

Adult Asthma and Chronic Obstructive Pulmonary Disease (COPD)

Summary from Joint Strategic Needs Assessment - March 2020

Why is this important?

Respiratory diseases are the third leading cause of death in Lewisham. The combination of higher levels of smoking and concerns over air quality make respiratory illnesses of particular concern in the borough. This JSNA aims to paint a comprehensive picture of adult asthma and COPD in Lewisham and can be used to support decision making that will ultimately lead to improved health and wellbeing in the local population as well as reduced inequalities.

Key Facts and Figures

1,979

deaths in Lewisham were attributable to respiratory diseases in 2017-2018.

Smoking is the single most important risk factor for respiratory diseases.



The impact of smoking related ill health is greater in Lewisham than London and National averages.



People with respiratory diseases are especially vulnerable to the detrimental effects of air pollutants.



Both COPD and asthma appear to be underdiagnosed in Lewisham.



In Lewisham, respiratory mortality and premature mortality, is higher in men than women.



What is happening nationally?

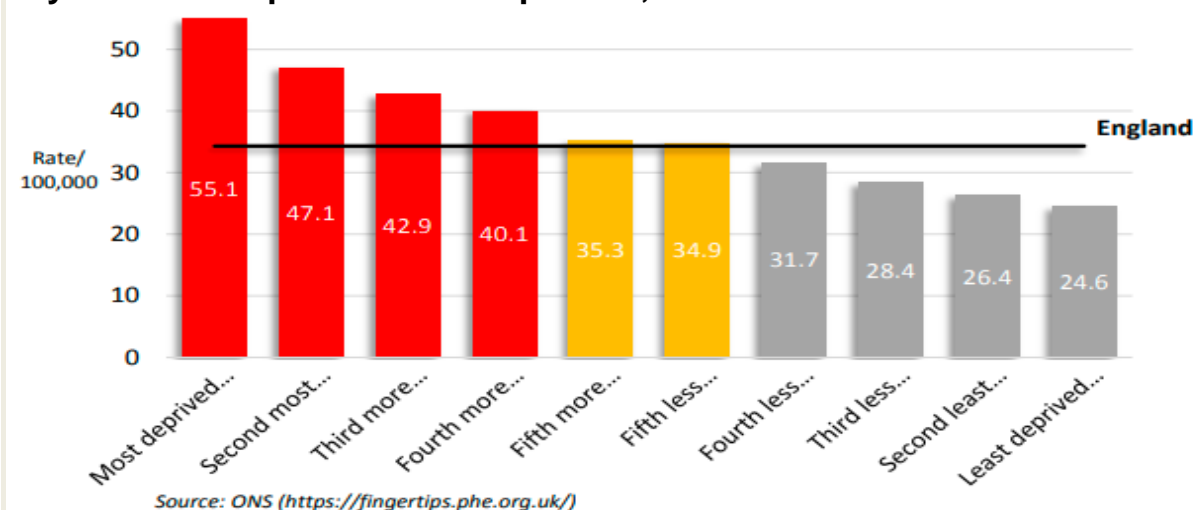
Respiratory disease priority areas from the NHS long-term plan:

- Earlier detection and diagnosis of respiratory disease
- Expand access to pulmonary rehabilitation
- Support those with respiratory disease to receive and use the right medication
- Enable people with heart and lung disease to complete a programme of education and exercise based rehabilitation

What is happening locally?

- Stop smoking service and tobacco control in conjunction with Trading Standards
- One full-time spirometry technician who performs spirometry at UHL and supports spirometry in primary care.
- The Lung Exercise and Education Programme (LEEP) pulmonary rehabilitation programme is offered to patients with respiratory disease
- Respiratory nursing team comprising 1 respiratory nurse consultant and 2 respiratory specialist nurses who perform a range of clinical duties both in the community and the hospital.
- 1 respiratory consultant based at UHL who is the lead specialist on asthma & COPD.

Premature mortality from respiratory disease in England (2015-2017) by decile of deprivation. Rate per 100,000



Premature mortality from respiratory disease is closely correlated with deprivation.

What needs to be done?

PREVENTION: Continue to invest in stop smoking services and to encourage more Lewisham residents to quit smoking.

EARLY AND ACCURATE DIAGNOSIS: Identify and diagnose new cases of COPD and asthma in primary care. Ensure active case finding is effective in closing the gap between recorded and expected prevalence. Ensure there is adequate access to spirometry in Lewisham to support early diagnosis of COPD.

PULMONARY REHABILITATION: Commission sufficient pulmonary rehabilitation services to meet local need. Promote the LEEP service and increase referrals into the service from all GPs across the borough.