Introduction We previously conducted a systematic review of outcome measures for severe asthma and found that existing quality of life (QoL) tools fail to fully capture the deficits experienced by paediatric patients. While the Severe Asthma Questionnaire (SAQ) has been developed for adults, its suitability for children and adolescents remained unexplored. Our aim was to assess the appropriateness of the SAQ for paediatric use and develop a prototype Paediatric SAQ (PSAQ).

Methods We conducted qualitative interviews with children, adolescents, parents, and Healthcare Professionals (HCPs) caring for severe asthma patients. Participants’ perspectives on the relevance, comprehensibility, and comprehensiveness of the SAQ for the paediatric population were sought. The interviews were analysed thematically, and the findings informed development of a prototype PSAQ.

Results A total of 26 patients and parents of children with severe asthma aged 7–17 years were interviewed. The majority were female and had experience with biologics. The 20 HCPs interviewed had >10 years’ experience practicing at a severe asthma centre. Participants represented 11 countries. The majority of SAQ items were deemed relevant with suggestions to remove adult-related examples and edits to improve comprehensibility. For instance, a parent commented their adolescent ‘may not be able to do housework if she’s feeling that she’s not having a good day’, and the adolescent echoed that if they ‘had a big flare-up of my asthma, I’m not going to be cleaning’, and suggested using the term ‘chores’. However, examples such as ‘home maintenance’ and ‘gardening’ were considered irrelevant, a sentiment shared by HCPs who noted the limited familiarity of patients with such adult-related activities. Participants recommended enhancing the PSAQ’s comprehensiveness by addressing environmental triggers, pets, and treatment burden. Several patients mentioned they ‘want a pet but can’t because of my asthma’ while others expressed ‘I think it’s been one of the issues throughout my life with asthma um making sure to take the medication’.

Conclusions We have developed the prototype PSAQ for assessing QoL impairments specific to paediatric severe asthma. Further research will validate the PSAQ, which will be valuable for patient monitoring in clinic and evaluating treatment effectiveness in clinical trials.

Please refer to page A283 for declarations of interest related to this abstract.

Background Preschool wheeze affects about one in three children aged under 5 years in the UK and may be associated with sensitization to aeroallergens. Little is known about the effect of preschool wheeze and atopy on airway mechanics. Forced oscillometry technique (FOT) is a non-invasive, effort-independent lung function technique, which measures airway mechanics expressed as respiratory impedance and is composed of resistance (Rrs) and reactance (Xrs). We sought to: 1) assess the feasibility of FOT in children with preschool wheeze, 2) establish baseline and bronchodilator reversibility (BDR) for FOT measurement in preschool wheezers and relate results to symptom control, quality of life and atopic status.

Methods A prospective, cross-sectional study was undertaken in 35 children aged 1–5 years old with doctor-diagnosed recurrent preschool wheeze attending a paediatric respiratory clinic. A pseudorandom FOT device was used to examine Rrs and Xrs at a frequency of 8 Hz and then repeated after bronchodilator administration. Symptoms and quality of life were assessed using the Test for Respiratory and Asthma Control in Kids (TRACK) and Paediatric Asthma Caregiver Quality of Life Questionnaire (PACQLQ) to correlate symptoms with FOT baseline measurements.

Results 12/35 children had aeroallergen sensitisation. 18/35 (51%) children successfully completed FOT measurement, median age= 4 (3–5). (63%) of those who completed the test...