The aim of the study was to investigate in a qualitative study the thoughts and feelings of women’s experiences of asthma in pregnancy.

Methods NHS IRAS ethical approval and trust research governance were obtained; women gave written informed consent subject to the usual ethical guarantees. Twenty-two women with asthma and a pregnancy within two years were invited to participate. Seven women were interviewed when data saturation was achieved. Data collection took place between March 2012 and September 2012. Interviews were transcribed and analysed using a phenomenological ‘Framework’ Method involving familiarisation; identifying a thematic framework; indexing; charting; mapping; interpretation. Data were independently analysed by two researchers and consensus reached concerning themes.

Results

- Asthma and pregnancy
- Self-management including fears; lack of recognition of symptoms; poor knowledge of inhaled therapy
- Risk factors
- Anxieties including drugs, procedures, risks versus benefits
- General understanding of asthma
- Concealing symptoms

Pregnancy and post-natal experiences

- Impact of exacerbations on baby; breastfeeding benefits; changes to asthma, post-natal experience

Health professionals

- Lack of regular contact; midwife support; interaction with healthcare professionals, education

Conclusions These findings are globally relevant because maternal asthma is so prevalent. They illustrate participants’ experiences of their asthma care and their views on its improvement. Similar to the international literature (Lim et al 2012), pregnant asthmatic women have concerns about their care and treatment, which might be alleviated by outreach, joint working between respiratory nurse specialists, midwives and GP practice nurses.

REFERENCES


Introduction Asthma and COPD account for a significant burden of disease in the UK. Despite comprehensive guidelines, over a 1000 people continue to die from asthma each year and COPD accounts for a leading cause of emergency admissions in the UK.

A joint initiative between a tertiary centre for respiratory disease and commissioning support unit (CSU), asthma and COPD reviews were undertaken by a specialist respiratory pharmacist in GP practices. This study assesses the impact of these reviews.

Aims and Objectives This study aims to assess the impact of the specialist asthma and COPD reviews in accordance with national guidelines and standards of care.

Methods The study was carried out during eight clinical sessions over a two month period, across three GP surgeries. The reviews included the following assessments:

- Quality of life: ACT and CAT scores
- Inhaler technique
- Assessing adherence to maintenance inhalers based on GP prescription records
- Assessing if patients were on the correct therapy in accordance with their diagnosis, symptoms and severity of disease

Patients were identified for review based on use of high dose inhaled corticosteroid and bronchodilator preparations (ICS/LABA) and/or frequency of A&E and hospital admissions.

Results During the eight clinical sessions, 84 patients with asthma or COPD were reviewed (42.5% male), 63% of patients