The association of short acting β_2 -agonist overuse with asthma control and severe exacerbations: an Australian perspective

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Background: Globally, short-acting β_2 -agonist (SABA) use is higher than recommended,¹ a pattern which is associated with increased risk of adverse outcomes.² In Australia, the potential for overuse is enabled by the fact SABAs are available over-the-counter (OTC) and by GP prescription (routinely 2 canisters/dispensing and up to 5 repeats/prescription).

Aim: To describe SABA usage patterns in the Australian asthma population and investigate the impact of overuse on asthma outcomes.

Methods: In this historical, observational study, electronic medical record (EMR) data and questionnaire responses from patients ≥12 years-old with an asthma diagnosis of ≥1 years were extracted from the Optimum Patient Care Research Database Australia. The annual number of SABA canisters prescribed/purchased per patient was quantified, and the relationship between self-reported SABA overuse (≥3 canisters/year) and asthma control and exacerbation rate was assessed.

Results: A total of 720 patients were included. As per EMRs, 52.8% of patients were prescribed \geq 3 SABA canisters/year. 28.9% of patients self-reported the purchase of SABA canisters OTC; of these 37.5% acquired \geq 3 canisters/year. Self-reported, inappropriate use of SABA (\geq 3 canisters/year) was associated with an increased risk of uncontrolled asthma symptoms (OR 1.41; 95% CI 1.04-1.92) and an increase in the mean number of self-reported exacerbations for all GINA steps (Figure 1).

Conclusions: Australian patients living with asthma who use ≥3 SABA canisters/year have a 41% greater risk of having uncontrolled asthma and experience more exacerbations than those who use <3 canisters/year. This suggests that review of practitioner and patient driven asthma management practices is warranted.

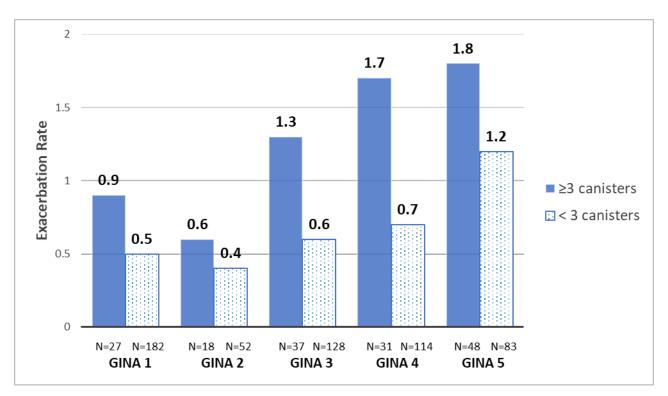


Figure 1: Mean frequency of self-reported asthma exacerbations as per Global Initiative for Asthma GINA) treatment intensity steps for patients prescribed canisters of short acting β_2 -agonists (SABA).

References

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- 2. FitzGerald JM, et al. Resp Med 2017; 131:135-140.

Acknowledgements

We would like to acknowledge and thank Steph James, Kiran Dhillon, Sophie Jones, Rob Campbell, Ying Liu, Marion Magee, Dominique Novic, Ondrej Rejda, Lisa Sugg, Nicole O'Sullivan, and Bruce Willet for their valuable contributions.