

Routine primary care data—the new crystal ball?

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In their 2014 recommendation update, the Global Initiative for Asthma (GINA) called for a more risk-focused approach to management. If used appropriately primary care records capturing routine data can be used not only to characterize current asthma control and current/prior practice, but also to “predict future risk”. By considering aggregate patient data, it is possible to identify common characteristics associated with future events and to explore combinations of factors that, together, may have a stronger association with specific future risks, such as exacerbations, multiple exacerbations, hospitalisations. Used in this way, clinical records can point to opportunities to modify risk and to intervene to mitigate against future events. This presentation will consider examples of how primary care records have been used in this risk prediction capacity within asthma and, in particular, at how they have been used

to examine the potential role of routinely collected blood eosinophils (rather than more invasive and less routinely recorded sputum eosinophils) as biomarkers in asthma and allergy. Future opportunities for biometric use of primary care databases (e.g., IgE, FeNO and multi-allergen screening) will also be discussed.

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Footnote

Conflicts of Interest: This is from the WONCA 2016 Symposium: Harnessing real world data to address unmet needs in asthma and allergy care.

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