



## Autumn 2020 WORKING GROUP MEETING MINUTES: Child Health

Meeting details	
Meeting location	Teleconference
Meeting date	Mon 26 <sup>th</sup> Oct
Meeting time	16:00-17:00 GMT
Chair(s)	Steve Turner
Attendees	Nemr Eid Alan Kaplan Clare Murray Sarah Lucas
Objectives	
1	Update on current projects
2	New ideas- Possible COVID-19 project

Items	
<b>Update on current projects</b>	<p><b>Evaluation the comparative effectiveness of adding antibiotics to usual care (oral steroids) for the management of asthma exacerbations</b></p> <p>Manuscript was submitted to ERJ. Major revisions have been completed and manuscript resubmitted. The journal have now asked for a few further minor revisions.</p>
	<p><b>Paediatric Asthma in Real Life (PeARL)</b></p> <p>Thanks to Alex and Nikos for their work on the 2 papers which have now been published in JACI in Practice.</p> <p>A.G. Mathioudakis, A. Custovic, A. Deschildre, F.M. Ducharme, O. Kalaayci, C. Murray, et al. Research priorities in pediatric asthma: results of a global survey of multiple stakeholder groups by the Pediatric Asthma in Real Life (PeARL) think tank. J Allergy Clin Immunol Pract, 2020, 8;1953-1960.</p> <p>Papadopoulos NG, Custovic A, Deschildre A, et al. Impact of COVID-19 on pediatric asthma: practice adjustments and disease burden. J Allergy Clin Immunol Pract. 2020, 8;2592-2599.</p>



### ICS Step Down

Idea was to look at outcomes in children with asthma who stop ICS, have a reduction in ICS dose, or switch from regular ICS to as required ICS.

A CPRD dataset for another project did include the data to do this analysis too, but due to regulations/permissions it is not possible to use that data for this further study.

Currently looking into potentially using the French (SNDS) data for this.

In the French data we can only look at ICS cessation, there is no information on dose or PRN, so we wouldn't be able to do the dose reduction or step down to as required ICS/SABA groups.

It was mentioned that it would be good to look at dose reduction as there is a focus on moving from high dose to lower dose ICS/LABA.

AZ and Chiesi interested in regular ICS to PRN ICS/SABA  
AZ trialing combination ICS/SABA and looking to license in North America.  
Proposal has been sent to AZ, but no response.

There was a feeling that PRN ICS/SABA should be targeted at tapering off patients on ICS, rather than those on regular ICS stopping completely.

**ACTION POINT:** Sarah/Michael to follow up with AZ, send proposal to Chiesi.

We should consider including adult patients as well as children in this study, to ensure we have people involved with expertise in adult asthmatics we could work with another working group on a join project, potential Adherence WG.

**ACTION POINT:** Steve to contact Sinthia regarding a collaborative project with the Adherence WG

Clare raised the issue that with ICS cessation how do we know that they have really stopped and not just become less adherent. We could consider patients being required to remain off ICS longer term, but this introduces immortal time bias, as those who don't manage to stay off ICS long term will be excluded. We should perhaps be looking for evidence of exacerbations prior to patients restarting ICS.

**ACTION POINT:** Sarah to contact Manon to get a quote for using the French data

Maybe there is a longer term project to look at what happens when PRN fixed dose ICS/SABA comes into use.



<p><b>New project ideas</b></p>	<p><b>Discussion of ideas for a paediatric COVID-19 project.</b></p> <p>Possible idea proposed by Steve- Outcomes in COVID+ and COVID- patients in primary care with and without pre-existing respiratory illness. Most work currently based on hospital data. Hypothesis: outcomes become different as individuals become older, the difference is less obvious than reported (due to false negative cases and also a larger denominator), but those with pre-existing respiratory illness have worse outcomes.</p> <p>Consider adherence to ICS/LABA, has this increased during COVID-19 pandemic and do OCS prescriptions decrease in the same time period due to less exacerbations.</p> <p>How does a potential increase in adherence in asthmatic influence COVID-19 outcomes? A decrease in exacerbations might be due to increase adherence but also be due to a decrease in the transmission of other viruses and decrease in pollution as a result of lockdown.</p> <p>In Italy there was a survey of allergists that found no worsening of asthma in children with COVID-19 and asthma was not a risk factor for severe COVID-19.</p> <p>Possibly look at Medication Possession Ratio (MPR) over time as a measure of adherence behaviour and do a time series looking as lockdown restrictions/ media messages change and with school returning.</p> <p>Look at March 2020 to Sept 2020 and then Sept 2020 to March 2021. We could then compare these time periods with the equivalent time period in the previous year (March 2019 to March 2020).</p> <p>Are there any differences in exacerbation rates during these different time periods? And is exacerbation rate lower during COVID-19 compared to before?</p> <p>Presumably during COVID-19 other viruses (rhinoviruses) decreased during lockdown and these many have increased again following the end of lockdown, schools returning and less social distancing and this may influence asthma exacerbation rate.</p> <p>We could perhaps look to see if the same pattern is seen in say the UK and French databases for example.</p> <p>COVID-19 does not appear to be dangerous to children but there is potentially a risk of asymptomatic transmission to older adults. It seems however that it is secondary aged children (12+ yrs) in households who are a risk for passing on COVID. Primary aged children do not seem to be a big risk for transmission and also don't appear to be particularly affected.</p>
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	<p>Adherence WG are planning a project looking whether regular ICS use is protective for severe COVID-19. So, there may be the possibility to again collaborate on a project.</p> <p>ACTION POINT: Steve to speak with Sinthia as there may be the opportunity to work together on developing and COVID-19 project.</p>
<b>AOB</b>	<p>Next working group meeting to be held in March around the time of the REG summit (18<sup>th</sup>-20<sup>th</sup>), via teleconference.</p>