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Letter re: Reducing emergency department visits utilizing a primary care asthma specialty clinic in a high risk patient population

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Dear Editor

We would like to congratulate Snyder et al. on their primary asthma education initiative. Multiple studies have confirmed that improved asthma education can reduce hospital admissions.

In the U.K, like most western countries, asthma is common, affecting on average three children in every classroom. The UK has one of the highest prevalence's, emergency admissions and death rates for childhood asthma and many of these acute asthma admissions are thought to be avoidable (1).

The article by Snyder et al. recommends a multi-disciplinary approach with face-to-face family education as the cornerstone of its success. The innovative use of health care professionals including pharmacy students and medical assistants in delivering asthma education is vital.

Engaging children at school is a readily available and valuable opportunity to provide education aimed at ultimately reducing asthma related hospital admissions. Indeed, there is good evidence to suggest that peer-to-peer schemes within schools are an effective education tool (2).

Motivated and clinically supervised medical students are an enthusiastic and capable resource to improve asthma awareness in children. Medical students are often keen to volunteer and gain experience that improves their ability to build meaningful relationships with their future patients. Performing this education in schools has two key benefits: first, the patients are already in an educational setting and are therefore primed to learn; second, there is an opportunity to educate the peers of asthmatics thereby reducing the stigma of asthma.

Asthma Innovation Research (AIR) is a charity that has developed an innovative school asthma awareness programme, pioneered at UCL medical school, London, UK.

Medical students were given an opportunity to enhance their knowledge of paediatric asthma before preparing and delivering a 25 min interactive asthma presentation to school children aged six to fifteen (3).

In 2016/2017 AIR educated approximately 2000 school children. The size of the program is increasing every year as our education program is rolled out to medical schools across the UK, including at Birmingham, KCL and Cardiff. Our results have shown not only significant improvements in asthma knowledge but also that a school based asthma program is cost effective and enhances the confidence of teachers and primary school children, both with and without asthma (3).

Our research indicates that the "strongest evidence supports a multidisciplinary approach in both school and hospital environments." (2) Thus we suggest that the hospital based approach, suggested by Snyder et al, alongside a school-based education programme, would be an effective method of both improving understanding of the condition and reducing hospital admissions secondary to asthma.

We would encourage readers to consider a combined School and Hospital based education programme involving medical students as part of the MDT.

Declaration of interest

The authors report no conflicts of interest. The authors alone are responsible for the content and writing of this article.

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