Vision
The impact of asthma is minimised. This will happen when our community and stakeholders recognise the importance of asthma, its social, economic and health implications, and act on these.

Mission
National Asthma Council Australia:
- sets standards for asthma care by developing and disseminating the treatment guidelines;
- educates a wide range of health professionals who treat people with asthma;
- creates and distributes best practice resources to patients and their carers; and
- continually improves asthma management in Australia through health promotion and advocacy to government.

The National Asthma Council Australia (NAC), a not-for-profit organisation, is a collaboration of:
- The Royal Australian College of General Practitioners
- Australian Primary Health Care Nurses Association
- The Pharmaceutical Society of Australia
- Australasian Society of Clinical Immunology and Allergy

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Page 4: The Hon Peter Dutton MP, Minister for Health and Minister for Sport, launching the Australian Asthma Handbook

Page 18: Staff members Ms Judi Wicking (left) and Ms Jessica Groom
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Annual Report 2013/14
Chairman’s Message

In March, we were delighted to have our Health Minister, the Hon. Peter Dutton, launch the seventh edition of the treatment guidelines for asthma, the Australian Asthma Handbook, the highlight of this past year. The Handbook was an epic production involving over 80 experts in respiratory medicine and science, general practice, nursing, allergy, asthma education and other relevant areas, working for almost four years to research and provide expert comment. Our contributing experts are volunteers, many of whom devote an extraordinary amount of time to making sure that Australia has excellent evidence-based guidelines. Over the many years the National Asthma Council Australia has been producing the national asthma treatment guidelines, we have contributed to the development of guideline methodology, nationally and internationally. This brings a rigour to guidelines in the way evidence is collected and assessed. We have balanced this with our determination to continue to provide guidelines for primary care which are readable and accessible.

As usual, we began the process by surveying our primary care users with the results showing that we were able to have the guidelines as a dedicated interactive website rather than the usual textbook accompanied by a pdf version on our main website. Creation of this website presented us with many challenges, happily ending in an excellent result. We have received many congratulations from around the world and hope that other countries are benefitting from this innovative and easily shared format. We are not aware of any other guidelines produced in this format.

Few other countries have had the advantage of having had national treatment guidelines since 1989 which have had such good recognition and uptake along with extensive national distribution and implementation. Following the launch of the Australian Asthma Handbook, our major sponsors undertook to distribute over 40,000 copies of the Quick Reference Guide, a slim volume of the major tables from the Handbook, to GPs, pharmacists, practice nurses, asthma educators, respiratory physicians, allergists and other interested health professionals and organisations.

Quietly in the background of all this excitement, the Board continued its progress to reshape itself in order to provide the best possible governance for the organisation. For many years, the Board was comprised of directors who each represented one of our member bodies, currently with Assoc. Prof. Janet Rimmer representing ASCIA, Mr Stephen Hughes representing the Pharmaceutical Society of Australia and me representing the RACGP. In 2012, we changed our Constitution to enable the appointment of up to four independent directors in addition to the representative directors, appointing Dr Jonathan Burdon as the first independent director. In this year in review, Dr Joanna Wriedt was appointed as the second independent director, adding her considerable skills to the Board. The Board had also been giving careful thought to potential new member bodies so was pleased that the Australian Primary Health Care Nurses Association agreed to become a new member body and appointed Ms Julianne Badenoch as its representative on our Board. This new relationship has already led to joint initiatives.

Probably the most important consideration of any Board is the financial health of the organisation. For small charities like ours this can be quite challenging. Happily, and as the result of much hard work by our staff and good Board governance, we continue to be in healthy financial situation. Our main sources of funding are from the Australian Government Department of Health program funding for Asthma Best Practice, our national primary care health professional educational workshop program, the pharmaceutical companies in asthma for a variety of projects and from our Sensitive Choice program, now eight years old. Our Product Advisory Panel carefully assesses products submitted to determine whether or not they will be approved to use the blue butterfly symbol. We have worked carefully to establish this program, consulting similar programs around the world and taking legal advice. The Asthma Foundation of New Zealand has been our partner in Sensitive Choice from the beginning, a relationship of which we are very proud. Similarly, working with our Sensitive Choice partners and, also our pharmaceutical company partners, is always interesting as we mutually benefit from each other’s knowledge.

I would like to thank our dedicated staff and consultants, led by our CEO, Kristine Whorlow, for their hard work and commitment to our important work. There are always many people to thank, nearly all of whom are our wonderful expert volunteers – the Guidelines Committee, ably chaired by Prof. Amanda Barnard, and its 17 Topic Working Groups, the Finance Committee, the Product Advisory Panel, the GP Asthma Group, the Pharmacists Asthma Group, our ad hoc Expert Panels and the many individuals ready to offer advice and help us. Progress in asthma and in our work is very much a concerted national effort to fix the asthma problem. Thank you everyone for your contribution.

Associate Professor Noela Whitby AM
MBBS (Qld), DPD, Grad Dip Hum Nut, FRACGP, FAICD
Asthma in Australia has improved a great deal when we consider the information provided by the Australian Centre for Asthma Monitoring (ACAM), a unit of the Australian Institute of Health and Welfare, the existence of ACAM being itself an achievement. No other country has a dedicated asthma monitoring centre. Providing funding for ACAM, which began as a proposal from our former Evaluation Committee, demonstrates the foresight of the Australian Government Department of Health. From the asthma information published by ACAM we can see that, although deaths from asthma in Australia remain high by international standards, the number of deaths has fallen dramatically since the late 1980s. Few children or young people now die from asthma. Hospitalisations and emergency department visits have reduced. Encouragingly, ownership of written asthma action plans is at its highest as 24% of people, and 41% of children with asthma aged 0-14 have one. It has taken many years of persistent hard work to accomplish these improvements, involving all the asthma organisations and many dedicated health professionals. The Australian Government’s commitment to asthma provides important funding which enables significant national asthma programs to be conducted for primary care health professionals and for the community in settings like schools and childcare. These funded programs are integral to the ongoing improvements in asthma management.

Despite these recognised achievements in asthma and our wish for results to be even better, studies still indicate the areas where more must be done – correct inhaler technique, adherence to preventer medications, understanding of the roles of preventer and reliever medications, over reliance on reliever medications, keeping primary care health professionals informed about asthma management and so on. There are areas to which more attention is needed – the number of deaths in older people, the higher prevalence, mortality and rates of hospitalisation in our Indigenous population, the affordability of medications, understanding of the indirect costs of asthma, smoking rates in people with asthma and so on. We cannot relax our efforts but must continue to work for more improvements in asthma management and to maintain the progress made so far. Continuing Government support is essential as it brings funding for essential programs and also recognition at the policy and political level.

The NAC has long had an advocacy role in asthma, being able to provide the latest evidence-based information from the Australian Asthma Handbook, the 7th edition having been launched in March. The importance and value of having such longstanding and well known national treatment guidelines for asthma, is a unifying force for health professionals involved in asthma and a sound backing for advocacy issues. As the guidelines were nearing completion early this year, we were able to provide near final drafts to assist the National Prescribing Service as it developed a suite of new asthma resources, as well as to the Post-Market Review on PBS Medications used to treat Asthma in Children. The NAC has, throughout its history, made many submissions to Government in the interests of people with asthma. We formed the Parliamentary Friends of Asthma Group in 1999 and have at least one function each year to highlight new developments and activities in asthma, in addition to our visits to individual Members of Parliament to seek their support for our work in the interests of people with asthma. Through our organisational membership of the RACGP, Pharmaceutical Society of Australia, Australian Primary Health Care Nurses Association and our collaboration with many other bodies in health, we are able to seek their advice and support and to join them in respiratory relevant initiatives.

The NAC has always worked systematically with the media, providing regular media releases and providing expert comment on new studies. This is an important way to reach people with asthma for whom we also provide many resources available on our website and print versions distributed nationally. On World Asthma Day, we launched My Asthma Guide, the consumer friendly version of the Australian Asthma Handbook, which we are distributing all over Australia. Our latest Asthma Action Plan was translated into nine community languages available on our website for completion with a doctor. We are increasingly involved in social media, carefully testing its benefit in communicating correct asthma messages and creating some fun like our Instagram competition for World Asthma Day.

The achievements of the NAC are thanks to the many people who contribute so much to improve the asthma situation. We can never thank them enough, especially in a year when we have a new edition of the Australian Asthma Handbook, when so many people worked unbelievably hard. Our financial supporters – the Australian Government Department of Health, our Sensitive Choice partners, the pharmaceutical companies in asthma and individual donors – must all be thanked for helping us do our work in the interests of the over 2 million people with asthma.

Kristine Whorlow
Chief Executive Officer
The Australian Asthma Handbook

Innovative guidelines for primary care asthma management

After nearly four years of intensive work, we are delighted to report that the Australian Asthma Handbook Version 1.0 was published in March 2014.

Since the last edition of the Asthma Management Handbook in 2006, there has been substantial change in expectations of guideline methodology and user preferences in the digital world, including:

- a more rigorous methodology:
  - the best evidence (finding and evaluating findings of clinical trials and other research)
  - recommendations (interpreting and weighing evidence)
  - transparency (citing sources, methods, stating working group considerations).

- a user-friendly and accessible guideline format:
  - online
  - easily navigated
  - more interactive.

- guidance that is updated regularly and more often.

Addressing these expectations, the complete Handbook was published as a purpose-built, user-friendly website. An accompanying printed Quick Reference Guide features the key figures and tables from the Handbook, alongside a selection of topic overviews to provide context.

The website is at: asthmahandbook.org.au

As testament to the Handbook’s quality and practicality, the Handbook was officially endorsed by the Royal Australian College of General Practitioners (RACGP), the Thoracic Society of Australia and New Zealand (TSANZ) and the Australian Primary Health Care Nurses Association (APNA).

The reaction to the new Handbook has been overwhelmingly positive, justified by the high traffic on the website – 23,000 unique visitors and 210,000 page views from launch until the end of June – and encouraging feedback from our main stakeholders.
Content development

Over 80 health professionals were involved in the development of the Handbook’s content, spread across 17 topic working groups made up of GPs, practice nurses and asthma educators, pharmacists and other respiratory and allergy specialists.

To keep the primary care focus, all working groups included at least one GP, usually as Chair and the Guidelines Committee was also chaired by a GP, Prof. Amanda Barnard from the Rural Clinical School, Australian National University.

To provide a transparent methodology, recommendations were developed by working groups using pre-specified and standardised evidence-gathering methods, including:

- systematic review (5 key clinical questions)
- examination of peer-reviewed evidence
- adaptation of existing guidance
- consensus based on best-available evidence and clinical experience.

Funding

The National Asthma Council Australia self-funded the majority of the development costs of the Handbook, with the remainder funded by unrestricted sponsorship. Our organisation’s funding sources include sponsorship from the pharmaceutical companies in asthma, government program funding, donations and income from NAC’s own cause-related marketing program, Sensitive Choice.

The NAC would like to acknowledge the support of the sponsors of the Handbook, AstraZeneca, Mundipharma, Novartis and Takeda.

Strict editorial independence was maintained by the secretariat, Guidelines Committee and all contributors in developing the content. The views and interests of the National Asthma Council Australia and its funders, including the Handbook sponsors, have not influenced the content of the guidelines.
Practical, accessible and easy-to-use

In the Australian Asthma Handbook, we have created a unique, interactive website with a clear content hierarchy including:

- navigation based on topic steps in a clinically logical order
- clear information hierarchy within each topic:
  - recommendations written as direct actions
  - methodology for each recommendation
  - evidence summaries
  - citations and reference lists, including links to source papers
  - related topics
- clinical decision pathways and algorithms

Launch

The Handbook was launched in Canberra on 4 March 2014 by The Hon Peter Dutton MP, Minister for Health and Minister for Sport, to considerable fanfare.

www.asthmahandbook.org.au

It was an extremely successful event with approximately 80 attendees including NAC Board members and staff, the Guidelines Committee and key Handbook contributors. We also welcomed representatives of the pharmaceutical industry sponsors and stakeholder organisations including Asthma Australia, NPS Medicinewise, the Royal Flying Doctor Service and the Thoracic Society of Australia and New Zealand.

Three members of the Parliamentary Friends of Asthma attended: Senator Sue Boyce, Dr Andrew Southcott MP, and The Hon Amanda Rishworth MP.

There was excellent coverage of the launch in both general and health media. For the general media, messaging focussed on exercise and asthma while the health industry media highlighted key changes in the recommendations.

Distribution and promotion

A major dissemination plan was initiated following the Handbook’s launch. The main distribution strategy uses the field forces of the Handbook’s two major sponsors, who have already distributed more than 20,000 copies of the Quick Reference Guide to general practices and pharmacies. This supplements our own distribution of at least 5,000 copies
via our health professional workshops and through specific mail-outs and conferences.

A range of strategies continue to be pursued to promote the Handbook, including presentations at RACGP's GP14 conference, the TSANZ's Annual Scientific Meeting and APNAs National Conference. Internationally, there have also been presentations on the Handbook at International Primary Care Respiratory Group (IPCRG) World Conference, with sessions scheduled at the upcoming European Respiratory Society (ERS) International Congress and the Guidelines International Network (G-i-N) Conference.

We are also working on articles for a number of primary healthcare publications. These include a ‘How to Treat’ article for *Australian Doctor*, as well as submissions to *Australian Family Physician*, *Medical Journal of Australia* and *Medicine Today*. Features on the Handbook also appeared in *Good Medicine* and *Medical Observer* among others. The National Prescribing Service (NPS) featured the Handbook in the April issue of NPS MedicineWise News. The entire 6-page newsletter was devoted to the Handbook, focusing on management in adults and adolescents.

### Ongoing development and revision

Unlike previous editions of the Handbook, and reflecting the dynamic nature of a web-based publication, we have not experienced the normal post-publication lull. Indeed, steps are already underway for development of the next version.

The Handbook’s Guidelines Committee has been reconfigured as a Standing Committee to reflect the ongoing nature of the Handbook’s development. As a reflection of the goodwill and rewarding working relationships a publication like the Handbook provides, we are delighted that all members of the established Committee except one have elected to continue as members, including Professor Amanda Barnard as Chair.

Work is already underway on the policies and processes to facilitate annual reviews of the Handbook’s content, preparing a schedule for regular revisions and identifying clinical and evidence-based triggers for non-scheduled revisions.

While the timelines and processes are still under discussion, it is expected that Version 1.1 would be released the last quarter of 2014, just over 6 months after Version 1.0.

### The future

Despite the enormity and challenges of the *Australian Asthma Handbook* project over the last four years, there is a sense that the work has only just begun.

With such a strong foundation laid, we can now set a program for transparently gathering the best evidence on asthma diagnosis and management and deliver it in a proactive and timely manner. Similarly, committing to the continual improvement of the website and associated materials through ongoing engagement with its users and stakeholders will ensure it remains practical and user-friendly.

Moving to a flexible online platform provides a fantastic opportunity not only enable to capitalise on the Handbook’s position at the forefront of asthma management in Australia, but also position it as a leader in chronic disease management globally.
Asthma & Respiratory Education Program

The Australian Government Department of Health renewed funding for our national program of health professional education in August 2013. Now in its fourth iteration, the title of the program has been changed to Asthma Best Practice for Professionals to reflect the program’s aim to implement the best-practice guidelines for primary care. Funded until the end of June 2016, we aim to run over 260 workshops nationally with 50% in rural and remote Australia reaching nearly 4,000 health professionals over three years. This high quality education continues to be delivered free to participants thanks to the ongoing Government support.

With the launch of the Australian Asthma Handbook in March 2014 the workshop material was fully revised with input from a team of health professionals, some of whom were involved in developing the guidelines. More than 120 expert presenters are involved in developing and presenting our workshops. We thank them all for their ongoing enthusiasm and support.

Dissemination of these workshops has been primarily via an ongoing relationship with Medicare Locals and other primary health care organisations.

Workshop types

Throughout this program the workshops offered continue to be updated, according to guidelines, and refined to meet different target audiences. Having some flexibility ensures local needs are being met, while also safeguarding consistent information across Australia.

These face-to-face workshops are run by our team of experienced health professional presenters using standardised material.

Primary Care Asthma Update (2hrs) – best-practice essentials for all primary care health professionals

Asthma & Respiratory Management Seminar for Practice Nurses (6hrs) – role-specific education for practice nurses, includes optional Nurse-Led Asthma & Respiratory Clinics module

Spirometry Training Course (6hrs) – comprehensive training in the application, measurement and interpretation of spirometry for GPs and practice nurses
Spirometry Training Update (2.5hrs) – refresher training for GPs and practice nurses who have previously undertaken formal spirometry training

Asthma & Spirometry Update for Aboriginal Health Workers & Practitioners (3.5hrs) – role specific education for Aboriginal health workers and practitioners

Asthma Update for Pharmacists (2.5hrs) – practical, role specific education for pharmacists

Practitioner Asthma Communication & Education (PACE Australia) (6hrs) – an interactive seminar for general practitioners on effective communication and management of patients with asthma.

Implementation update

We have now held sessions for all seven workshop types, hosted by Medicare Locals, some primary health providers, peak professional bodies and Aboriginal Medical Services. Some workshops have continued on directly from the previous program, while others began in early 2014 following the launch of the updated guidelines.

To the end of June 2014, we have conducted:

- Primary Care Asthma Update: 19 workshops
- Asthma & Respiratory Management Seminar for Practice Nurses: 14 workshops
- Spirometry Training Course: 31 workshops
- Spirometry Training Update: 6 workshops
- Asthma & Spirometry Update for Aboriginal Health Workers & Practitioners: 5 workshops
- Asthma Update for Pharmacists: 4 workshops
- PACE Australia: 1 workshop. Note this workshop is being run as a trial national roll out and only a small number will be completed.

Professional development recognition

Our workshops have received professional development recognition from a range of relevant professional associations including:

- Royal Australian College of General Practitioners – notably recognising the Spirometry Training Course and PACE Australia workshop as Category 1 QI&CPD activities for 40 points
- Australian College of Rural and Remote Medicine
- Australian Primary Health Care Nurses Association
- Australian College of Nursing
- Australian Pharmacy Council (via the Pharmaceutical Society of Australia and the Pharmacy Guild of Australia)

Online presence

NAC website

The NAC website (nationalasthma.org.au) underwent a facelift in early 2013. The fresh new look was accompanied by a simplified navigation system and easy access to the most popular resources on our website.

Our website continues to provide reliable, useful information people with asthma and their health professionals, both in Australia and overseas. We now average around 30,000 unique visitors each month from more than 170 countries around the world.

All our print publications are also able to be viewed or downloaded from our website, including the updated Asthma Brochure Series with the patient brochures available in 5 community languages. Our most popular pages continue to be the Handbook, our written asthma action plan library and our How-To videos showing correct inhaler technique.

Sensitive Choice website

The Sensitive Choice website (sensitivechoice.com.au) continues to be a useful communications tool for the program. All accepted products and services are listed in detail with links to manufacturers and suppliers.

We have further developed the website over the past few years, with usage statistics showing pleasing growth. Our social media activities (particularly Facebook) are also building, with successful investment in Facebook advertising and Google AdWords to promote the program and approved products.
ONGOING ACTIVITIES

Asthma Handbook website

The dedicated Australian Asthma Handbook website (asthmahandbook.org.au) was launched in March 2014. We have been delighted with the response. There have been more than 20,000 unique visitors since the launch to end June 2014, with the average time spent on the site being more than 5 minutes.

This and other analytics suggest that visitors are taking the time to explore the new Handbook and investigate the content and functionality. Very few visitors are using the search facility, which we think indicates that the site navigation and structure are intuitive and user-friendly.

We will continue to fine-tune and enhance the website as we develop future editions of the Handbook.

Social media

We have slowly been increasing our social media presence to communicate our messages and engage with our stakeholders, e.g. via Facebook, Twitter and YouTube.

We have well-established YouTube and Vimeo channels to host video material from the NAC website. Our aim is to ensure viewers have a choice of ways to access our resources – some universities and hospitals limit staff access to some of these sorts of sites.

A Sensitive Choice Facebook page was created in 2012 (facebook.com/sensitivechoice). The aim is to provide a friendly and useful page that encourages user interaction and drives visitors to the Sensitive Choice website. We use this to share messages about good asthma management and comment on stories in the news, with minimal product information.

Sensitive Choice is supported by a complementary Twitter account. We are also just about to launch a separate NAC Twitter account to provide an extra avenue for media release distribution and engagement with stakeholders.

Media relations

The National Asthma Council Australia achieved outstanding media exposure this year in consumer, professional and online media through a proactive strategy of regular topical news releases, media events such as the 2014 Australian Asthma Handbook Launch and our expert spokesperson media program.

Sixteen media releases and five audio radio releases were issued throughout the reporting period, achieving extensive coverage reaching over eight million Australians.

The Hon Peter Dutton MP at the Australian Asthma Handbook launch
In addition to seasonal topics such as Christmas allergy triggers, winter asthma and the back-to-school spike in hospitalisations, the NAC also provided local comment to international journal articles, such as the impact of uncontrolled asthma on pregnancy (European Respiratory Journal).

The Sensitive Choice program also continued to receive high levels of media exposure through a proactive strategy that linked our brand partners with seasonal topics, such as spring cleaning with Sensitive Choice cleaning products.

The highlight of the year was the launch of the updated Australian Asthma Handbook in March 2014. Media outreach for the launch event attended by the Minister for Health, the Hon Peter Dutton MP, led to extensive coverage in health professional publications as well as across metropolitan and regional media including Channel 7, Channel 9, ABC TV and Radio, SBS, the Herald Sun and other major outlets.

A consumer version of the Handbook was launched two months later on World Asthma Day amid high-profile media activity. By surveying the number of Australians who thought that asthma affects a person’s ability to do physical activity, media interest was renewed in the guidelines and the NAC was profiled on the Today Show, 2UE, 6PR, 4BC and on over 400 community radio outlets.

During the year a focus was increasing the NAC’s exposure in the digital and online space. Given the popularity of social media a strategy was developed to target health bloggers and parenting websites such as Motherpedia, Mouth of Mums and the Better Health Channel. The Android version of the popular smartphone app, Asthma Buddy, was also released in September 2013, increasing the NAC’s footprint in the digital realm and attracting media coverage in popular women’s magazines.

In addition to our steady stream of proactive media relations initiatives, our experts were again regularly sought to provide commentary on a range of timely themes including the impact of mould in flood regions, new research findings and the link between fast food and asthma. With the important role that our experts play in providing high quality commentary the NAC remains the first port of call for industry press and mainstream journalists seeking asthma-related input.

The Sensitive Choice program continues to be a useful source of information for consumers with asthma and allergies interested in products that may be a better choice as well as an important source of funds for the NAC.

The program allows partners to use the Sensitive Choice logo on products and services that have been assessed by our independent Panel as being potentially better for people with asthma and allergies.

Partners pay a licence fee and assist with communicating asthma and allergy messages to consumers.

We are most grateful to the members of the Panel, who freely give their time and expertise.

During the year, we gained some new corporate partners, including one whose paint is approved in Thailand, the first approval outside Australia or New Zealand.

We also had some partners choose not to continue their involvement in the program, largely a reflection of difficult business conditions and budget cuts.

Over the year, partner numbers remained around the same, with revenue slightly up.

We continue to partner with the Asthma Foundation in New Zealand and appreciate their support for the program.

We also acknowledge the support of our partners, a number of whom have been with the program since its inception.

**Our People**

The Australian program is coordinated by two staff members in Melbourne, supported by assistance from other staff members as needed.

A critical part of the process is the assessment of applications for approval (or rejection) of products and services by the volunteer members of the Product Advisory Panel, whose insights and expertise add rigor and value to the program.

Panel membership remained unchanged for the year. Panel members are thanked for their valuable contribution.
Activity Highlights

Asthma awareness and advocacy

World Asthma Day

The National Asthma Council Australia marked World Asthma Day on 6 May 2014 by launching the Asthma Active Challenge, to inspire people with asthma to embrace and enjoy active lives.

The challenge ran for 6 weeks and encouraged people with asthma to upload photos of how they are being asthma active onto Instagram or Facebook. We received hundreds of inspiring and creative entries, ranging from completing a marathon, dancing, to swimming with a turtle! There were six weekly prize winners and one overall Asthma Active Challenge winner who received a $500 Red Balloon experience voucher.

The challenge was a great success with increases in community interaction on all of our social media platforms as well as more visitors to both the NAC and Sensitive Choice websites.

National Asthma Week

To celebrate National Asthma Week (September 1–7, 2013) the National Asthma Council Australia released the Android version of Asthma Buddy, the free asthma management app.

The Android version was developed in response to the success of the iPhone version released in 2012. Based on patient feedback, a number of new features have been added including a journal tool and the ability to store multiple profiles, making the app a useful tool for families.

Mortality statistics

Data from the Australian Bureau of Statistics (ABS) released in March 2014 revealed that more than 60% of asthma deaths occurred in people aged 75 and over. In total, 394 deaths were recorded in 2012 affecting 260 females and 134 males.

The 2012 ABS data also found that women over 75 years old were almost three times more likely to die from asthma compared to their male counterparts.

Our media messages encouraged older people to talk to their doctor about any breathing problems, as untreated asthma is especially risky in this age group.
Advocacy

We play a leading role in advocacy for asthma, aiming to improve health outcomes through change at the system and policy level.

The Hon Peter Dutton, MP, Minister for Health and Minister for Sport, has shown an ongoing interest in our activities and in the challenges and successes of the wider asthma community. This connection was strengthened through our highly successful launch of the Australian Asthma Handbook by the Minister in March 2014.

The change in federal government has brought new opportunities for engagement with parliamentarians from across the political spectrum. Our focus in this regard remains the Parliamentary Friends of Asthma, which is jointly supported by the National Asthma Council Australia and Asthma Australia. This is a bipartisan group with members from both Houses of Parliament who have an interest in asthma and respiratory health.

In addition to our broader advocacy activities, we were involved in the Pharmaceutical Benefits Advisory Committee (PBAC) Post-Market Review of PBS Medicines to Treat Asthma in Children. We provided the PBAC with the draft advice from the forthcoming Handbook, as well as the reasoning behind it, early in their process. We also made a formal submission to the review, developed in consultation with the Handbook’s paediatric management multidisciplinary working group. The review recommendations are due to be published later in 2014.

Collaborative activities

Collaboration is at the heart of all that we do, from our governance structure to our guideline methodology. Besides the many individual health professionals who are involved, we work closely with our member bodies and a wide range of respiratory stakeholders such as Asthma Australia and the Australian Centre for Asthma Monitoring.

As the lead national authority on asthma, the National Asthma Council Australia has formal partnerships with a number of organisations, including:

- NPS MedicineWise
- Consumers Health Forum
- Better Health Channel
- Healthdirect Australia
- TES Australia teacher support

Our collaboration with bodies providing education for health professionals was a highlight of 2014. Engagement with NPS MedicineWise and the Pharmaceutical Society of Australia during development of their asthma activities was particularly valuable in ensuring consistency with the advice in the new Australian Asthma Handbook.

We were also pleased to help with revision of the asthma information in St John Ambulance’s premier publication, Australian First Aid.

Education resources

Asthma Buddy Android

In September 2013 we launched the Android version of Asthma Buddy, our smartphone asthma management app, developed specifically for Australians.

In response to feedback from users of the original iPhone version, we added two new features: multiple profiles, which allows parents/carers to record information for each of their children in the one place, and a journal function to allow users to keep track of symptoms over a period of time and print a report for their GP when it comes time to review their asthma action plans.

Asthma Buddy is designed to turn the person’s written asthma action plan into an interactive app, so their key asthma management advice is always within reach. The Android version retains this structure along with other core features, including step-by-step information on how to handle an asthma emergency, a direct dial link to 000 and space to add emergency contact details.

We have now had more than 4,500 downloads from 22 countries and territories around the world and still growing.

My Asthma Guide

To accompany the new Australian Asthma Handbook, we developed a new patient guide to help people take better control of their asthma. The intent was to provide a summary of the key messages about good asthma management from the Handbook, written in patient-friendly language.

This is the first time a companion to the Handbook has been produced for people with asthma and their families. Having a corresponding patient summary of health professional guidelines is becoming the norm in the guidelines field.

We developed the content based on the Handbook and the NAC’s recent information brochures. Expert consultation included review by Prof Amanda Barnard, chair of the Guidelines Committee, and by the mother of a young child with asthma.

The publication is called My Asthma Guide: A handbook for managing asthma.

We launched My Asthma Guide on World Asthma Day, 5 May 2014. It is currently an online resource only; however, we hope to secure sponsorship for print and distribution.
Written asthma action plan into community languages

In June 2014 we published our written asthma action plan translated into a range of community languages. The languages were: Arabic, Chinese, Korean, Spanish, Vietnamese, Greek, Italian, Serbian and Turkish.

The online-only resources were launched as part of our winter asthma media activity. Our messaging highlighted that Australians should have access to accurate asthma information as well as effective asthma management, irrespective of the language they speak.

The project was supported by a grant from GSK Australia.

Conferences

GPCE and PNCE

We continued our regular presence at the General Practitioners Conference and Exhibition (GPCE), and the Practice Nurse Clinical Education (PNCE) events presenting at each conference in Brisbane, Melbourne and Sydney.

In Brisbane in September 2013 we presented a 1-hour seminar at both GPCE and PNCE titled ‘Asthma management beyond the preventer: healthy living with asthma’. The sessions were presented by local nurse practitioner Ms Pauline Hughes and focused on healthy lifestyle choices that can assist with asthma management, such as diet, physical activity and weight management.

In Melbourne in November 2013 we presented a 1-hour seminar titled ‘Asthma and COPD: relatives in airflow obstruction’, covering how to tell the difference between the two conditions and medication options. The session was presented by Dr Gary Kliv, general practitioner, at GPCE and by Ms Julie Evans, COPD clinical nurse consultant, at PNCE.

Novartis have provided an unrestricted educational grant to run workshops and seminars at each GPCE event in 2014. Beginning in Sydney in May 2014 we ran a 1-hour seminar titled ‘Difficult asthma: how to manage in general practice’. This very well attended seminar was presented by Assoc. Prof. Connie Katelaris, an allergist and immunologist. Three 1-hour workshops were also presented by local respiratory scientists Mr Peter Rogers and Ms Leigh Seccombe covering ‘Spirometry: diagnosing asthma & COPD in general practice’.

At PNCE Sydney in May we presented a 1-hour seminar covering the updated guidelines and how to implement the changes into general practice. The session was very popular and was presented by a member of the guidelines committee, Ms Naomi Fenton, nurse practitioner. Ms Leigh Secombe also presented a 1-hour workshop at PNCE covering the same spirometry topic as GPCE.

APNA

For the second consecutive year the NAC was invited to speak at the APNA National Conference, held in Sydney in May 2014. Partnering with Lung Foundation Australia, the NAC presented one hour on an overview of asthma and how it differs from COPD, medication options and correct device technique, and key updates from the new Handbook.

APNA are also running a series of Nursing in General Practice Continuing Education Workshops during 2014. These workshops feature clinical and disease-specific information for nurses working in General Practice. The NAC was invited to present a 1-hour seminar titled ‘Asthma Management – What’s New?’ at each of the Melbourne and Adelaide workshops in March and June respectively. The seminars were received with high praise. NAC involvement in these workshops will continue in cities around the country throughout the year.
TSANZ Annual Scientific Meeting 2014

At each TSANZ Annual Scientific Meeting (ASM), the NAC holds a session with the Asthma and Allergy Special Interest Group.

At the ASM in Adelaide in 2014, we held a breakfast session on “New asthma management guidelines: The Australian Asthma Handbook”. A packed room of health professionals and industry representatives listened to the 1-hour session co-presented by members of the Guidelines Committee: A/Prof Helen Reddel, Prof Peter van Asperen and Prof Peter Wark.

PAC 2013

The NAC participated in the Pharmacy Australia Congress 2013 (PAC), which was held in Brisbane in October 2013. This was the first time that we had a booth at this event, providing us with a great opportunity to engage with pharmacists one-on-one. Our booth showcased our range of education materials for pharmacists and their customers, our workshop program and our Sensitive Choice program.

Respiratory health also featured on the education program. Dr Jenny Gowan presented a seminar on the practical aspects of implementing respiratory disease screening and risk assessment and disease state management services in community pharmacy.

Other conferences

The NAC has an active presence at many other health professional conferences both around Australia and internationally. Recent presentations include:

- Australian College of Rural and Remote Medicine (ACRRM) rural medicine conference, October 2013 – Asthma management update (presented by Dr Stephen Rudolphy)
- Dental Health Services Victoria, March 2014 – Dentistry and chronic disease: asthma
- Pharmaceutical Society Australia (PSA) Vic. conference, May 2014 – Asthma guidelines update

Asthma and Airways Career Development Fellowship

The NAC has joined with TSANZ to support the Asthma and Airways Career Development Fellowship. The aim of this PhD Fellowship is to enable mid-career investigators to establish themselves as independent, self-directed researchers and foster the development of research in respiratory medicine in Australia and New Zealand. The fellowship is to the value of $60,000 for one year.

The inaugural recipient was Dr Katie Baines, post-doctoral research fellow at the University of Newcastle. Her research topic is identifying biomarkers that predict severe asthma exacerbations during pregnancy.

Dr Baines’ Fellowship was announced at the TSANZ Annual Scientific Meeting in April 2014.

We are very pleased to contribute to respiratory research in this way and to assist with the career development of an emerging respiratory expert. This is a small way in which the NAC can acknowledge the ongoing assistance of the many respiratory experts who provide advice and expertise to us for our resources and educational programs for primary care health professionals and people with asthma.

International activities

IPCRG 7th World Conference 2014

The NAC is a founding member of the International Primary Care Respiratory Group (IPCRG). Assoc. Prof. H. John Fardy is the Australian representative to the Senate and is also co-chair of the Education and Guidance Sub-Committee. Kristine Whorlow is a co-opted member of the Board and was recently appointed Treasurer.

The 7th IPCRG World Conference was held 21–24 May 2014 in Athens. More than 1000 participants from over 20 countries attended. Australia was well represented at the Conference. Delegates included several members of our GP Asthma Group plus NAC staff members Kristine Whorlow and Siobhan Brophy.

In her role as Chair of the Guidelines Committee, Prof Amanda Barnard presented an abstract on the development of the Handbook, ‘The Australian Asthma Handbook: Innovative Guidelines for Primary Care Asthma Management’. An interesting international perspective was provided by respected Bangladeshi GP Dr GM Monsur Habib. His presentation ‘Innovative service delivery made enormous advances in the care of respiratory disease in Bangladesh’ considered the reasons why health outcomes in Bangladesh are better than other comparable countries. A key element was the involvement of international partners. Dr Habib singled out our CEO, Ms Kristine Whorlow, for acknowledgement, in appreciation of her advice and support over many years.

Asthma awards

The NAC funds annual awards to encourage research into asthma. Offered via our stakeholder bodies, the awards focus on asthma research presented at each organisation’s annual/biennial scientific meeting or conference.

The winner of the 2013 ASCIA and NAC Asthma Research Awards was Dr Euan Tovey from the Woolcock Institute of Medical Research in Sydney. His winning presentation was ‘House dust mite aeroallergen exposure occurs during the day, not in bed’.

The winner of the 2013 TSANZ and NAC Asthma prize was Mr Luke Hatchwell from the School of Biomedical Science, University of Newcastle. His winning presentation was ‘Salmeterol attenuates chemotaxis in rhinovirus-induced exacerbation of asthma via modulation of PP2A’.

Annual Report 2013/14
Port Moresby Spirometry Training
In May 2014 the NAC sent two respiratory scientists to Port Moresby in Papua New Guinea to deliver two spirometry training courses. Each course took place over two days with around 10 health staff from across Papua New Guinea travelling in to attend each workshop.

The staff were a mixture of doctors and nurses who regularly carry out spirometry as part of general asthma management and employment screening medical checks. None had ever received spirometry training before, despite being required to do spirometry in their roles. The feedback was extremely positive and the host organisation expressed interest in the NAC returning in the future to deliver more training.

United Nations Environment Program (UNEP)
Our CEO, Kristine Whorlow, Australian Government nominee to the UNEP Medical Technical Options Committee, attended the annual meeting in Manchester, UK, in April 2014. The global phase-out of CFC-containing metered dose inhalers has been very successful with only a few countries still working on the last stage of CFC phase-out.

Other engagements
Our CEO presented on ‘Upskilling primary health care professionals: the Australian program’ at the Congress of the Kazakhstan Respiratory Society and attended the 8th General Meeting of the Global Alliance against Respiratory Disease in Astana, Kazakhstan, in July 2013.
Best practice, evidence-based asthma guidance for primary care professionals, now published as an innovative, easy-to-use and searchable website

- More than 500 clear and practical recommendations
- The best evidence gathered using a rigorous methodology
- Extensive links to related resources and cited references
- Practice considerations for all primary care health professionals
- Endorsed by the RACGP, APNA and TSANZ
- Companion guide for patients, My Asthma Handbook
Our People

Board
- Assoc. Prof. Noela Whitby AM
  Chairman
  General practitioner
  The Royal Australian College of General Practitioners representative
- Ms Julianne Badenoch (from Nov 2013)
  Practice nurse
  Australian Primary Health Care Nurses Association representative
- Mr Stephen Hughes
  Community pharmacist
  Pharmaceutical Society of Australia representative
- Assoc. Prof. Janet Rimmer
  Respiratory physician and allergist
  Australasian Society of Clinical Immunology and Allergy representative
- Dr Jonathan Burdon AM
  Adult respiratory physician
  Independent Director
- Dr Joanna Wriedt (from Aug 2013)
  Juris doctor in Faculty of Law
  Independent Director

Finance Committee
- Mr Stephen Hughes
- Mr Peter Norman
- Mr Alasdair Norton
- Mr Robert Yeo
Asthma Handbook Guidelines Committee


- Prof. Amanda Barnard
general practitioner (Chair)
- Ms Naomi Fenton
nurse practitioner
- Dr Jenny Gowan
pharmacist
- Dr Jane Marr
general practitioner
- Assoc. Prof. Helen Reddel
respiratory physician
- Assoc. Prof. Janet Rimmer
respiratory physician and allergist
- Prof. Peter van Asperen
paediatric respiratory physician
- Assoc. Prof. Peter Wark
respiratory physician

General Practitioners’ Asthma Group

The General Practitioners’ Asthma Group works to coordinate the expertise, enthusiasm and skills of general practitioners who have a special interest in the management of asthma.

- Dr Kerry Hancock (Chair)
- Prof. Amanda Barnard
- Dr David Batt
- Assoc. Prof. Ian Charlton
- Assoc. Prof. H. John Fardy
- Assoc. Prof. Chris Hogan
- Dr Steven Rudolphy
- Dr Victoria Smith
- Assoc. Prof. Noela Whitby AM
- Assoc. Prof. Sanjiva Wijesinha
- Dr Russell Wiseman

Pharmacists’ Asthma Group

The Pharmacists’ Asthma Group works to coordinate the expertise, enthusiasm and skills of community and hospital pharmacists who have a special interest in the management of asthma.

- Mr Marcus Weidinger (Chair)
- Mr Simon Appel OAM
- Prof. Carol Armour
- Mr Kingsley Coulthard
- Mr Mark Feldschuh
- Mr Peter Holder
- Mr Stephen Hughes
- Ms Karalyn Huxhagen
- Mr Grant Kardachi
- Mr Kevin Morgan
- Ms Toni Riley
- Dr Bandana Saini
- Mr Chris Flood (ex-officio)
- Mr Paul Mackey (ex-officio)

Sensitive Choice Product Advisory Panel

The Sensitive Choice Product Advisory Panel considers products and services for acceptance into the Sensitive Choice program. It is supported by Ms Angela Francis, chief executive, Asthma Foundation (NZ), and Ms Kristine Whorlow, chief executive officer, NAC.

The Panel consists of the following experts:

- Adult respiratory physician (Chair)
- Allergist
- Community pharmacist
- General practitioner
- Engineer
- Industrial chemist
- A person with asthma

Staff

- Ms Kristine Whorlow, Chief Executive Officer
- Ms Siobhan Brophy, Communications Manager
- Ms Rhonda Cleveland, Operations Manager
- Mr Adam Trumble, Partnerships Manager
- Ms Judi Wicking, Program Manager
- Ms Melissa Bell, Marketing Coordinator
- Ms Natalie Bourne, Administration Officer
- Ms Kathryn Goldsworthy, Project Assistant
- Ms Jessica Groom, Project Administration Officer
- Ms Leanne Koster, Online Communications Officer
- Mr Mark Olszewski, Communications Project Officer
- Ms Senka Perera, Executive Assistant
Acknowledgments

The NAC is able to carry out our important work thanks to the generosity of our sponsors and supporters. The Australian Government Department of Health continues to provide invaluable backing for our Asthma and Respiratory Education Program under the Department’s Asthma Management Program 2013–2016.

We thank the Department for their ongoing support of the NAC and asthma management more widely.

Our sponsors from the pharmaceutical and spirometry industry are important allies in spreading the best-practice respiratory management message. We were able to develop many of our latest resources as a result of unrestricted educational grants from these companies and we look forward to their continued support.

We are also grateful to our many Sensitive Choice® Partners who continue to raise awareness of asthma in the community and support our important educational activities.

Finally, we extend our thanks to the many tireless health professionals who help us in all facets of our work. You truly are the cornerstone of the NAC.
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National Asthma Council Australia
YOUR PATIENTS MAY SOON BE ASKING YOU FOR THIS!

Asthma Buddy – the interactive smartphone app for written asthma action plans.

Help your asthma patients stay on track with this easy to use app:

- Personalised instructions for good self-management
- A reminder of their prescribed asthma medications
- Advice on what to do if their asthma is getting worse

Complete with quick access to First Aid for Asthma steps plus the National Asthma Council Australia library of How-to videos on inhaler use.

For more information go to www.nationalasthma.org.au/asthmabuddy

The Asthma Buddy app is based on the latest written asthma action plan template, revised and updated in 2011 by the National Asthma Council Australia in consultation with leading respiratory clinicians.