

FAST

PARTICIPANTS NEWSLETTER - RESULTS EDITION

The **FAST** study involved over 1900 adults with asthma from all around the UK. We have now finished analysing the data and are delighted to share the results with you.

Thank you for taking part in this important study

Why was a trial needed?

Asthma is one of the most common long-term diseases worldwide with around 300 million people affected. Acute asthma attacks are frightening and can considerably impact on quality of life. Sometimes these require treatment with oral steroid tablets which are unpopular as they can cause severe side effects.

It is known that the use of asthma self-management plans can improve asthma control. Previously patients were advised to double the dose of their inhaled steroid when their symptoms began to worsen but a previous study found that this was not effective.



ZONE 1	ZONE 2	ZONE 3	ZONE 4
<p>How asthma is often treated</p> <p>1. The controller medicine (usually inhaled corticosteroids) is used every day to prevent symptoms and attacks.</p> <p>2. The reliever medicine (usually inhaled beta2 agonists) is used to relieve symptoms.</p> <p>3. The reliever medicine is used as often as needed.</p> <p>4. The reliever medicine is used to prevent symptoms and attacks.</p>	<p>How asthma is often treated</p> <p>1. The controller medicine (usually inhaled corticosteroids) is used every day to prevent symptoms and attacks.</p> <p>2. The reliever medicine (usually inhaled beta2 agonists) is used to relieve symptoms.</p> <p>3. The reliever medicine is used as often as needed.</p> <p>4. The reliever medicine is used to prevent symptoms and attacks.</p>	<p>How asthma is often treated</p> <p>1. The controller medicine (usually inhaled corticosteroids) is used every day to prevent symptoms and attacks.</p> <p>2. The reliever medicine (usually inhaled beta2 agonists) is used to relieve symptoms.</p> <p>3. The reliever medicine is used as often as needed.</p> <p>4. The reliever medicine is used to prevent symptoms and attacks.</p>	<p>How asthma is often treated</p> <p>1. The controller medicine (usually inhaled corticosteroids) is used every day to prevent symptoms and attacks.</p> <p>2. The reliever medicine (usually inhaled beta2 agonists) is used to relieve symptoms.</p> <p>3. The reliever medicine is used as often as needed.</p> <p>4. The reliever medicine is used to prevent symptoms and attacks.</p>
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FAST Modified Management Plan

The FAST trial was designed by doctors and researchers around the UK, in collaboration with Asthma UK. We wanted to test whether a self-management plan advising patients to temporarily quadruple the use of their steroid inhaler when asthma symptoms start to worsen would be better at preventing asthma attacks.

What did the results show?

1922 people with asthma were entered into the trial and randomly allocated to one of two self-management plans, 957 were advised to temporarily quadruple the dose of their steroid inhaler during an asthma attack and the remaining participants were asked to follow current NHS guidance.

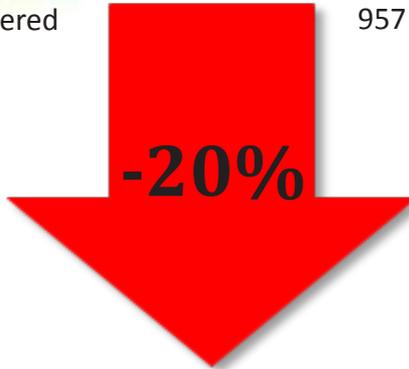
Of the 957 quadrupling participants, 562 experienced worsening asthma symptoms. The participants who quadrupled their inhaled steroid dose saw a reduction in asthma attacks by about 20% compared to the usual care group.



1922 people entered the trial

x4

957 people quadrupled their inhalers



People who quadrupled their steroids had a 20% reduction in asthma attacks during the trial

Overall, the trial shows that a temporarily increasing your inhaled steroid dose at the point where asthma symptoms worsen reduced asthma attacks in participants. The quadrupling also reduced reported emergency GP/hospital visits and reduced the number of steroid tablets prescribed per participant and overall was better value for money.



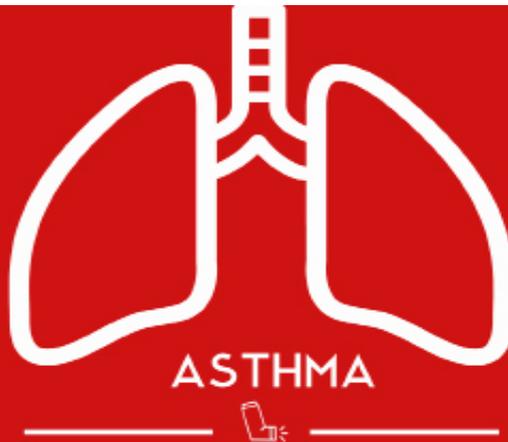
What will happen to the results now?

Although the trial has ended and we know the results, we haven't finished working on the FAST trial yet. The next step is to make sure information about the findings reaches the people it can help.

We've published the results of the FAST trial in medical journals and have presented the research at several conferences around the UK. We are currently working with our networks and undertaking other activities to ensure the findings are widely distributed.

The results of this study will provide evidence to help policy makers, doctors, other healthcare professionals and patients make better informed decisions when it comes to the use of asthma self-management plans and overall asthma control.

Please feel free to share the results with your doctor, family and friends.



We believe that the results of the trial should be considered by guidelines committees and clinical commissioners. We suggest that the use of asthma self-management plans that advise a temporary quadrupling of steroid inhaler be embedded into routine clinical practice for asthma patients who have experienced an asthma attack in the past year.



Meet the FAST trial team



Tim Harrison
(Chief Investigator)



Beki Haydock
(Trial Manager)



Rich Swinden
(Trial Coordinator)



The trial was funded by the National Institute for Health Research Health Technology Assessment (NIHR HTA) programme which is the research arm of the NHS. The NIHR called on clinicians to look at this crucial question and it was Professor Harrison along with other doctors & researchers around the UK who conducted the trial. The trial would not have been possible with the 11 hospitals and 197 GP surgeries who worked on the trial.

The NIHR commissioned this study as it had been agreed by doctors and patients this was important research.

On behalf of Tim Harrison and the rest of the FAST trial team, we want to express our gratitude to all the patients who took part in the study. Your enthusiasm and dedication to attending visits and completing the diary cards and questionnaires made the trial possible.



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