known to negatively impact lung health, such as smoking, by working to ensure everyone with asthma who smokes has access to support to help them quit smoking

## 2 Strengthened Communication Between People with Asthma and Healthcare Professionals

- Promote greater understanding of “control” and advocate for positive change
- Healthcare professionals can work with people with asthma to ensure they understand that it is possible to get their asthma symptoms under control
- Reinforce that people with asthma can take ownership of their asthma by adhering to their treatment plan, including taking medications as prescribed, recognizing that control is possible for most

## 3 A Renewed Focus on Individualized Treatment and Ensuring Everyone with Asthma has an Asthma Action Plan

- There are promising new treatments on the horizon for very challenging asthma cases.  
An [Asthma Action Plan](#) helps Canadians living with asthma to identify<sup>11</sup>:
- What symptoms to watch out for
- What symptoms mean about your level of asthma control
- How to adjust medications according to symptoms
- When to call a doctor or 911

## 4 Promote Greater Understanding of “Control”

- Through education and available resources, ensure Canadians with asthma understand the meaning of optimal asthma management
- Increased awareness of available resources, including Certified Respiratory Educators, through The Lung Association’s Lung Line: 1.866.717.2673
- visit [lung.ca](http://lung.ca)

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# TOGETHER WE ARE HELPING CANADIANS BREATHE EASIER

We support people affected by lung conditions.

If you or a loved one has questions about your lung disease or lung health, contact The Lung Association. We are happy to help.

Our certified respiratory educators answer calls on our **Lung Health Information Line** and are dedicated to answering your questions. Call our helpline to ask questions or simply to talk to someone who cares.

Call us at **1-866-717-2673** (in Canada only) or email us at **info@lung.ca**

Several of our provincial Lung Associations offer support groups and information for those affected by lung disease. Contact your local **Lung Association** to find out more about what programs and services are offered.

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