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TP Thematic Poster Session : Methodological aspects of asthma and COPD epidemiology

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Recommended and priority indicators for monitoring COPD and asthma in the European union: results from the IMCA I project

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Introduction: European nations lack a standardised system to compare the burden of chronic respiratory diseases (CRD) and to evaluate the impact of preventive strategies and clinical management on health outcomes. **Objective:** To agree a set of indicators to monitor major CRD in the EU suitable for inclusion in the DG SANCO European Community Health Indicators Project. **Methods:** For asthma and COPD a panel of specialist in respiratory medicine, public health and epidemiology constructed a list of indicators according to the DG SANCO ECHI Group Framework. Following a literature review this list was modified into four main groups: a) demography and socio-economic, b) health status, c) determinants of health and d) health systems. For each indicator, the rationale, aims, possible data sources, data quality, methods to be used for data collection, data presentation, potential use, consistency at international level and priority was evaluated. Indicators were then prioritised. **Results:** A total of 262 indicators were proposed for COPD and asthma. The top 4 indicators for COPD were: prevalence of physician diagnosed COPD, prevalence of smoking, hospital admissions and age-specific death rate. For asthma they were: prevalence of physician diagnosed asthma, prevalence of wheeze, prevalence of asthma attacks and hospital admission rates. For many nations in the EU this information is still not readily available.

See details at www.imca.cat.

Conclusions: Across the EU, routine health information systems and nationally based health examination surveys should aim to obtain data to generate these indicators.

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