participants with milder asthma with normal or elevated BMI. Suboptimal physical activity profile is a treatable trait which should be targeted to improve asthma-related outcomes in appropriate patients.

Please refer to page A191 for declarations of interest related to this abstract.

P51 SPOT THE DIFFERENCE? COMPARISON OF CLINICAL CHARACTERISTICS OF PATIENTS WITH INDUCIBLE LARYNGEAL OBSTRUCTION (ILO) AND ASTHMA REFERRED TO A SEVERE ASTHMA AND AIRWAYS TERTIARY CENTRE

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Introduction and Objectives Patients referred our tertiary airways service are assessed for potential causation of complex breathlessness, including differential diagnosis of asthma and inducible laryngeal obstruction (ILO).

Newman et al (1995) found associations between particular patient variables when comparing patients with asthma and ILO. Further investigation of these and other variables may aid in differential diagnosis and understanding triggers and characterisation of ILO compared to asthma.

Methods Records for 70 patients with sole diagnoses of either asthma (n=34) or ILO (n=36) were reviewed to investigate patterns of association between a large range of variables relating to these conditions, including demographics, co-morbidities, hospital utilisation and medical treatment. Non-parametric statistics were used to compare diagnosis against categorical, interval and ratio data relating to these variables.

Results A number of significant associations were found between diagnosis and patient characteristics, summarised in table 1.

Results showed that certain demographic variables, co-morbidities and medical treatments differentiated these two groups.

Conclusions By continuing to characterise common clinical characteristics of ILO in comparison to asthma, it is hoped that differentiation from asthma and index of suspicion for ILO will be highlighted to help further understand this clinical condition that co-exists and can mimic asthma.

It is of particular interest in the ILO only group that documented symptoms of anxiety were lower than in the group with only asthma, which may help to dispel a common held belief that people with ILO have high anxiety burden.

P52 A SYSTEMATIC REVIEW OF THE EFFECTIVENESS OF EXISTING NON-PHARMACOLOGICAL INTERVENTIONS USED TO TREAT ADULTS WITH INDUCIBLE LARYNGEAL OBSTRUCTION

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Introduction Inducible laryngeal obstruction (ILO) describes transient laryngeal closure during respiration and can cause significant morbidity. Behavioural therapy is the commonly cited treatment but efficacy is largely unknown. Before a standardised approach can be developed, the potential components of intervention and their effectiveness should be understood.

Aim To synthesise the current evidence base on the effectiveness of existing non-pharmacological interventions used to treat adults with ILO.

Methods Electronic databases (MEDLINE/EMBASE/CINAHL/ PsycINFO/AMED/CENTRAL) were systematically searched, informed by a PICO framework. Search terms were agreed by expert peer consensus. Two reviewers independently screened a representative sample, with lead-author completion due to excellent inter-rater reliability. Data was extracted using a pre-defined piloted form. Methodological quality was appraised (blindly by two reviewers) using the Joanna Briggs Institute Critical Appraisal Tools. A narrative synthesis was performed

Abstract P51 Table 1 Patient characteristics according to diagnosis

Patient Characteristic	ILO	Asthma
Age	Higher mean age	Lower mean age
Gender	More females	More males
FEV1% predicted	Higher	Lower
FEV1/FVC ratio	Higher	Lower
Globus	More likely	Less likely
Stridor	More likely	Less likely
Dysphonia	More likely	Less likely
Dysphagia	More likely	Less likely
Laryngeal hypersensitivity	More likely	Less likely
Flattened inspiratory loop	More likely	Less likely
Wheeze	Less likely	More likely
Biologic therapy	Less likely	More likely
Prescribed anti-depressants	Less likely	More likely
Anxiety	Less likely	More likely