Cairn Medical Practice Asthma Questionnaire for Adults and Children

Asthma guidelines recommend that patients should be reviewed each year. Many patients with asthma might have no issues, so we understand that a visit to the practice might not be required. However, we know that asthma care in the UK is not as good as it needs to be and many under-estimate the importance of good asthma control. This questionnaire will take you through some questions about your asthma, give you some further information and help us to plan the next steps for you.

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| --- | --- | --- |
| Name | Date of Birth | Contact phone number (preferably mobile) |
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| --- | --- | --- |
| Are your asthma symptoms (this may be shortness-of-breath, cough, or wheeze) getting in the way of sleep (please circle) | Yes | No |
| Are you having asthma symptoms during the day? | Yes | No |
| Are your symptoms getting in the way of day-to-day activities? | Yes | No |
| Is your asthma worse when you’re at work? | Yes | No |
| If you smoke, would you like help from smoking cessation services to help you quit? | Yes | No |
| How many times in the past year have you had to attend A+E or the Out-of-hours service with your asthma? | None | One or more |
| How often do you use your reliever (blue) inhaler? For example, how many times a week? | Less than 2 times per week | More than 2 times a week |
| Would you like to discuss ways of addressing the carbon footprint of your inhalers (see page 2) | Yes | No |
| How well controlled would you currently described your asthma (circle your answer)?  Not at all Poorly controlled Somewhat controlled Well controlled Completely fine | | |
| Any other points you would like to raise with the doctor or the nurse – fill in the space below: | | |

So, what do I need to do now I’ve completed the questionnaire? (Please see page 2)

1. Please post to us or hand in at the practice reception desk. We will review your answers and determine next steps: this may simply be a text message with useful resources, a phone call, or a “Near Me” consultation.
2. Remember: if at any time you are concerned or feel unwell, you can phone the surgery to make an asthma appointment or speak to a GP urgently. This may be because you’ve recently been in hospital because of your asthma, or you feel your condition is less well controlled.
3. Be aware of other helpful resources: more information about your asthma can be found at <https://www.asthma.org.uk> and remember if you are struggling with the technique of using your inhaler then your community pharmacist can help demonstrate this and give you some support. They can also provide advice on stopping smoking.

Thank you for taking the time to complete this questionnaire

**The Carbon Footprint of inhalers**

**What is the issue?**

We know that climate change will have an impact on our health in the years to come and it is predicted to have an impact especially on those that suffer lung conditions, such as asthma. Many individuals and organisations are now trying to reduce their impact on the environment. The NHS is responsible for 5% of UK emissions and it may surprise you to know that our biggest single contributor is inhalers. Specifically, it is the propellant (the gas that delivers the drug to your lungs) in our inhalers that cause the problem, with some propellants being over 3000 times more potent as a greenhouse gas than carbon dioxide.

**What should I do about it?**

First and foremost, we need to recognise that inhalers are essential for the health of those with asthma and the most important thing of all is good asthma control. This is not at all about making anyone feel guilty for their inhaler use, which we know is essential. The good news is that better asthma control is in itself better for the environment. The things you should consider are:

1. ***How well controlled is your asthma?***

If you use your reliever inhaler more than 3 times per week or if you use more than 3 reliever inhalers per year, this is a sign of poor asthma control. This leads to a higher likelihood of you needing admitted to hospital for an asthma flare-up. If this is the case, we would suggest a review at our clinic such that we can get your asthma under better control, which will lead to you needing less of your reliever inhaler. This will result in better, safer asthma care for you and less emissions through reliever inhaler use.

1. ***Is there a more environmentally friendly inhaler I could use?***

For many asthmatics there will be changes that could be made to your inhaler type that would be better for you and better for the environment. In the UK we use far more “Metered Dose Inhalers” than other countries. These are the inhalers that you have to press to activate at the same time as breathing in. These types of inhalers are up to 28 times more polluting than “Dry Powder Inhalers” which are activated by taking a deep breath. Dry Powder Inhalers also have a dose counter on them, which reduces waste by preventing users from accidentally discarding inhalers that still have doses left in them.

1. ***How can I get the most out of the inhalers I am on?***

Some patients may need to keep using a Metered-Dose Inhaler. In most instances this will be because they cannot breathe in strongly enough to get a Dry Powder Inhaler to work. For patients in this category, their inhaler should always be used with a spacer. This will increase the effectiveness of the inhaler to help the patient, and will also mean less doses are needed, which reduces the associated emissions.

1. ***How should I dispose of my inhaler?***

It is important that you return your used inhalers to the pharmacist to be disposed of correctly. Incorrect disposal leads to more of the polluting gas escaping.

**How can I find out more?**

You can find out more from the website: <https://greeninhaler.org/>. If you would like to discuss ways of improving your asthma care or reducing your inhaler carbon footprint, please indicate this on page 1.