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| **Asthma in young adults: A single center retrospective study** |
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| **Introduction/Aim:**  Asthma is the commonest chronic condition in adolescents and young adults affecting 11% of this age group. National AIHW statistics show 15–24-year-olds are more than 50% more likely than older adults to attend the emergency department for asthma. A survey of 12-24-year-olds revealed 63% had poor control, 90% experienced breathlessness and 42% missed school or work.  Key drivers of poor outcomes in this group for other diseases are suboptimal transition from paediatric to adult services, and limited concordance with appointments and medications. As information on this aspect of care for asthma in Australia are lacking, we set out to review data on young people attending a specialist asthma clinic.  **Methods:**  **Design:** Retrospective study  **Setting:** Specialist public asthma clinic at Perth's Sir Charles Gairdner Hospital,  **Population:** young adults (aged 17-25yrs at first visit)  **Data:** routinely collected clinical information from attendances between 1st January 2020 and 1st June 2023. Data use approved through local health service governance mechanisms.  **Results:**  Information was available on 56 patients. Of these, 56(71.4%) were female. The source of referral was from the GP for 32(57.1%), following ward discharge in 13(23.2%), and only 5 (8.9%) transitioned from paediatric care. Most individuals 30 (53.6%) had experienced emergency hospital attendance. Mean ACQ score at review was 1.35. The prevalence of atopy was high, with the mean IgE being 1375 IU/ml.  25% of individuals did not attend their first appointment. Medication possession ratio (MPR) for their prescribed preventer inhaler averaged 51.7%, with 16 patients (28.6%) having ≥70% of devices required to meet their needs in the last year. Over half of the individuals were suitable for discharge during the follow-up period.  **Conclusion:**  Younger adults with asthma were a small proportion of the total number of people seen in the clinic. They were more likely to be seen following an admission than have been transitioned.  Non-attendance and low medication possession rates were common. These findings are in keeping with those from other conditions and other countries.  This study provides useful information on a relatively neglected population but is limited by its retrospective and single centre design.  Managing asthma in young adults is challenging, but opportunities exist to improve transition and tailor services to this group with substantial potential for improved outcomes.      **Grant Support: None** |