Abstract P136 Figure 1 Prevalence of asthma and service-related outcomes in RAF asthmatics, stratified by asthma treatment

Results Of 463 asthmatics who responded to the survey, 167 (36.1%) were not currently on asthma treatment, 63 (13.6%) were on reliever therapy only and 233 (50.3%) were on regular asthma treatment. Two-thirds reported adult onset asthma. Those on regular treatment were more likely to have needed urgent/unscheduled treatment, been unable to work due to their asthma and have a current ACQ score indicating uncontrolled disease; whilst this group were more likely to be currently downgraded, they were no more likely to have returned early from deployment than those in other groups (Figure). Comparing individuals with asthma and matched referents, those with disease were significantly more likely to be downgraded (OR 2.36 (95% CI 1.48–3.77), p < 0.001), prevented from deploying for medical reasons (OR 2.47 (95% CI 1.41–4.34), p = 0.006) and be assigned unfit (OR 1.79 (95% CI 1.20–2.73, p = 0.006)). Very few individuals had to return early from deployment, suggesting that restrictions were effective in mitigating risks posed by uncontrolled asthma.

Conclusions The findings from this cohort suggest that asthmatics in the RAF, particularly those taking regular treatment, are being restricted from some jobs and environments; this affects few individuals and does not appear to have a negative impact on service career. Decisions at recruitment are likely to have greater impact and would benefit from being studied prospectively.