ADVANCES IN... REAL-LIFE RESPIRATORY MEDICINE

The Respiratory Effectiveness Group Newsletter

REG Continues to Build Momentum

As we approach the end of another productive year for REG, it is rewarding to see the continued momentum achieved by the outputs of our Working Groups in terms of the number of high-profile publications (see page 6). This edition provides updates on the activities of the REG Working Groups and serves to demonstrate both the quantity and quality of work ongoing – and/or planned! During the year, we also saw the formation of two new Working Groups: one focused on Severe Asthma and the second on Obstructive Sleep Apnoea (OSA).

The annual REG Summit remains a key vehicle to showcase the many achievements of the organisation and our valued Collaborators. Summit 2017, which will take place in London on 31 March/1 April, 2017, continues this role and additionally will provide an interactive programme of presentations and debates covering the hot topics in respiratory medicine, under the theme ***What Lies Ahead? Translating the Value and Potential of Real-Life Evidence***. We are pleased to have attracted a set of eminent speakers who will promote discussion, debate and prompt study opportunities to address the future research needs in respiratory medicine that the Group can pursue.

You can read more about the Summit 2017 Programme on page 2 and the Summit itself on page 3.

Our research leads within the Executive Committee, Nicolas Roche and Sinthia Bosnic-Anticevich have been busy examining the many research needs within the field and have compiled a list of statements articulating what we at REG see as our strategic goals in addressing the key issues and requirements for high-quality evidence and standards. Read more about our research vision and our new research search engine on page 8.

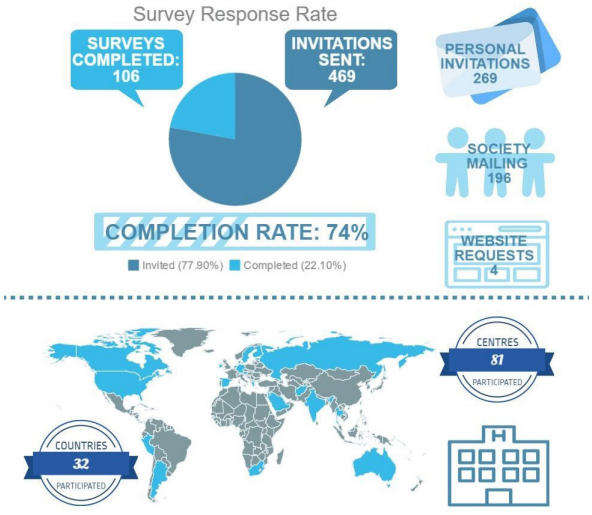
As a Group, we are all dedicated to build further on the current momentum achieved so far and we look forward to sharing more good news with you shortly. We look forward to supporting you in 2017 and beyond. In the meantime, we wish you all a peaceful and prosperous new year.

Contents

Global Study: Characterising ILD Diagnostic Practice

The IPF/ILD Working Group *Global Characterisation of ILD Diagnostic Practice* study launched in November 2016. The rationale for the study is that the licensing of efficacious IPF therapies has resulted in increased focus on the need for earlier and accurate IPF (and ILD) diagnosis. The working group proposed an IPF diagnostic agreement study at the first meeting of the group at the ATS in 2015 but also agreed that to design a meaningful agreement study, more information is required on how ILDs are diagnosed in everyday routine care both within and outside the known specialist centres. To this end, an e-survey was developed to characterise diagnostic practice around the world. The survey was developed and reviewed by the working group and secured ethics approval. REG has been working with identified continental and national representatives to develop local language versions of the survey and develop mailing lists.

To date, the survey has been sent out to over 400 individuals across the globe and has received over 100 responses. See the Working Group update (pp.5) for further details and more information on the work of the group.



REG Summit 2017

Taking place in London over the two days Friday 31 March and Saturday 1 April, 2017, Summit 2017 will provide a unique opportunity collaborators and supporters to share ideas and speak openly through a mix of informative and interactive sessions about opportunities to advance respiratory research and patient care, under the theme ***What Lies Ahead? Translating the Value and Potential of Real-Life Evidence.***

PROGRAMME

Friday 31st March 2017

09.45 - 10.00	Welcome Address	
10.00 - 11.00	What Lies Ahead... Solutions to Services Under Pressure?	Chair:Walter Canonica
	Precision medicine begins with adherence	Eric van Ganse
	Stratification to target resource and deliver efficiencies	Dermot Ryan
	Registries to streamline referral pathways: COPD	Joan B. Soriano
	Discussion: Barriers and REG-supported solutions to global registries and intelligent CDSS	
11.10 - 12.00	Oral Abstract Session 1A: *Epidemiology & Future Risk*	
11.10 - 12.00	Oral Abstract Session 1B: *Patient-centricity*	
12.05 - 12.50	What Lies Ahead... Will emerging therapies realise their potential?	Chair: Demosthenes Bouros
	Part 1: The Changing Face of IPF	
	Landmark trials, emerging therapies and real-life evidence requirements	Luca Richeldi
	Glimpsing the future - data visualisation on a global scale	George Washko
	Discussion: real-life research and technology opportunities in IPF.	
12.50 - 13.50	Lunch, Posters and Exhibits	
13.50 - 14.55	What Lies Ahead... Will emerging therapies realise their potential?	Co-Chair:Nemr Eid &
	Part 2: Immunotherapy and Biologics	George Christoff
	Immunotherapy: real-life promises and challenges	TBC
	Biologics for Asthma: The Future is Here	Mark Fitzgerald
	Biologics for Asthma: Realities and Deception	Peter Barnes
	Discussion: trial and reality disconnects, the value proposition for biologics and important evidence gaps.	
15.00 - 15.50	Oral Abstract Session 2A: *Safety and Adverse Events*	
15.00 - 15.50	Oral Abstract Session 2B: *Cost-Effectiveness*	
15.50 - 16.30	Break, Posters and Exhibits	
16.30 - 17.15	DISCUSSION: e-cigarettes: a silver bullet? How far can we agree?	Chair:Joan B. Soriano
	Speakers:	Martin Dockrell, Esteve Fernandez
18.15 - 22.00	Evening Networking and Dinner Event	

Saturday 1st April 2017

08.45 - 09.45	DEBATE: Triple Therapy: To TT or Not to TT?	Chair: Bernardino Alcazar Navarrete
	PRO: The case for Triple Therapy in COPD	Joergen Vestbo
	CON: The argument against Triple Therapy in COPD	Guy Brusselle
	Discussion: Is there an inevitable drift?	
10.00 - 11.05	Oral Abstract Session 3A: *Validation and Quality*	
10.00 - 11.05	Oral Abstract Session 3B: *Devices and Technology*	
11.05 - 11.20	Research Presentation Awards	
11.20 - 12.20	What lies ahead... Will the flowers of innovation bloom or die?	Chair: Omar Usmani
	Seeds of Success	
	Virtual reality to improve real-life: asthma management	Andrew McIvor
	Predicting the future - sentinel networks	Walter Canonica
	Avoiding rocky ground: addressing barriers to implementation	John Blakey
	Discussion: REG's role in guiding and shaping respiratory technologies	
12.20 - 13.30	Closing Remarks, followed by lunch	

REG Summit 2017

Submission of Abstracts

Abstracts are being accepted and can be submitted online by following the link below. The deadline for submission is **31 January 2017**.

We welcome proposals for both oral and poster presentations which relate to our overall theme of translating the value and potential of real-life evidence in respiratory medicine. To tie in with the overall theme of the conference, abstracts will be reviewed in the context of the following six broad categories: Epidemiology and Future Risk; Safety and Adverse Events; Validation and Quality; Cost-Effectiveness; Devices and Technology and Patient-Centric Approaches.

SUBMIT AN ABSTRACT
www.effectivenessevaluation.org/Abstract

Working Group & Project Meetings

A number of Working Group and project meetings will take place during Summit 2017. These will take place on Thursday 30th March, prior to the Summit and on Saturday 1st April in the afternoon, following the close of the event. Currently requested meetings:

- Adherence Working Group
- Technologies Working Group
- Severe Asthma Registry project
- Progressive Fibrotic Lung Disease study
- Executive Committee Meeting

If you would like to request a meeting, please contact: enquiries@effectivenessevaluation.org

Scientific Committee

We are delighted to confirm that the 2017 Summit will be supported by an eminent committee of REG Collaborators:

- Demosthenes Bouros
- George Christoff
- Nemr Eid
- Alan Kaplan
- Bernardino Alcazar Navarette
- Joan B. Soriano
- Omar Usmani

The committee are supported by Walter Canonica as the Events Lead on the REG Executive Committee.

We have been working with the committee to shape the programme; committee members are also providing invaluable support in chairing a range of plenary sessions and will have responsibility for the review of all submitted abstracts.

The 2016 REG Summit benefitted significantly from the input of the committee and we look forward to working with with the new team for the successful delivery of the 2017 event.

Supporting the Summit

The Summit meeting provides a unique opportunity for supporters and collaborators to share ideas and speak openly about opportunities to advance respiratory research and patient care.

We have a number of sponsorship packages available for those organisations wishing to support the Summit 2017 meeting. To register your interest in supporting Summit 2017 and discuss the various options available to you, please contact Andrew Worsfold at: **andrew@effectivenessevaluation.org**

SUMMIT 2017 REGISTRATION FEES

	Up to 27 January, 2017	28 January to 31 March, 2017
REG Collaborator	FREE	FREE
Industry	£550 (GBP)	£650 (GBP)
Health Practitioner	£350 (GBP)	£450 (GBP)
Full-time academic	£350 (GBP)	£450 (GBP)
Full-time student	£250 (GBP)	£350 (GBP)
Social Enterprise	£350 (GBP)	£450 (GBP)

Registration fees must be paid prior to the event.
Fees are non-refundable but registration may be transferred on request.

REGISTER FOR SUMMIT 2017
www.effectivenessevaluation.org/Register

VENUE

Sheraton Heathrow Hotel,
Colnbrook Bypass, West Drayton, UB7 0HJ, UK

The hotel is located close to Heathrow Airport for ease of access by our international collaborators.
Accommodation can be booked via REG at the time of registering and must be paid prior to the event.

Working Group Updates

Databases Working Group

The group met at the time of the ERS to discuss the Towards Optimum Reporting of Pulmonary Effectiveness Databases and Outcomes (TORPEDO) project, led by working group lead Katia Verhamme and Job van Boven. The output of this study will be the development a full list of variables relevant to respiratory research that would feature within a "gold standard" respiratory database. The final list will be used both as a means to characterize databases to assist in identifying the optimal research tool for respiratory studies, and as a means to report (for authors) and appraise (for reviewers) the quality and extent of databases used for completed respiratory studies. TORPEDO, which commenced on December 1st, is using an electronic Delphi methodology to capture variable recommendations across from an expert panel of 30-40 REG collaborators, including respiratory specialists, health economists and representatives from journals, guideline bodies and societies from around the world.

The project has been planned with reference to prior work by the Patient Centred Outcome Research Institute's (PCORI's) and their Common Data Model team and by the International Society for Pharmacoepidemiology (IPSE) and will build on their recommendations, but with a specific focus on developing a framework and practical tool for respiratory database research.

ACOS Working Group

The priority for the working group whilst at the ERS was to discuss the next steps for the ACOS Proof of Concept study. The pilot evaluation of ACOS incidence and patient characteristics across a range of different potential working definitions of ACOS for use in database studies has been completed using the UK's Optimum Patient Care Research Database (OPCRD). The results are being finalised for publication following minor revisions recommended at the ERS working group meeting.

We are now looking to a range of leads within the group to repeat the analyses in other national databases to allow both within and between database differences across these potential ACOS definitions to be evaluated. Funding is also being sought for the next important stage of the work – to explore the clinical implications of these different definitions in terms of exacerbations / disease severity and response to ICS-contianing therapy.

REG/EAACI Quality Standards Taskforce

A subgroup of the REG/EAACI Taskforce met in London to confirm the next, and finals dissemination, steps of the taskforce work. Two papers devised as a result of the work are currently in draft; the main paper is an overview of the work and a position statement on database asthma literature quality. The second paper will document the development and methodological rigour of the quality tool created by the taskforce to enable the literature appraisal. The aim is to publish both papers in early 2017. Once published, wider dissemination and engagement activities are planned to promote the tool and encourage endorsement by the ATS and the ERS guidelines groups.

COPD Working Group

Dr Juan José Soler Cataluña presented an REG poster at the 2016 ERS reporting the result of the UK database validation of his (and colleagues Marc Miravitlles and Bernardino Alcazar's) concept of control in COPD. This retrospective database study suggests COPD Control may have prognostic value in terms of predicting COPD exacerbations in the following year. The full study manuscript is currently in preparation. The work, and that of small prospective studies in Spain reinforce the importance of the working group's on-going 2-year, multi-centre international prospective validation of COPD Control that Marc Miravitlles is leading. Recruitment of the 328 patients for the study concluded in November thanks to the efforts of the international investigators who are working across the UK, Ireland, Spain, Poland, Malta, Singapore and South Korea. Initial follow visits have already been completed for >50% of the patients with subsequent visits due to conclude in Q1 2018.

Protocols have been developed in collaboration with the COPD working group for two new studies looking at: (i) ICS reduction and withdrawal in COPD ("Real-life WISDOM") and (ii) the natural history of Alpha1 Antitripsin Deficiency in a real-world UK population. REG is seeking funding to take these ideas further.

Obstructive Sleep Apnoea (OSA) Working Group

A small group, led by Dr Mihaela Stefan, met in London to discuss the new OSA Working Group and to explore the potential, and prioritise ideas, for studies within this area. The meeting was very constructive and brought together experts with a research interest in the overlap of OSA, obstructive lung disease (OLD), respiratory rehabilitation and remote CPAP monitoring. The group agreed that the first activity will be a small pilot study to quantify and characterise the number of patients within the Optimum Patient Care Research Database (OPCRD) with the broader label of Sleep-related Breathing Disorder (SBD); the prescribing of CPAP (specifically in these patients and the acute respiratory event rates pre/post SBD diagnosis in those with OLD.

This work will help to assess the feasibility of wider OSA and SBD studies using the OPCRD and will explore the implications of a diagnosis of SBD (and CPAP) on clinical and health economic outcomes in OLD patients managed in routine care. A protocol has now been submitted to the Anonymised Data Ethics and Protocol Transparency Committee to approve an OPCRD dataset for the work.

Other ideas discussed included and evaluation of the effectiveness of tele-monitoring in OSA and optimum approaches to data visualization and processing of the 24-hour monitoring data generated by modern CPAP machines.

Small Airways Study Group and Child Health Working Group

A combined meeting of the Small Airways Study Group (SASG) and the Child Health Working Group focussed on the preliminary findings of results of a pre-school asthma/wheeze study involving small particle ICS. Upcoming SASG publications and future research ideas were also discussed.

Publications: Reviewer comments from an article on standard nomenclature were discussed and actions agreed. The article proposes a standardised terminology for drug particle size to align future publications in light of the barriers to evidence synthesis caused by the current wide range of terms used within the literature. A second SASG paper—reporting the findings of the group's systematic review of the ICS particle size literature from 2004-2015—was also discussed and approved for journal submission. The systematic review examined 13 ICS particle size papers, seven of which were subsequently included in a meta-analysis to evaluate the overall impact on database asthma control and exacerbation outcomes.

Research: the pre-school asthma/wheeze study compared the effectiveness of extra-fine particle ICS to standard particle ICS and also ICS vs SABA, LTRA (and SABA vs LTRA) in children aged <5 years. The study design mirrors that of similar SASG studies in older patient groups, but found limited benefit of any of the pharmacological therapies considered in this younger patient group. The interesting results are now at the manuscript preparation stage and will be submitted early in the new year.

Future research ideas touched on included the potential role of extra-fine ICS in patients with ACOS and thos with comorbid asthma +/- GERD +/- obesity.

Other areas of potential research discussed include consideration of how drug formulation

Working Group Updates

and delivery modulate deposition in the small airways as a complementary line of enquiry to the role of particle size alone.

Ronald Dandurand concluded the meeting with a brief introduction to his study on Forced Oscillation Technique (FOT). The study considers whether oscillometry might offer complementary (if not beneficial) lung function data to spirometry, particularly with respect to evaluating the degree of small airway involvement as it can localise the site of airflow limitation to the small or large airways. FOT uptake in practice has been limited by a lack of familiarity with the technique and a lack of harmonisation in the literature.

IPF / ILD Working Group

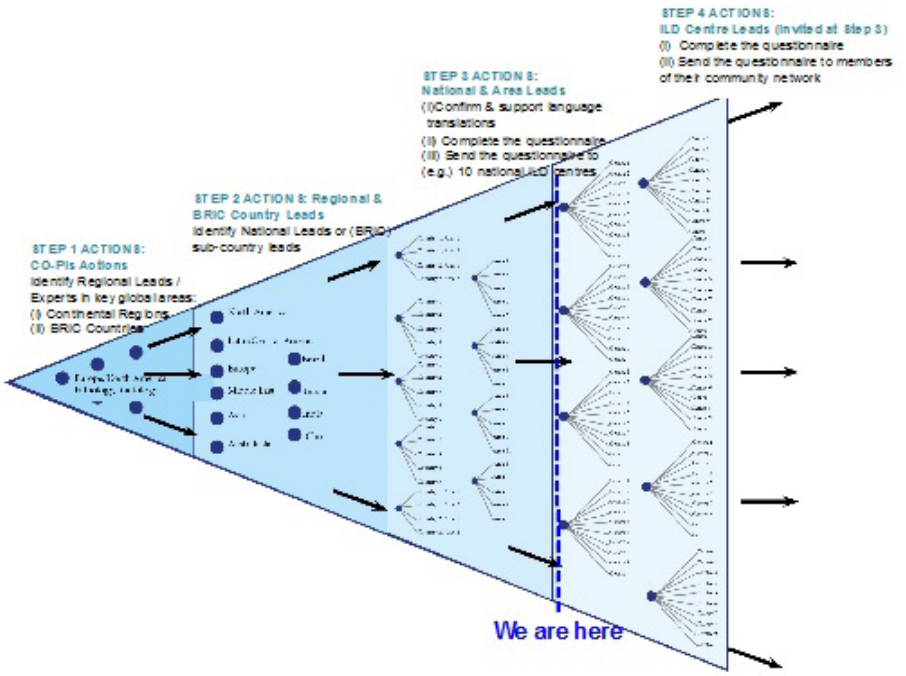
Two studies were discussed at the IPF/ILD Working Group meeting held at the ERS – the group's: (i) Global Characterisation of ILD Diagnostic Practice and (ii) Database study exploring potential missed diagnostic opportunities in IPF.

Working Group Lead, Luca Richeldi, provided an update on the Global Characterisation of ILD Diagnostic Practice study and explained the proposed method of cascade approach to centre recruitment. The study, designed to characterise (and capture the degree of variation) in current ILD diagnostic practice around the world will be followed by a diagnostic agreement study that will explore the implications of practice variation on agreement and accuracy of IPF diagnosis between centres – something that is increasingly important in the new age of efficacious IPF therapies. The working group proposed the IPF diagnostic agreement study at their first meeting at the ATS in 2015, but later agreed that to design a meaningful agreement study, more information is required on the realities of how ILD is diagnosed in everyday routine care both within and outside the known specialist centres. To characterise current practice, an electronic questionnaire has been developed to for completion by clinicians involved in ILD diagnosis at any centre around the world where ILD is diagnosed. The questionnaire was reviewed by the working group at the time of the 2016 ATS and has IRB approval from the University of Southampton, UK.

Since the time of the ERS meeting, the REG team have been working with national leads round the world to translate the questionnaire and identify diagnostic centres to invite to participate within their respective countries. Those centres will, in turn, be invited to recommend colleagues in their own network who can also be invited to take part so that a range of specialist and non-specialist centre will be involved and provide an insight into the true variation in practice around the world. Initial participation invitations were setn out in late October and over 130 centres have now participated across 30 countries and all global regions. Data collection will continue into Q1 2017. The planned agreement study will follow later in 2017.

The primary objective of the second study discussed – a database study using the UK OPCRD—was to identify possible missed diagnostic opportunities for IPF in the years preceding an IPF diagnosis with a view to identifying red flags and opportunities for earlier intervention. A secondary objective of the to is to explore similarities and differences in clinical presentation of IPF for patients carrying very specific IPF diagnostic codes and those assigned broader ILD codes within the database. Results from the study are currently being finalised and a paper will shortly be developed for publication.

An additional database study, a 100-patient pilot, is also underway to evaluate differential decline in lung function decline in patients assigned very specific IPF diagnostic codes and those with broader fibrotic lung disease codes. This exploratory work should also be complete by the end of the year.



Global Characterisation of ILD Diagnostic Practice: Study Progress

Biomarkers and Severe Asthma Working Groups

The ERS saw the first meeting of REG's new Severe Asthma Working Group, which was combined (owing to subject and collaborator overlap) with a follow up Biomarkers Working Group meeting. A lot of ground was covered during the joint meeting and a number of exciting projects were discussed.

From a biomarkers' perspective, the group are still working on a commentary illustrating the conflicting recommendations on FeNO use from GINA and NICE reflecting differences in the range of evidence reviewed by the two groups and the importance of including real-life evidence in addition to RCT data when considering implications for clinical practice. The group also agreed that there remain a number of important research questions relating to the optimum use of FeNO in routine clinical practice and that new funding avenues need to be sought to address these needs.

From a severe asthma perspective, REG was felt to be an ideal network to drive forward a collaborative approach to development of a Global Severe Asthma Registry. There have been a number of recent calls for the creation of robust disease registries with a view to characterising the natural history of asthma, identifying likely responders to therapy and developing algorithms for more efficient use of healthcare resource such as appropriate referral to severe asthma services and optimal therapeutic management. Initiate a project in this area by REG was therefore felt to be timely and would align well with REG's goal of standardisation of global efforts and focus on quality standards for real-life data collection and analysis.

A parallel stream of work exploring features of exacerbators (as a specific subgroup of the broader population of patients with severe asthma) was also proposed, perhaps as a joint taskforce.

REG was represented at the ERS 2016 Congress with a Thematic Poster Presentation on 4th September

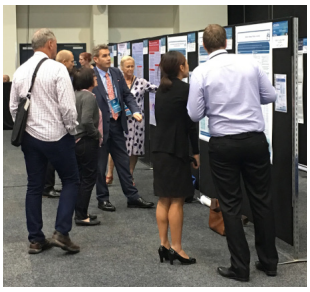
Ref. 1127: Validation of the COPD Control Concept: A UK Pilot.

ASCIA 2016

The REG Allergy Working Group presented three posters at the *27th Annual Conference of the Australasian Society of Clinical Immunology and Allergy*, which took place in Queensland from 14-17 September.

All the abstracts from the conference have been published online in the Internal Medicine Journal (IMJ): http://onlinelibrary.wiley.com/doi/10.1111/imj.2016.46.issue-S4/issuetoc and represent the first outputs for the Allergy Working Group. The high quality of the work led by Pete Smith and positive response at the conference both suggest more work will be published by the group in the near future.

Poster 55: Burden of Allergic Rhinitis in Australia
Poster 56: Impact of Allergic Rhinitic on Health-Related Quality of Life - Results from an Australasian Survey
Poster 57: Treatment Preferences in Australasian Patients with Allergic Rhinitis - A Discrete Choice Experiment.



Abstracts submitted and published by the REG Allergy Working Group

Internal Medicine Journal: Special Issue: Australasian Society of Clinical Immunology and Allergy (ASCIA) 27th Annual Conference

Smith, P., Hellings, P., Scadding, G., Harvey, R., Carney, S., Price, D., Ryan, D., Bosnich-Anticevich, S., Murray, R., Gallop, K. and Acaster, S. (2016), ASCIA-P56: *Burden of Allergic Rhinitis in Australia*. Intern Med J, 46: 22. doi:10.1111/imj.56_13197

Smith, P., Hellings, P., Scadding, G., Harvey, R., Carney, S., Price, D., Ryan, D., Bosnich-Anticevich, S., Murray, R., Gallop, K. and Acaster, S. (2016), ASCIA-P57: *Impact of Allergic Rhinitis on Health Related Quality of Life: Results from an Australian Survey*. Intern Med J, 46: 22. doi:10.1111/imj.57_13197

Smith, P., Hellings, P., Scadding, G., Harvey, R., Carney, S., Price, D., Ryan, D., Bosnich-Anticevich, S., Murray, R., Gallop, K., Ali, S. and Acaster, S. (2016), ASCIA-P58: *Treatment Preferences in Australian Patients with Allergic Rhinitis: A Discrete Choice Experiment*. Intern Med J, 46: 22–23. doi:10.1111/imj.58_13197

REG was represented at the 37th Brazilian Thoracic Congress in October 2016: PLENARY: Impact of Age and Gender on Therapeutic Response to Asthma PRO/CON DEBATE: Management of Asthma in Clinical Practice

Members of the Adherence Working Group met in Lisbon at the 20th annual meeting of the European Society of Patient Adherence, COMpliance and Persistance.

REG was well represented at the meeting, with several REG Collaborators delivering sessions and contributing to the event:

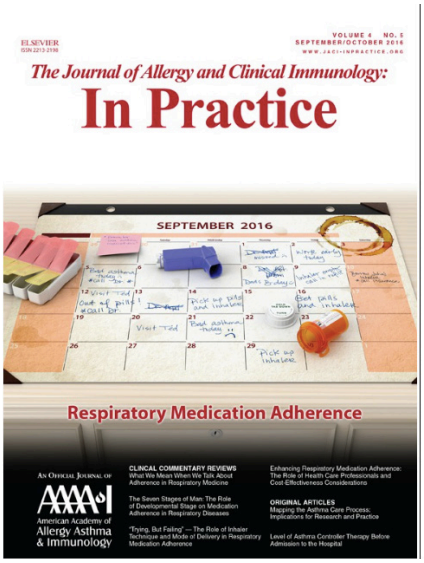
- Bernard Vrijens delivered the John Urquhart Memorial Lecture on *From Science to Practice*; he also presented a literature review with REG Collaborator Juliet Foster and moderated the Industry Round Table at the event.
- Juliet Foster also delivered a talk at the event entitled *Adherence barriers and facilitators in patients with severe asthma: a qualitative study*
- Former and current Adherence Working Group leads Eric van Ganse and Alex Dima were also part of a group moderating the poster session at the event.

Respiratory Conferences 2017

March 2017		
2017 REG Summit	London, UK	31 March - 1 April
May 2017		
ATS Conference	Washington, USA	19 - 24 May
June 2017		
EAACI Congress	Helsinki, Finland	17 - 21 June
BTS Summer Meeting	Birmingham, UK	22 - 23 June

Publications

JACI: In Practice Special Issue on Respiratory Medication Adherence



A Special Issue of *JACI: In Practice* on Respiratory Medication Adherence is now available. The articles were produced by the Adherence Working Group following the Adherence Panel, which convened during EAACI 2015 in Barcelona. The special issue comprises the following clinical commentary reviews:

- *Respiratory Medication Adherence: Toward a Common Language and a Shared Vision* (Eric Van Ganse, David Price DOI: http://dx.doi.org/10.1016/j. jaip.2016.04.006)
- *Enhancing Respiratory Medication Adherence: The Role of Health Care Professionals and Cost- Effectiveness Considerations* (Job F.M. van Boven, Dermot Ryan, Michelle N. Eakin, Giorgio W. Canonica, Aji Barot, Juliet M. Foster, Respiratory Effectiveness Group. DOI: http://dx.doi.org/10.1016/j.jaip.2016.03.007)
- *What We Mean When We Talk About Adherence in Respiratory Medicine* (Bernard Vrijens, Alexandra L. Dima, Eric Van Ganse, Job F.M. van Boven, Michelle N. Eakin, Juliet M. Foster, Marijn de Bruin, Alison Chisholm, David Price. DOI: http://dx.doi.org/10.1016/j.jaip.2016.05.019)
- *"Trying, But Failing" — The Role of Inhaler Technique and Mode of Delivery in Respiratory Medication Adherence* (Fulvio Braido, Henry Chrystyn, Ilaria Baiardini, Sinthia Bosnic-Anticevich, Thys van der Molen, Ronald J. Dandurand, Alison Chisholm, Victoria Carter, David Price, Respiratory Effectiveness Group. DOI: http://dx.doi.org/10.1016/j.jaip.2016.03.002)
- *The Seven Stages of Man: The Role of Developmental Stage on Medication Adherence in Respiratory Diseases* (Richard W. Costello, Juliet M. Foster, Jonathan Grigg, Michelle N. Eakin, Walter Canonica, Fasail Yunus, Dermot Ryan, Respiratory Effectiveness Group DOI: http://dx.doi.org/10.1016/j.jaip.2016.04.002)

We would like to congratulate the Adherence Working Group on a brilliant special issue and thank them for all their hard work in bringing this to fruition.

Publications from REG Collaborators

Incidence of oral thrush in patients with COPD prescribed inhaled corticosteroids: Effect of drug, dose, and device P.N. Richard Dekhuijzen, Maria Batsiou, Leif Bjermer, Sinthia Bosnic-Anticevich, Henry Chrystyn, Alberto Papi, Roberto Rodríguez-Roisin, Monica Fletcher, Lucy Wood, Alessandra Cifra, Joan B. Soriano, David B. Price Respiratory Medicine DOI: http://dx.doi.org/10.1016/j.rmed.2016.09.015

Metabolic Effects Associated with ICS in Patients with COPD and Comorbid Type 2 Diabetes: A Historical Matched Cohort Study David B. Price, Richard Russell, Rafael Mares, Anne Burden, Derek Skinner, Helga Mikkelsen, Cherlyn Ding, Richard Brice, Niels H. Chavannes, Janwillem W. H. Kocks, Jeffrey W. Stephens, John Haughney PLOS One http://dx.doi.org/10.1371/journal.pone.0162903

Eligibility of real-life patients with COPD for inclusion in trials of inhaled long-acting bronchodilator therapy David M. G. Halpin, Marjan Kerkhof, Joan B. Soriano, Helga Mikkelsen and David B. Price Respiratory Research 201617:120 DOI: 10.1186/s12931-016-0433-5

Inappropriate asthma therapy-a tale of two countries: a parallel population-based cohort study.

Belhassen M, Nibber A, Van Ganse E, Ryan D, Langlois C, Appiagyei F, Skinner D, Laforest L, Soriano JB, Price D. NPJ Prim Care Respir Med. 2016 Oct 13;26:16076. doi: 10.1038/npjpcrm.2016.76.

Commentary in *Lancet Respiratory Medicine*

A commentary produced by REG's Prof. David Price and CSO Alison Chisholm in collaboration with Chris WInchester from Oxford Pharmagenesis has been published in *Lancet Respiratory Medicine*.

The article, *A practical tool for primary care antimicrobial stewardship in children* (Lancet Respir Med 2016; doi:10.1016/S2213-2600(16)30272-7) was written in response to the paper from Hay et al in the same issue entitled *The development and internal validation of a clinical rule to improve antibiotic use in children presenting to primary care with acute respiratory tract infection and cough: a prognostic cohort study* (Lancet Respir Med 2016; doi:10.1016/S2213-2600(16)30223-5.)

The commentary asserts that there are few efficacious interventions for respiratory tract infection available to primary care clinicians beyond offering reassurance and self-management advice, so the modest benefit offered by antibiotics can persuade general practitioners to prescribe them. Discussing the tool, the authors stated:

"STARWAVe offers primary care clinicians an evidence-based practical tool to help guide antibiotic prescribing decisions and, through shared decision-making, has the potential to reduce prescribing based on prognostic uncertainty or on non-medical grounds."

You can view a short video of Chris Winchester discussing the article on YouTube or at:
www.pharmagenesis.com/news

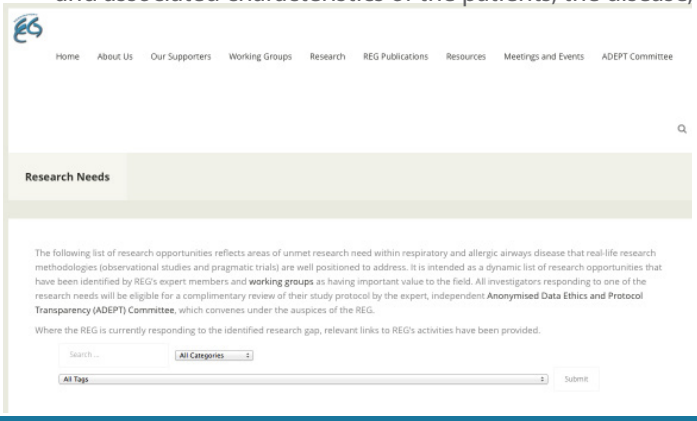
Research Update

REG Research Needs and 2016 Research Review

As part of their role on the Executive Committee, research leads Nicolas Roche and Sinthia Bosnic-Anticevich have been working with REG CSO Alison Chisholm on the development of clear research needs to provide a focus for the future work of REG. These needs, divided into those relating to clinical practice and to advocacy and quality standards, provide the organisation with clear objectives which will allow REG to achieve the strategic goals. The research needs have been classified as follows:

Clinical Practice

1. Characterise current routine care disease epidemiology and burden for respiratory, allergic and obstructive airways disease outcomes
2. Characterise current routine care prescribing practives (diagnostic and management) and their implications for respiratory and allergic airways disease outcomes
3. Utilise routinely collected data to describe disease characteristics associated with future risk in respiratory and allergic airways disease
4. Assess the real-world safety profile of licensed pharmacological interventions for / as used in patients with respiratory and allergic airway diseases, and associated characteristics of the patients, the disease, the ecology of care
5. Evaluate the comparative effectiveness of treatments (guideline-recommended / not recommended but frequently used) in respiratory and allergic airways disease, and associated characteristics of the patients, the disease, the ecology of care
6. Understand the role of maintenance inhaled therapy particle size on outcomes in respiratory and allergic airways disease
7. Improve understanding of medication adherence behaviours (including inhaler device challenges) in respiratory and allergic airways disease, their implications on clinical and health economic outcomes and optimised management options
8. Understand the clinical and cost implications of comorbidities (and their treatments) in patients with respiratory and allergic airway diseases.



Advocacy and Quality Standards

9. Provide methodological support for high quality real-world research
10. Define, refine and validate clinical tools for the real-world management of respiratory and allergic airways disease
11. Define, refine and validate tools (e.g. databases, indicators) for real-world research on respiratory and allergic airways disease
12. Guide the development of technology-based solutions (TBS) with clinical utility for respiratory and allergic airway diseases.

All projects currently within the REG portfolio have been classified according to these research needs and the categories will be used as a means to assess proposed projects as one aspect of the Research Review.

The creation of these research needs has also allowed for the organisation to bring a "research match-making" search engine to fruition within the site. The new search functionality allows visitors to the site to search for projects according to specific research needs and also look at projects which have been completed, are in progress or are planned for the future. The aim is to provide a resource for PhD researchers to find ideas and contacts for projects which have been identified by the REG network as a requirement within the field of real-world respiratory research. You can view the new Research Needs page on the website at: www.effectivenessevaluation.org/research-2/research-needs.

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