



Respiratory
Effectiveness
Group

Respiratory Group Annual Report 2024

Pioneers in real-life respiratory
data and research

regresearchnetwork.org



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The Respiratory Effectiveness Group looks to a future with Real World Evidence

A global not-for profit collaboration of clinicians, scientists and epidemiologists, working together to identify and fulfil the real-life research needs in respiratory medicine, advocating for change to drive improved patient management.

Our Vision

To transform respiratory patient care by maximising/exploiting/utilising real-life research & evidence.

Our Mission

To integrate real-life evidence into clinical practice guidelines, policy, and budgetary decision-making for the benefit of all stakeholders in respiratory medicine.

REG Strategy

REG will achieve its goal by:

- Nurturing an international network of primary and secondary care respiratory experts with an interest and expertise in real-life research.
- Establishing alliances with partner organisations (e.g. APRS, ATS, EAACI, ENCePP, ERS, ESPACOMP, IPCRG, ISPOR, patient organisations).
- Using RWE to address current key questions in respiratory medicine and impact on relevant international guidelines and health policies.
- Acting as a think-tank to meet challenges in respiratory medicine in a pragmatic way.
- Implementing a multi-faceted programme of activities aimed at improving the understanding of respiratory medicine with REG collaborators, partners and supporters.

REG Direction and Philosophy

- REG leads the development and promotion of high-quality real-life collaborative research in respiratory medicine.
- Setting quality standards:
 - Real-life research studies, especially database studies, comparative effectiveness research and pragmatic clinical studies.
 - Databases to be used in real-life observational research.
 - Use of real-life research by developers of guidelines and decision-makers.
 - Publication of real-life research protocols and results.
 - Assessment of real-life research protocols and results.
- Academic partner to the International Severe Asthma Registry (ISAR).
- Development and assessment of methods used in real-life research, e.g. bias reduction, patient selection, outcome measures.
- Provision of advice and methodological help to researchers developing real-life research projects.

Operational Objectives

RESEARCH:

- To identify and prioritise the real-life research needs in respiratory medicine.
- To stimulate, drive and/or facilitate the development of collaborative real-life research projects to address the identified needs.

- To change the perception of real-life research.

COLLABORATION:

- Grow an international collaboration of clinical and scientific expertise in real-life research, meeting and working together either wholly as REG or within designated Working Groups.
- Facilitate the development of networks of partners and supporters involved in real-life observational research, including academic researchers, industry, service providers, guideline developers, decision makers, regulatory agencies, journal editors, funding agencies, scientific societies, institutional bodies, and patients' organisations, to improve levels of expertise and support research needs.
- Advocate for change in the way journals, guideline committees, and regulatory authorities appraise evidence to better integrate high-quality real-world data into recommendations, clinical decisions and policies.

QUALITY METHODOLOGY:

- Define and set quality standards for real-life research in respiratory medicine, through per protocol historic cohort analyses (database studies) and pragmatic clinical studies.
- Develop, assess and standardise coding and methodology used in real-life research.
- Develop rational prescribing pathways, and clinical management, & decision support tools.
- Drive the publication and appreciation of real-life research validity through:
 - Quality publications in high-impact journals.
 - Incorporation of real-life research into guideline development and health care resource utilisation decision-making.
- Be the "Go to" organisation for advice, assistance, and training on real-world research methodology.

REG Structure

REG Board

BOARD COMPOSITION 2024 - 2026

President – Joan B Soriano - *Associate Professor of Medicine, Hospital Universitario de la Princesa, Universidad Autónoma de Madrid, Diego de León 62, Madrid, Spain.*

REG Company Directors (Board members)

Antonio Anzueto, *Pulmonary/Critical Care, University of Texas Health Science Center at San Antonio, USA.*

Walter Canonica, *Professor Respiratory Medicine, Humanitas University*

Head Personalised Medicine Asthma & Allergy Clinic-Humanitas Research Hospital, Italy.

Alan Kaplan, *Department of Family and Community Medicine, University of Toronto, Toronto, Ontario, Canada.*

Nikos Papadopoulos, *Professor of Allergy and Paediatric Allergy, National and Kapodistrian University of Athens, Athens, Greece.*

Nicolas Roche, *Pneumologie et Soins Intensifs Respiratoires, Groupe Hospitalier Cochin, Assistance Publique-Hôpitaux de Paris, and Université Paris Descartes, France.*

Dermot Ryan, *Strategic Clinical Director, Optimum Patient Care.*

Board members

Mona Al-Ahmad, *Associate Professor, Al-Rashed Allergy Center, Ministry of Health, Kuwait City, Kuwait.*

Fulvio Braido, *Professore associato, Università degli Studi di Genova | UNIGE, Dipartimento di Medicina Interna e specialità mediche (DIMI), Genova, Italy*

Therese Lapperre, *Professor and Head of Dept. of Pulmonology University Hospital Antwerp Antwerp, Belgium*

Marc Miravittles - *Investigador Senior / Senior Researcher, Pneumologia, Hospital Universitari Vall d'Hebron (HUVH), Vall d'Hebron Institut de Recerca (VHIR), Barcelona, Spain.*

Chin Kook Rhee, *Professor, Division of Pulmonary and Critical Care Medicine, Department of Internal Medicine, Seoul St. Mary's Hospital, College of Medicine, The Catholic University of Korea, South Korea*

Omar Usmani, *Reader in Respiratory Medicine and Consultant Physician at the National Heart and Lung Institute (NHLI), Imperial College London & Royal Brompton Hospital (RBH).*

Keith Allan

Trevor Lambert

Nick May

The Board members have representation across the following geographic and care-domain areas, reflecting the high calibre of our collaborators:

- Asia-Pacific, Europe & North America
- Asthma, Allergy, COPD, ILD/IPF
- Primary, secondary & pharmacy care
- Adult and paediatric specialisms

Working Group Chairs

Adherence – Amy Chan, New Zealand

Allergy Working Group – Désirée Larenas-Linnemann, Mexico

Biomarkers and Severe Asthma – Leif Bjermer, Sweden

Child Health Working Group – Clare Murray, UK

COPD Working Group - Marc Miravittles, Spain

Cost Effectiveness Working Group – Brett McQueen, USA

Database and Coding Working Group – Jennifer Quint, UK

ILD/IPF – Pilar Rivera-Ortega, UK

Environment, Epidemiology and Airways Working Group – Omar Usmani, UK

Technologies Working Group – Ron Dandurand, Canada

The year in review

Staff

Good progress has been made with our research projects. REG is very appreciative and acknowledges all the great work that Dr Graham Lough and Dr Valeria Perugini have done in 2024. They have been instrumental in supporting REG and the working groups to keep the momentum in the delivery of our projects. A big thank you and congratulations to them both for their hard work over this past year.

Governance

Our REG Board has met regularly online and in person during 2024 to address the organisational needs and is aware of the need to grow collaborations and supporters. The REG Board has continued to carry out its duties and support the goals of the organisation.

Scientific Outputs

Scientific Outputs are primarily achieved through the REG Working Groups. The Working Groups continue to develop and execute projects in their respective scopes of operation. Many Working Groups held meetings during the REG Summit and online. For more detailed information on the Working Groups and their projects, please refer to the Working Groups reports (Page 5). During this past year, 4 pieces of original research were published, and a further 3 manuscripts were submitted for review. At year end, there are four active studies and seven projects in development.

Finance

In 2024, corporate support was renewed, and new project funding secured. Careful planning and use of resources have enabled REG to deliver projects within budget and yielded a small operating gain (see Balance Sheet at the end of the report). We continue to closely monitor our spending with the goal to be as economical as possible. The valuable work of REG, both in terms of its research networks and its political influence, depends on the continued collaboration with our valued supporters, and we thank them for their on-going financial and expert contributions.

Meetings

The annual REG Summit was a successful live in-person event from 14 – 16 March 2024 in Vienna. The REG Summit remains a key vehicle to showcase the many achievements of the organisation and our valued Collaborators, together with providing an interactive programme of presentations and debates covering the hot topics in respiratory medicine. The live meeting was warmly received by all participants. The next Summit is taking place from 20-22 March 2025 in London. A report on the Summit appears later in this report.

Communications

The REG Newsletter provides REG collaborators and supporters with comprehensive updates of the work of REG and is published twice a year. Regular updates are sent out by email and posted on the REG website www.regresearchnetwork.org

International Conference & Congress Activities

REG Summit 2024, 14 – 16 March, Vienna

The REG Summit 2024 was held as a live face-to-face event in Vienna and marked an important milestone for REG, celebrating its 10-year anniversary. Entitled “Capitalizing on real-life research for best clinical guidance”, the meeting lived up to expectations. Participants warmly welcomed the opportunity to reconnect with colleagues. Participants from 20 countries, included practitioners, researchers, students and industry collaborators who are working together and looking for opportunities to establish new collaborations. Noted international speakers delivered the plenaries and pro-con debates format.

Prior to the main scientific programme, on Thursday 14th March 2024, the Summit took us back to our roots with a return to a brainstorming format for research ideas, reminiscent of our early years. This session explored various diseases across the working group spectrum.

A full report of the REG Summit 2024 and the abstracts can be found in the October 2024 REG Newsletter

https://www.regresearchnetwork.org/wp-content/uploads/REG-Newsletter_Issue_OCT-2024_final.pdf

Working Group update

Adherence Working Group

In 2024, the Adherence WG experienced a leadership change with Amy Chan becoming the new Chair after Sinthia stepped down. Sinthia continues to lead the scoping project, which involves developing two manuscripts: Phase I focuses on identifying key elements of effective adherence in managing chronic respiratory diseases with new technologies, while Phase II examines current adherence monitoring methods and addresses challenges in respiratory disease management. Under Amy's leadership, the group had a productive brainstorming session in December 2024, generating several new research ideas. These include examining the impact of the GINA guidelines update on medication use, comparing adherence to asthma and COPD guidelines in emergency departments, and exploring the role of biologics in asthma treatment. These ideas will be further refined and discussed at the WG meeting during the REG Summit in March 2025, to ensure they address the current needs in respiratory care.

Allergy Working Group

The group had developed a prospective study on secondary prevention in moderate allergic asthma with AIT. This was sent to AIT companies, but funding could not be secured.

A potential idea involving missed AIT opportunities in the UK "Allergen Immunotherapy Missed Opportunities and Resource Expenditure in the UK (AIMORE-UK)" is in development and will be discussed at REG Summit in March 2025. The project will utilise estimates from systematic reviews to identify patients who would benefit from AIT and use primary / secondary healthcare data to assess how many patients who would benefit from AIT are missed and the cost of healthcare resource usage by missing these patients.

The group is also discussing a potential project "Persistent to Chronic Rhinosinusitis: From Presentation to Referral (P2C-RS)", aiming to identify the healthcare resource use and cost of healthcare associated with delayed time to diagnosis of persistent RS, as well as treatment effectiveness under the United Airways concept.

Child Health Working Group

The Child Health WG continued to make substantial progress in 2024, with a key focus on understanding severe asthma in paediatric populations. Utilising data from the OPCRd, the group completed a comprehensive retrospective study that assessed the prevalence of severe asthma in UK primary care using seven different definitions. This analysis has now been concluded, and the findings were used to finalise a study report in December 2024. The group is actively preparing a manuscript for submission in the coming months.

The group also made a significant contribution to the PEARL project, following the publication of endorsed recommendations for asthma monitoring in children, supported by prominent organisations such as APAPARI, EAACI, INTERASMA, REG, and WAO. Building on this, the group is advancing two pivotal research papers focusing on biomarkers and treatments in paediatric asthma, with plans to submit them for publication in 2025.

Cost effectiveness Working Group

The group has started a project to model and estimate the cost-effectiveness of time to initiation of biologic treatment in severe asthma patients using ISAR. This project aims to evaluate global and national-level cost-effectiveness of biologics and quantify national

disease burden. The project is sponsored by AstraZeneca and protocols have been approved by AstraZeneca and ISAR.

COPD Working Group

The COPD WG made significant progress in 2024, marked by several key achievements.

A notable milestone was the completion of the prospective observational study on suboptimal Peak Inspiratory Flow (PIF) in COPD patients, which involved the recruitment of 415 COPD patients across 17 study sites worldwide. The results based on baseline data are included in a manuscript currently undergoing a second revision for publication in *BMJ Open Respiratory Research*, while the findings from follow-up visits are being incorporated into a separate manuscript under revision.

In parallel, the group made considerable strides with the PRECISE-X project, focused on developing a risk prediction model for the first severe exacerbation in COPD patients. After analysing data from the CPRD, the group finalised a manuscript, which was submitted to *The Lancet Respiratory Medicine* in February 2025.

Also, in December 2024, the group launched a new study investigating the effects of triple pharmacological therapy on post-discharge outcomes in COPD patients. Ethical approval applications are currently in progress, with plans to collect patient data from multinational hospital databases by the end of 2025.

Database and Coding Working Group

In 2024, the Databases and Coding WG has finalised the research concept proposal exploring the combined effects of COPD and type 2 diabetes mellitus (T2D) on health outcomes and mortality, with a specific focus on GLP-1 receptor agonists. The group has developed a study proposal that outlines a robust methodology, which includes the collection of patient data from multinational hospital databases and is now in the process of seeking funding to support the project.

Environment, Epidemiology and Airways Working Group (formerly Small Airways Working Group)

The manuscript "Patient and Provider Perspectives Driving Inhaler Choice: Optimizing Sustainable Health Care" was published in CHEST journal (<https://doi.org/10.1016/j.chest.2024.06.3774>). The REG position statement has been accepted for publication in the Journal of Aerosol Medicine and Pulmonary Drug Delivery. The group will discuss new projects at the REG Summit 2025.

ILD/IPF Working Group

The manuscript 'The Interstitial Lung Disease Patient Pathway: From Referral To Diagnosis' was published in ERJ Open Research (<http://dx.doi.org/10.1183/23120541.00899-2024>). The project aimed to characterise ILD diagnosis across 64 countries, identifying similarities and differences in the patient diagnostic pathway between ILD specialist centres, non-ILD-specialist centres, and different regions.

The ILD Working Group had a working group meeting at the 22nd International Colloquium on Lung and Airway Fibrosis (ICLAF) in Athens. The group discussed the flagship ILD project "Towards Standardisation in IPF / PPF Registry Data: A Global Initiative", consisting of three subprojects:

Project 1: "Identifying Key Variables through a Global Prioritisation Task" aims to define the most critical diagnostic, clinical, and patient reported variables that should be captured across IPF/PPF registries, creating a registry standardisation framework.



Project 2: “Identifying Data Elements for Disease Management” will utilise the registry standardisation framework to collect real-world data from multiple centres to evaluate the framework’s ability to assess key clinical outcomes and refine the standardisation process based on practical data collection insights.

Project 3: “Development of a Global Composite Staging System for IPF / PPF Disease Progression” will harness this data to determine the relevant diagnostic and clinical indicators associated with disease progression in IPF and PPF and create and validate a global comprehensive staging system for IPF and PPF.

The group have also developed a proposal “Genetic Determinants of Pulmonary Hypertension in Interstitial Lung Disease: Uncovering Pathways for Early Detection”, which aims to perform genomic analyses to identify common shared genes between PH and ILD. The proposal is currently under discussion with potential funders.

A proposal has been developed for a project which aims to reach consensus on the utility of genomic testing and screening of relatives for early ILD diagnosis. The project “Genomic Testing for Interstitial Lung Disease: An International Delphi survey and global mapping exercise” aims to identify centres around the world where genomic testing is offered for ILD cases and identify the core features for establishing a Genetics-ILD service.

The group are currently discussing a project which aims to predict mortality or the need for lung transplant in patients admitted with acute exacerbations of ILD.

Severe Asthma and Biomarkers Working Group

New research ideas and areas of interest for the group will be discussed at the WG meeting during the upcoming REG Summit 2025, scheduled for March in London.

Technology Working Group

At REG Summit 2024, new technologies were discussed but new project ideas could not be established. Potential new project ideas will be discussed at the working group meeting at the upcoming REG Summit including projects involving nebuliser use.

Vaccines Working Group

A new research proposal “Vaccine Uptake and Clinical Outcomes in At-Risk Chronic Respiratory Patients: A Retrospective Database Study” has been developed and currently seeking funding. The project focusses on vaccine uptake among at-risk respiratory patients and evaluating the clinical and economic implications of vaccination.

Active and planned projects

Project name	Description	Current phase
COPD		
Assessing the utility of Peak Inspiratory Flow as a predictor for COPD exacerbations	A prospective trial to assess the role of PIF in predicting COPD exacerbations	The manuscript on baseline characteristics has been submitted to BMJ Open Respiratory Medicine. The final manuscript, including results from follow-up visits, has been



		finalised and is now under revision in R2.
PREdiCTing the risk for first COPD Severe EXacerbation (PRECISE- X)	Development of a risk prediction model for first severe COPD exacerbation	The manuscript has been submitted to The Lancet Respiratory Medicine.
Effects of triple pharmacological therapy on post-discharge outcomes in patients with COPD	A retrospective study investigating the frequency and risk factors for readmission and early exacerbations in COPD patients discharged after an exacerbation, and the impact of triple therapy in prolonging time to the next admission.	The study setup is ongoing.
Child Health		
PeARL: Paediatric Asthma in Real Life	A standard setting exercise in paediatric asthma based on systematic review, expert consensus and ontological analysis of the unanswered questions in paediatric asthma	The manuscripts have been published, and two more are currently under preparation.
Determining the prevalence of severe asthma in children in UK primary care	A retrospective study assessing the prevalence of severe asthma in children (4-15 years) in UK primary care using seven distinct definitions of severe asthma.	The manuscript is currently under revision.
Environment, Epidemiology & Airways		
Respiratory Effectiveness Group Position Statement: Inhaler Choice: Balancing Personalised Healthcare and Environmental Responsibility	Survey and position statement on choice of inhaler delivery method (DPI, pMDI & SMI) and the impact of on climate change and patient outcomes	Manuscript accepted and awaiting publication.
Adherence		
Adherence monitoring and management	Literature reviews to assess how adherence is currently incorporated within guidelines and to determine how adherence can be monitored and managed with personalised medicine.	The manuscripts have been finalised and are now under revision.



Databases and Coding		
Exploring the combined effects of COPD and type 2 diabetes mellitus on health outcomes and mortality, with insights into GLP-1 receptor agonists	A multinational retrospective study examining health outcomes, disease progression, and healthcare needs of patients with co-occurring T2D and COPD, including the potential impact of GLP-1RAs.	In the process of seeking funding.
ILD		
Genetic Determinants of Pulmonary Hypertension in Interstitial Lung Disease: Uncovering Pathways for Early Detection and Precision Medicine	Investigate overlap and distinction of genes associated with Group 3 pulmonary hypertension in ILD patients to highlight unique genetic markers for targeted screening and therapeutic interventions.	Research proposal has been submitted to funders and under review.
Towards Standardisation in IPF / PPF Registry Data – Project 1: Identifying Key Variables through a Global Prioritisation Task	Identification of key variables to include in IPF / PPF registry and exploration of similarities and differences in diagnostic / prognostic priorities across different regions. Development of a registry standardisation template.	Research proposal has been developed and in discussion with potential funders.
Towards Standardisation in IPF / PPF Registry Data – Project 2: Identifying Data Elements for Disease Management	IPF / PPF registry data population and internal validation of disease outcomes. Refinement of key variables.	Research proposal has been developed and in discussion with potential funders.
Towards Standardisation in IPF / PPF Registry Data – Project 3: Development of a Global Composite Staging System for IPF / PPF Disease Progression	Creation of a comprehensive staging system for IPF and PPF that can be applied globally. Evaluate regional variations: and assessment of regional differences and commonalities in the stages of disease progression to understand	Research proposal has been developed and in discussion with potential funders.



	geographical variations and enhance the staging system's applicability. Validation of the global registry.	
Genomic Testing for Interstitial Lung Disease: An International Delphi survey and global mapping exercise	Identification of centres around the world where genomic testing is offered for ILD cases and identify the core features for establishing a Genetics-ILD service, taking into account current practices and disparities in access to genomic testing and genetic counselling.	Research proposal has been developed and in discussion with potential funders.
Acute exacerbations, mortality and lung transplant in IPF patients	Retrospective tertiary dataset used to predict mortality and eligibility for lung transplants in IPF patients.	Proposal in development.
Severe Asthma & Biomarkers		
Biomarkers to predict the outcome of biological treatment	Using data from various registries to look at blood eos, FeNO, and IgE changes in response to treatment with biologics and investigate the interactions between different biomarkers and comorbidities to predict the use of biologics.	Under discussion.
Allergy		
Allergen Immunotherapy Missed Opportunities and Resource Expenditure in the UK (AIMORE-UK)	Retrospective / cost study to identify clinical and costs associated with underutilisation of AIT in the UK.	Early stages of development. Will be discussed at REG Summit 2025.
Persistent to Chronic Rhinosinusitis: From Presentation to Referral (P2C-RS)	Retrospective / cost study to evaluate the healthcare and cost burden of delayed diagnosis and referrals of persistent rhinosinusitis and associated comorbidities.	Early stages of development. Will be discussed at REG Summit 2025.
Cost Effectiveness		
A global evaluation of the economic impact of time to initiation of biologic treatment of severe asthma patients	Economic model to estimate the cost-effectiveness of early vs late biologics in severe asthma patients.	Fully funded. Protocols approved by ISAR and AstraZeneca. Awaiting data for analysis.



Vaccines		
Vaccine Uptake in Chronic Respiratory Patients: A Retrospective Study Across At-Risk Respiratory Diseases	Database study to evaluate the clinical and economic impact of vaccination on hospitalisations / exacerbations.	Research proposal has been developed and will be sent to funders.

Publications in 2024

In 2024, REG achieved 4 publications of its research and activities. A further 3 manuscripts have been submitted to journals and another 5 are in preparation. A full list of REG research publications is available on the REG website:

<http://regresearchnetwork.org/reg-research-publications/>

Recommendations for asthma monitoring in children: A PeARL document endorsed by APAPARI, EAACI, INTERASMA, REG, and WAO

Nikolaos G. Papadopoulos, Adnan Custovic, Antoine Deschildre, James E. Gern, Antonio Nieto Garcia, Michael Miligkos, Wanda Phipatanakul, Gary Wong, Paraskevi Xepapadaki, Ioana Agache, Stefania Arasi, Zeinab Awad El-Sayed, Leonard B. Bacharier, Matteo Bonini, Fulvio Braido, Davide Caimmi, Jose A. Castro-Rodriguez, Zhimin Chen, Michael Clausen, Timothy Craig, Zuzana Diamant, Francine M. Ducharme, Motohiro Ebisawa, Philippe Eigenmann, Wojciech Feleszko, Vincezo Fierro, Alessandro Fiocchi, Luis Garcia-Marcos, Anne Goh, René Maximiliano Gómez, Maia Gotua, Eckard Hamelmann, Gunilla Hedlin, Elham M. Hossny, Zhanat Ispayeva, Daniel J. Jackson, Tuomas Jartti, Miloš Jeseňák, Omer Kalayci, Alan Kaplan, Jon R. Konradsen, Piotr Kuna, Susanne Lau, Peter Le Souef, Robert F. Lemanske, Michael Levin, Mika J. Makela, Alexander G. Mathioudakis, Oleksandr Mazulov, Mário Morais-Almeida, Clare Murray, Karthik Nagaraju, Zoltan Novak, Ruby Pawankar, Marielle W. Pijnenburg, Helena Pite, Paulo M. Pitrez, Petr Pohunek, David Price, Alfred Priffanji, Valeria Ramiconi, Daniela Rivero Yeverino, Graham Roberts, Aziz Sheikh, Kun-Ling Shen, Zsolt Szeplafusi, Ioanna Tsiligianni, Mirjana Turkalj, Steve Turner, Tetiana Umanets, Arunas Valiulis, Susanne Vijveberg, Jiu-Yao Wang, Tonya Winders, Dong Keon Yon, Osman M. Yusuf, Heather J. Zar, WAO Pediatric Asthma Committee

<https://doi.org/10.1111/pai.14129>

Patient and provider perspectives driving inhaler choice: optimizing sustainable healthcare

Graham Lough, Sinthia Bosnic-Anticevich, Nicolas Roche, Omar S. Usmani

<https://doi.org/10.1016/j.chest.2024.06.3774>

The Interstitial Lung Disease Patient Pathway: From Referral to Diagnosis

Graham Lough, Rayid Abdulqawi, Gina Amanda, Katerina Antoniou, Arata Azuma, Milind Baldi, Ahmed Bayoumy, Jürgen Behr, Elisabeth Bendstrup, Demosthenes Bouros, Kevin Brown, Nazia Chaudhuri, Tamera J. Corte, Vincent Cottin, Bruno Crestani, Kevin R. Flaherty, Ian Glaspole, Leticia Kawano-Dourado, Michael P. Keane, Martin Kolb, Fernando J. Martinez, Maria Molina-Molina, Iñigo Ojanguren, Laurence Pearmain, Ganesh Raghu, Paola Rottoli, Stefan C. Stanel, Gabriela Tabaj, Carlo Vancheri, Brenda Varela, Bonnie Wang, Athol Wells, Pilar Rivera-Ortega

<https://openres.ersjournals.com/content/early/2024/09/19/23120541.00899-2024>



WHY GUIDELINES CAN BE HARD TO SWALLOW: Following guidelines: don't ignore evidence based medicine

Dermot Ryan

<https://www.bmj.com/content/387/bmj.q2573>

Financial summary

Profit and Loss

Respiratory Effectiveness Limited Trading as REG (Respiratory Effectiveness Group)

For the year ended 31 December 2024

	2024	2023
Turnover		
Restricted Income	272,273.94	341,484.83
Unrestricted Income	60,000.00	58,586.05
Total Turnover	332,273.94	400,070.88
Cost of Sales		
Research Costs	163,242.17	227,435.01
Summit Costs	1,742.46	2,016.76
Total Cost of Sales	164,984.63	229,451.77
Gross Profit	169,031.77	172,635.87
Administrative Costs		
Administrative Costs	164,353.10	166,995.66
Total Administrative Costs	164,353.10	166,995.66
Total Costs	329,337.73	396,447.43
Net Profit/(Loss)	2,936.21	3,623.45



Balance Sheet

Respiratory Effectiveness Limited Trading as REG (Respiratory Effectiveness Group)

As at 31 December 2024

	31 DEC 2024	31 DEC 2023
Assets		
Bank		
BARC EUR	119,529.16	121,634.59
BARC GBP	205,994.62	270,245.44
BARC USD	29,048.17	28,633.88
Total Bank	354,571.95	420,513.91
Current Assets		
Accounts Receivable	32,198.78	10,132.70
Prepayments	2,884.00	-
Total Current Assets	35,082.78	10,132.70
Total Assets	389,654.73	430,646.61
Fixed Assets		
Tangible Assets		
Office Equipment - accumulated depreciation	(585.33)	(585.33)
Office Equipment - at cost	586.33	586.33
Total Tangible Assets	1.00	1.00
Total Fixed Assets	1.00	1.00
Total Assets	389,655.73	430,647.61
Liabilities		
Creditors Liabilities		
Accounts Payable	415.20	524.16
Accruals	2,800.00	-
Deferred Revenue	239,726.57	284,939.80
Others	0.04	-
Pension Fund	328.53	328.53
VAT Control	(360.60)	(413.19)
REG Barclaycard	572.78	346.86
Total Creditors Liabilities	243,482.52	285,726.16
Total Liabilities	243,482.52	285,726.16
Total Liabilities	243,482.52	285,726.16
Net Assets	146,173.21	144,921.45
Equity		
Accumulated Surplus	143,237.00	141,298.00
Current Year Earnings	2,936.21	3,623.45
Total Equity	146,173.21	144,921.45