Corporate Goals

The NAC is the leading authoritative national body for asthma. Its corporate goals are to:

- Maintain asthma on the public and political agenda.
- Play a leading role in advocacy for asthma, collaborating and communicating with stakeholders in order to facilitate change in asthma management to improve health outcomes.
- Provide state-of-the-art evidence-based resources and educational opportunities for health professionals, particularly GPs, pharmacists, asthma educators, practice nurses, allergists, and respiratory, general and paediatric physicians.
- Conduct health promotion activities directed at improving asthma health outcomes.
- Employ staff and engage experts who have the capacity to carry out the NAC’s work.
- Ensure financial viability of the organisation.
- Ensure the NAC holds to corporate governance practices in accordance with the Corporations Act and other relevant legislation.

Vision

A community that recognises the impact of asthma as a social, economic and health issue, whose members share responsibility for the elimination of asthma and minimising the risks of asthma.

Mission

The mission of the NAC is to bring together all forms of endeavour in the field of asthma and associated conditions in order to improve the quality of life and health outcomes of people with asthma and their carers.

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Images

Page 4: National Asthma Council Australia board member Dr Jonathan Burdon (left) and Assoc. Professor Mark Hurwitz, Canberra Hospital, Asthma Australia board member (right).

Page 18: Dr Kerry Hancock, Chair, General Practitioners’ Asthma Group (left) and Mr Marcus Weidinger, Chair, Pharmacists’ Asthma Group (right).
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Chairman’s Message

The National Asthma Council Australia (NAC) has concluded a busy year, and having been the RACGP representative to the NAC for a number of years, I am always pleased with our commitment to providing resources and training for primary care. Since the formation of the NAC, we have worked hard to deliver training to ensure that busy GPs, pharmacists, practice nurses, asthma educators and others are provided with the latest information on the management of asthma. Originally, we had to seize any national opportunities which presented themselves, speaking at major national conferences and meetings. This financial year marked the twelfth year of program funding from the Australian Government of Health and Ageing which has enabled us to develop a significant primary care educational program in all the former Divisions of General Practice and, now, in all the Medicare Locals and Aboriginal Medical Services. Evaluation and review by course participants, presenters and host organisations has been a strong component of this program allowing us to continuously improve our course delivery. Continuing professional development points have been obtained from all the relevant GP, pharmacist, nurse and asthma educator organisations. The evaluation indicates that the workshops bring about practice change.

Our face to face workshops in urban, regional, rural and remote areas, run by our team of over 120 experienced health professional presenters, are structured on small group interactive learning, based on the findings from the adult education literature for effective adult learning. They are promoted on the NAC’s website and through Medicare Local, pharmacy and other communication networks. Rewardingly, we can hardly meet demand.

For me, as Chairman, it is rewarding to see the constant development of other NAC initiatives as well. The website, which was launched in early 1996, has steadily expanded over the years with many visitors and undergone regular updates with the most major one having just occurred. It is now much easier to find one’s way with resources much easier to locate. Website visits increased by over 33% with visitors from over 200 countries. We take great care to have a good selection of patient and health professional resources, and our monthly e-newsletter draws attention to the latest news and developments in asthma as well as those of the NAC. Thanks to funding from the Department of Health and Ageing, we were able to revise our asthma information papers for health professionals and the corresponding consumer brochures on topical issues including Healthy Living, Older Adults, Allergy and Complementary Therapies. All of these new resources are available to view or download from our website and a significant national distribution of these was undertaken as well. In addition, the consumer brochures were translated into Arabic, Chinese, Korean, Vietnamese and Spanish. Translation of any resources is always an interesting dilemma as we do not know which of the ethnic communities in Australia most need information about asthma. If people come from countries with reported low asthma prevalence, we know they may develop asthma here but we do not know how long that may take, the current generation or subsequent ones.

Our major task continues to be the next and seventh edition of the national treatment guidelines for asthma, the Australian Asthma Handbook (formerly the Asthma Management Handbook). The Handbook has been online since 1996 but this time will have its own dedicated website with many state of the art features and the Handbook’s usual focus on being user friendly. During the lifetime of each edition, we collect comments and suggestions which add to the user survey conducted before work starts on any edition. We are all looking forward to the completion of this very large task, which involves five systematic reviews, and a team of over 80 much appreciated honorary contributors.

I must thank the NAC staff team, headed by our CEO Kristine Whorlow, a team which is very hardworking and committed to improving all aspects of asthma management. The Board and I are also very aware of the enormous support we have from so many dedicated health professional volunteers – GPs, pharmacists, practice nurses, asthma educators, respiratory physicians and scientists, allergists and other health professionals who are so willing to add their voluntary efforts to ours, especially at this time when the Handbook is nearing completion. These busy volunteers help us produce our publications, conduct our courses and speak to the media. It is their expertise which is our chief asset along with their unstinting goodwill. Rarely is anyone unable to assist. The success of the National Asthma Council Australia rests on the work of so many dedicated people. We thank them all very much.

Associate Professor Noela Whitby AM
MBBS (Qld), DPD, Grad Dip Hum Nut, FRACGP, FAICD
Since the first meetings of key opinion leaders and the major stakeholder organisations in the late 1980s which led to the formation of the National Asthma Council Australia, then known as the National Asthma Campaign, we have recognised the importance of involving the media in promoting the management of asthma, the focus of our work. One of the first activities of the NAC was the first of a number of evaluated national media campaigns delivering carefully targeted messages on asthma management to people with asthma and their carers. Since that time, we have endeavoured to maintain the profile of asthma in the Australian community with media activities. In the year in review, we were proactive, issuing over a dozen media releases nationally and achieving widespread coverage from the smallest community newspapers to national prime time TV coverage. We celebrated World Asthma Day and National Asthma Week with audio news releases and involved the Australian Government Minister for Health in audio releases about new asthma resources funded by the Department of Health and Ageing. We were also reactive, providing expert spokespeople to the media when comment was sought on any asthma relevant issues. We were sorry to farewell Ms Kelly Ward who had been our Media Advisor for many years as she took on a new role.

We had some additional media involvement with Tonic TV in an episode called “Breathe Easy-Living with Asthma” for which we provided assistance. The episode was very effective with Dr Norman Swan interviewing two people who talked about the ways in which asthma had affected their lives. Professor Matthew Peters provided the expert viewpoint on research, treatment, diagnosis and management.

The NAC played an advisory role to a TV, radio and print campaign on asthma which rolled out nationally in July and August, based on the findings from a survey of over 1000 people with diagnosed asthma between the ages of 18 and 45. This campaign was a good example of public/private stakeholder collaboration and the evaluation indicated some promising results.

We have continued to develop and refresh our website, first launched in 1996, with a new look facelift accompanied by a simplified navigation system to provide easy access. We also added new resources. In addition, we developed our Sensitive Choice website in the interests of consumers and our partners. Our social media activities are steadily increasing, particularly Facebook and Google AdWords.

We were very pleased to launch Asthma Buddy, our first app in Spring 2012, the first free Australian iPhone asthma management app. It makes our evidence-based asthma action plan template interactive and easily available with a direct dial link to 000 and also to our inhaler technique videos. So far there have been 2000 downloads from 22 countries. The Android version is in preparation.

In August, we organised a dinner meeting for the Parliamentary Friends of Asthma which we share with Asthma Australia. It is important to keep parliamentarians and representatives of the Department of Health and Ageing up-to-date with the challenges of and the achievements made in the field of asthma. Emeritus Professor Dick Ruffin was the main speaker for the evening who combined an outline of asthma and Australia’s important contribution to world research on asthma with a very personal account of living with the disease. With the Australian Government election coming up and the changes to Government funding programs we wanted members of parliament and their staff to understand how necessary Government funding is to the national patient and health professional programs.

The NAC’s important work is made possible by program funding from the Australian Government Department of Health and Ageing for our primary care health professional educational workshops around Australia, the pharmaceutical companies in asthma who support a range of activities and resources to improve asthma management and from the partners of our own Sensitive Choice program. We are grateful to these organisations for their support, not only of the NAC, but through us, to the over 2 million people with asthma in Australia and the dedicated health professionals who look after them.

Kristine Whorlow
Chief Executive Officer
Parliamentary Friends of Asthma

Parliamentary Friends of Asthma is a bipartisan group with members from both Houses of Parliament who have an interest in asthma and respiratory health.

The National Asthma Council Australia and Asthma Australia jointly hosted the Parliamentary Friends of Asthma dinner at Parliament House, Canberra, on 21 August 2012.

The evening enabled the Parliamentary Friends plus their fellow Members of Parliament, Senators and staff to come together to find out more about the asthma world – both the problems and the progress. We were pleased to also welcome representatives from the Department of Health and Ageing.

Speakers at the dinner included Emeritus Professor Richard Ruffin, who combined an outline of asthma and Australia’s important contribution to world research on asthma with a very personal account of living with the disease.

Senator Trish Crossin, Co-convenor of the Parliamentary Friends of Asthma Group and Senator Sue Boyce, highlighted that just as many of our elected representatives have asthma as the general community. Senator Crossin led a demonstration of what asthma feels like, asking guests to breathe through a narrow straw to replicate the feeling of breathlessness.
With the upcoming changes to government funding and a looming federal election, the evening was a great opportunity to provide our elected representatives and their staff a clear picture of the potential impact these changes may have on national asthma programs for patients and primary care health professionals.

The dinner was a great success, with many attendees commenting favourably on the event.

Asthma Information Brochure Series

Our updated Consumer and Health Professional Asthma Brochure Series was completed in 2013. Developed with funding from the Australian Government Department of Health and Ageing, the series consists of health professional information papers and corresponding patient brochures on six key topics in asthma.

The topics covered were:
- Asthma & Lung Function Tests
- Asthma & Complementary Therapies
- Asthma & Wheezing in the First Years of Life
- Asthma & Allergy
- Asthma & Older Adults
- Asthma & Healthy Living

An expert panel advised on each topic, including a representative of Asthma Australia to provide the patient perspective. We are grateful for the assistance of all these contributors.

Reflecting the importance of the publications to the asthma community, The Hon. Tanya Plibersek MP, Minister for Health and Ageing, launched three of the sets in March 2013. Asthma & Lung Function Tests, the first in the series, was launched by The Hon. Catherine King MP, Parliamentary Secretary for Health and Ageing, on World Spirometry Day in June 2012. The final two resource sets were launched on World Asthma Day in May 2013.

To help overcome the communications barriers often experienced with patients from non-English speaking backgrounds, the patient brochures were translated into five of the top languages requiring translation in Australia today – Arabic, Chinese, Korean, Spanish and Vietnamese. These 30 publications are available online on our website. A supportive multilingual print flyer was also developed featuring text in all five languages.

An extensive distribution process saw the resource sets and translated flyer mailed to more than 15,000 GPs, pharmacists and general paediatricians across the country, plus members of the Thoracic Society of Australia and New Zealand, the Australasian Society of Clinical Immunology and Allergy, and the Australian Asthma and Respiratory Educators Association. The eight state and territory Asthma Foundations also received copies.

Further distribution of the printed resources is ongoing. All are available online on our website.
Asthma & Wheezing in the First Years of Life

Wheezing is one type of noisy breathing common among babies and preschoolers, but not all wheezing is asthma. This information paper provides an up-to-date summary of the issues around asthma and wheezing in the first years of life. Our guide for parents and those caring for babies and preschoolers explains these differences and gives advice about the best ways to manage asthma and wheezing.

The expert contributors were: Assoc. Prof. Chris Hogan, general practitioner, Assoc. Prof. Mimi Tang, paediatric allergist and immunologist, Adjunct Assoc. Prof. Kingsley Coulthard, pharmacist, Dr Andrew Tai, paediatric respiratory physician, Dr Jo Harrison, paediatric respiratory physician, Ms Tracey Marshall, asthma educator, and Ms Paula Murray, Asthma Australia representative.

Asthma & Complementary Therapies

Use of complementary therapies (also known as complementary and alternative medicine) for asthma is common in the Australian population. The information paper provides an evidence-based summary of the effectiveness of various complementary therapies used by people with asthma. The patient brochure outlines the safety and efficacy of these complementary therapies for those living with asthma.

The expert contributors were: Adjunct Prof. Raymond Mullins, clinical immunology and allergy physician, Assoc. Prof. Hubertus Jersmann, respiratory and sleep physician, Assoc. Prof. Treasure McGuire, pharmacist, Dr Jonathan Burdon, respiratory physician, Dr Vicki Kotsirilos, general practitioner, Dr Lisa Wood, nutritional biochemist, Ms Adrienne James, asthma educator, and Ms Paula Murray, Asthma Australia representative.

Asthma & Allergy

Think asthma, think allergy. This information paper looks at the relationship between asthma and allergy, focussing on allergy triggers and patterns, diagnosis and testing, allergy avoidance, and specific allergen immunotherapy. The patient brochure is a guide to management and treatment options for those living with asthma and allergies.

The expert contributors were: Prof. Frank Thien, allergist and respiratory physician, Assoc. Prof. Mimi Tang, paediatric allergist and immunologist, Assoc. Prof. Sheryl van Nunen, allergist and immunologist, Dr Jenny Gowan, pharmacist, Dr Marnie Robinson, paediatric allergist, Dr Victoria Smith, general practitioner, Dr Ron Tomlins, general practitioner, Ms Naomi Fenton, nurse practitioner, and Ms Paula Murray, Asthma Australia representative.

Asthma & Lung Function Tests

The Asthma & Lung Function Tests information paper provides an up-to-date summary of lung function testing for asthma, including practical advice on how to perform spirometry accurately and effectively, and when peak flow should be considered. The patient brochure A guide to breathing tests for asthma explains what to expect from a spirometry test and how to perform peak flow.

The expert contributors were: Assoc. Prof. David P. Johns, respiratory scientist (chair), Assoc. Prof. Debbie Burton, respiratory scientist, Ms Marg Gordon, asthma educator, Dr Stephen Rudolphy, general practitioner, Prof. John Upham, respiratory physician, and Ms Paula Murray, Asthma Australia representative.

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Asthma & Older Adults

The Asthma & the Over 65s information paper outlines the importance of considering the possibility of adult-onset asthma in people aged 65 years and over with dyspnoea, wheeze or cough, even if they have no previous diagnosis of asthma. The patient brochure Asthma & Older Adults highlights that older adults can have asthma too and that it is important to mention breathing problems to your doctor, because undiagnosed asthma is risky, or the problem could be something else.

The expert contributors were: Assoc. Prof. Hubertus Jersmann, respiratory and sleep physician, Adjunct Assoc. Prof. Kingsley Coulthard, pharmacist, Dr Vanessa McDonald, respiratory clinical nurse consultant, Dr Christopher Worsnop, respiratory physician, Dr Alan Wright, general practitioner, Ms Karalyn Huxhagen, pharmacist, Ms Judy Murrels, asthma educator and Ms Paula Murray, Asthma Australia representative.

Asthma & Healthy Living

This information paper provides an overview of special considerations for patients with asthma when implementing routine health promotion and preventive healthcare activities in primary care, as recommended in national guidelines. The patient brochure provides a guide to healthy habits and lifestyle choices for people with asthma. The key topics include: the dangers of smoking when you have asthma, healthy eating habits, effective asthma management in pregnancy, and the positive impact exercise can have on your asthma.

The expert contributors were: Assoc. Prof. Shane Brun, general practitioner and sports doctor, Assoc. Prof. Ian Charlton, general practitioner, Dr Linda Schachter, respiratory and sleep physician, Dr Lisa Wood, nutritional biochemist, Ms Adrienne James, asthma educator, Mr Harry Katsaras, pharmacist, and Ms Paula Murray, Asthma Australia representative.

Asthma & Respiratory Education Program

Our GP and Allied Health Professional Asthma & Respiratory Education Program (GPAHPAREP) provides education and training for primary healthcare practitioners to increase best-practice management of asthma and linked chronic respiratory conditions. The latest 4-year iteration of the Program came to an end in June 2013, alongside other activities under the Australian Government’s Asthma Management Program, funded by the Department of Health and Ageing for 2009–2013.

Building on many years of success, the completed iteration of workshops has seen a total of 4,580 participants attend workshops. This includes nearly 3,000 practice nurses and more than 600 GPs receiving this valuable training. Increasing numbers of pharmacists and Aboriginal health workers have correlated with the development of the role-specific workshops. More than 300 workshops were delivered nationally during the 4-year program.

A priority of this program was to have over 50% of the workshops held in rural and remote areas. This target was exceeded with 180 workshops held in rural and remote areas equating to 59% conducted in the rural and remote setting.

More than 120 expert presenters were involved in developing and presenting our workshops. We thank them all for their ongoing enthusiasm and support.

Promotion and implementation of these educational activities has continued via an ongoing relationship with Medicare Locals and other primary health care organisations.

Part of this ongoing relationship with Medicare Locals included visits to these organisations throughout the country beginning in late 2012. These visits will continue as they positively reinforce the productive relationship we have with this group which allows us to provide education to health professionals.

Workshop types

Our key GPAHPAREP activities follow our successful and well-established A-Team model. We offered six workshop types, delivered via our unique and effective model that provides both national consistency and local flexibility. The adaptability allows for a range of different approaches depending on the target audience. Over the term of the program this flexibility has also enabled the development of programs relevant to specific primary care health professionals.

These are face-to-face workshops run by our team of experienced health professional presenters using standardised material adapted for local needs.

- Primary Care Asthma Update [A-Team®] (2hrs) – best-practice essentials for the whole primary care team
- Asthma & Respiratory Management Seminar for Practice Nurses (6hrs) – role-specific education for practice nurses
- Spirometry Training Course (6hrs) – comprehensive, hands-on spirometry training for GPs and practice nurses
- Spirometry Training Update (2.5hrs) – refresher training for GPs and practice nurses who have previously undertaken formal spirometry training
- Asthma Update for Aboriginal Health Workers (3hrs) – role-specific education for Aboriginal and Torres Strait Islander health workers
- Asthma Update for Pharmacists (2.5hrs) – practical, role-specific education for pharmacists
Implementation update

Our schedule of training activities has rolled out as planned, comfortably meeting (and often exceeding) the required targets. Many successful workshops have been held across the country through Medicare Locals, primary care health providers and more recently Aboriginal Medical Services and pharmacy groups.

Over the 4 years of the program to June 2013, we conducted:
- Primary Care Asthma Update – 75 workshops
- Asthma & Respiratory Management Seminar for Practice Nurses – 73 workshops
- Spirometry Training Course – 88 workshops
- Spirometry Training Update – 49 workshops
- Asthma Update for Aboriginal Health Workers – 19 workshops
- Asthma Update for Pharmacists – 11 workshops

Participant feedback for all workshop types has been extremely positive.

Workshops 2009–2013

<table>
<thead>
<tr>
<th>Workshop type</th>
<th>Number of workshops</th>
<th>Number of participants</th>
<th>Percentage rural &amp; remote</th>
<th>Percentage of participants who met their learning needs</th>
<th>Percentage of participants who felt it was relevant to their practice</th>
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</thead>
<tbody>
<tr>
<td>Primary Care Asthma Update*</td>
<td>75</td>
<td>1,423</td>
<td>49%</td>
<td>99%</td>
<td>100%</td>
</tr>
<tr>
<td>Asthma &amp; Respiratory Management Seminar for Practice Nurses</td>
<td>73</td>
<td>1,289</td>
<td>58%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Spirometry Training Course†</td>
<td>88</td>
<td>1,140</td>
<td>60%</td>
<td>100%</td>
<td>100%</td>
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<tr>
<td>Spirometry Training Update</td>
<td>49</td>
<td>600</td>
<td>61%</td>
<td>100%</td>
<td>99%</td>
</tr>
<tr>
<td>Asthma Update for Aboriginal Health Workers</td>
<td>19</td>
<td>206</td>
<td>95%</td>
<td>96%</td>
<td>92%</td>
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<tr>
<td>TOTAL</td>
<td>304</td>
<td>4,658</td>
<td>59%</td>
<td>99%</td>
<td>98%</td>
</tr>
</tbody>
</table>

* Includes 7 ambulance officer and 15 pharmacist workshops.
† Note: Participant limit per session 15–20 to maintain ratio of one presenter to five participant to facilitate effective adult learning.
• Note: Also conducted were fifteen workshops specifically for pharmacists. Adapted from the Primary Care Asthma Update in consultation with an expert working group, the Asthma Update for Pharmacists was run between August 2012 and April 2013. There were 225 pharmacists in attendance at the workshops and participants reported a 99% increase in their knowledge and a 100% increase in their skills.
Curriculum Review Panel Members

A Team and Practice Nurse Seminars – Curriculum Review Panel Members
Dr Jenny Gowan (pharmacist)
Ms Marg Gordon (practice nurse)
Dr Kerry Hancock (general practitioner)
Dr Victoria Smith (general practitioner)
Dr Andrew Tai (paediatric respiratory physician)
Ms Judi Wicking (asthma educator)
Dr Chris Worsnop (adult respiratory physician)
Dr Simon Young (general practitioner)

Spirometry Training – Curriculum Review Panel Members
Prof. Amanda Barnard (general practitioner)
Ms Brigitte Borg (respiratory scientist)
Dr Debbie Burton (respiratory scientist)
A/Prof. Alan Crockett (respiratory scientist)
Dr Kevin Gain (respiratory scientist)
Dr Kerry Hancock (general practitioner)
A/Prof. David P. Johns (respiratory scientist)
Mr Jeff Pretto (respiratory scientist)
A/Prof. Noela Whitby AM (general practitioner)
Ms Judi Wicking (asthma educator)

Indigenous Health Worker Education – Advisory Group
A/Professor Amanda Barnard (Associate Dean, School of General Practice, Rural and Indigenous Health, Australian National University (ANU), Medical School, ACT)
Dr Penny Abbott (Senior Medical Officer, Aboriginal Medical Service Western Sydney, NSW)
Dr Louise Harwood (Medical Director, Katherine West Health Board, NT)
Ms Therese Williams (Aboriginal Health Worker, Pangula Mannamurra, SA, NATSIHWA representative)
Cyndi Cole (AHW Training Program Coordinator, Nganampa Health Council, SA)
Graeme Williams (Senior Educator, Aboriginal Health Council of South Australia, SA)

Professional development recognition
Our workshops have received professional development recognition from a range of relevant professional associations including:
- Royal Australian College of General Practitioners – notably recognising the Spirometry Training Course as a Category 1 QI&CPD activity for 40 points
- Australian College of Rural and Remote Medicine
- Australian Asthma & Respiratory Educators Association
- Australian Practice Nurse Association
- Royal College of Nursing Australia
- Pharmaceutical Society of Australia
- Pharmacy Guild of Australia
- Society of Hospital Pharmacists of Australia

Pharmacist education
In response to requests from pharmacy groups and feedback from the Primary Care Asthma Update workshops a special advisory group was formed to review the Primary Care Asthma Update materials with a view to develop role-specific education relevant for pharmacists.

Following this review and adaptation, pilot sessions were rolled out. Eleven pilot workshops of the new Asthma Update for Pharmacists were run in late 2012 and early 2013. The workshops have been met with great enthusiasm from pharmacy groups and participants who reported a significant increase in their understanding of asthma management as a result of attending. There has been ongoing interest to continue this role-specific education.

Future education programs
We have received in-principle advice from the Department of Health and Ageing that the education program funding will be renewed for a further 3 years. Work is under way to finalise the contract requirements and to consider how the program can be further enhanced.

Our ongoing funding is a reflection of our program’s excellent reputation, providing highly effective yet cost-efficient training for health professionals all around the country. It also represents a total of 15 years of continuous funding for NAC health professional education from the Australian Government – a significant achievement of which we are extremely proud.

"Thank you for another very successful educational event. It was a pleasure to assist with this update and to see firsthand how the NAC supports rural practice nurses"
Host comment

"The presentation was excellent. I have learnt new ways to look at spirometry"

"This was a fabulous workshop. The delivery of information was great. Well done to the presenters and the organisational backup is superb"
Asthma Handbook 7th edition

The Asthma Management Handbook is the national asthma treatment guidelines and NAC’s flagship publication, forming the foundation of all our resources and programs. The 7th edition, to be renamed the Australian Asthma Handbook, is currently in development.

First published in 1989, and available online since 1996, the Handbook sets the standard for best-practice, evidence-based asthma management in primary care. Development of the Handbook is always a complex, collaborative effort with the challenges in producing this edition reflecting the more stringent methodological obligations in the guidelines world, as well as a shift in focus from a print publication to what will now primarily be a user-friendly and dynamic website.

Producing this edition has involved almost 80 honorary contributors working with our editorial team under the auspices of the Guidelines Committee, led by Professor Amanda Barnard, GP. We thank all contributors for volunteering their time and expertise, and particularly for their ongoing support during the complex development process.

With the exhaustive topic-based working group phase nearly complete – from which only very positive feedback has been received on the new online format, functionality and transparent methodology – the critical consolidation phase will commence in the spring. The penultimate step of the external expert reader and stakeholder review will occur towards the end of 2013, before all is finalised.

The Handbook website and its printed companion summary will be launched in early 2014.

Indeed, 2014 is shaping up as a good year to publish the new edition of the Handbook, as the Guidelines International Network (G-I-N) will be holding its 11th international conference in the NAC’s hometown of Melbourne in August. With the theme of the conference focussed on innovation and guidelines in the digital age, it will be the perfect forum to highlight the features of what will be a world-first in guideline provision and ensure the NAC and the Handbook remains at the global forefront of this burgeoning field.
Media relations

The National Asthma Council Australia has enjoyed an extremely successful year of media relations, maintaining a high profile in both consumer and health industry media and online through our proactive strategy of regular releases and our expert spokesperson program.

Over a dozen media releases were issued throughout the reporting period. Widespread coverage occurred nationally from the smallest community newspapers (such as the Narromine News & Trangie Advocate with a circulation of just 728) and culturally and linguistically diverse community press, to national prime time coverage on Channel Nine news featuring National Asthma Council Australia Director Dr Jonathan Burdon commenting on new research suggesting a link between fast food consumption and asthma.

A highlight for the year was the launch of the new Australian Government-funded Asthma Information Brochure Series. The active support of the Department of Health and Ageing resulted in a joint launch announcement including the recording of a national Audio News Release by the Health Minister Tanya Plibersek, which achieved extensive on-message coverage across metropolitan and regional radio news programs.

Audio News Releases were also successfully used during 2012–13 to put topical asthma management messages on the news media’s agenda for National Asthma Week, World Asthma Day and to support the announcement of the latest asthma deaths data from the Australian Bureau of Statistics.

In addition to our steady stream of proactive media relations initiatives, our experts were again regularly sought to provide commentary on a range of timely themes including the impact of mould in flood regions, new research findings and seasonal asthma triggers from pollen to thunderstorms.

Once again, our expert commentary service has allowed our spokespeople to maintain a strong relationship with the media and the National Asthma Council Australia remains the first port of call for industry press and mainstream journalists seeking asthma-related input.

During the twelve month reporting period, combined print coverage alone reached almost eight million Australians. In addition to this we achieved our highest ever level of radio coverage, national television news coverage and an increasing level of digital exposure. This is a fitting reflection of the excellent service provided by Ms Kelly Ward, who recently stepped down as the NAC’s media consultant after more than a decade. We wish Kelly all the best in her new position.

We will continue to build on this high level of quality exposure into the next financial year, supported by our new media and PR consultants, The Reputation Group.

Online presence

Our NAC website (www.nationalasthma.org.au) underwent a facelift in early 2013. The fresh new look was accompanied by a simplified navigation system and easier access to the most popular resources on our website.

Packed with great resources and advice, our website continues to provide reliable, useful information about asthma to the community, both in Australian and overseas. This financial year saw more than 350,000 visits to our website, an increase of over 33% from the previous year. These visitors came from over 200 countries around the world.

This year has seen the addition of several new resources including the updated Asthma Information Brochure Series, consisting of six new information papers for health professionals and matching patient brochures. Each of the patient brochures was also translated into 5 community languages. In addition, an updated version of the Asthma and Allergic Rhinitis information paper was also released. All of these new resources are available to view or download from our website.

Our existing range of Healthy Living Factsheets was updated and extended; topics include ‘Spacer use and care’, ‘Healthy eating for asthma’ and ‘Pregnancy & asthma’. These factsheets continue to be a valuable resource for families facing the challenge of living with asthma and are useful patient handouts for asthma educators and other health professionals.

Our associated website Kids with Asthma (www.kidswithasthma.com.au) continues to be popular with families, complementing the expanded community section of the NAC website, providing more resources and tools for people caring for children with asthma and allergies.

During the coming 12 months we intend to continue development of our existing website and social media presence, ensuring that we utilise the most up-to-date technology in order to provide additional tools and education resources to the asthma community.

Our Sensitive Choice website (www.sensitivechoice.com.au) is an important tool for providing information about asthma management, the program and approved products. The site was further developed over the year, with usage statistics showing pleasing growth. Our social media activities (particularly Facebook) are also building, with successful investment in Facebook advertising and Google AdWords to promote the program and approved products.
**Kids’ First Aid for Asthma**

**Sit the child upright.**
Stay calm and reassure the child. Don’t leave the child alone.

**Give 4 separate puffs of a reliever inhaler – blue/grey puffer** (e.g. Ventolin, Asmol or Alcomir)

- Use a spacer, if available.
- Give one puff at a time with 4–6 breaths after each puff.
- Use the child’s own reliever inhaler, if available.
- If not, use first aid kit reliever inhaler or borrow one.

**Wait 4 minutes.**
If the child still cannot breathe normally, **give 4 more puffs.**

- Give one puff at a time (use a spacer, if available).

**If the child still cannot breathe normally,**

**CALL AN AMBULANCE IMMEDIATELY (DIAL 000)**

Say that a child is having an asthma attack.

**Keep giving reliever.**
Give 4 separate puffs every 4 minutes until the ambulance arrives.

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**WITH SPACER**
Use spacer if available*

- **Assemble spacer (attach mask if under 4)**
- **Remove cap and shake well**
- **Insert puffer upright into spacer**
- **Place mouthpiece between child’s teeth and seal lips around it**
- **Press one firmly on puffer to fire**
- **Child takes 4–6 breaths in and out of spacer**
- **Repeat** 1 puff at a time if 4 puffs taken – remember to shake the puffer before each puff
- **Replace cap**

*If spacer not available for child under 7, cup child’s helper’s hands around child’s nose and mouth to form a good seal. Fire puffer through hands into air pocket. Follow steps for WITH SPACER.

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**WITHOUT SPACER**
Kids over 7 if no spacer

- **Remove cap and shake well**
- **Get child to breathe out away from puffer**
- **Place mouthpiece between child’s teeth and seal lips around it**
- **Ask child to take slow deep breath**
- **Press once firmly on puffer while child breathes in**
- **Get child to hold breath for at least 4 seconds, then breathe out slowly away from puffer**
- **Repeat** 1 puff at a time if 4 puffs taken – remember to shake the puffer before each puff
- **Replace cap**

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**BRICANYL**
For children 6 and over only

- **Unscrew cover and remove**
- **Hold inhaler upright and twist grip around then back**
- **Get child to breathe out away from inhaler**
- **Place mouthpiece between child’s teeth and seal lips around it**
- **Ask child to take a big strong breath in**
- **Press once firmly on puffer while child breathes in**
- **Get child to hold breath for at least 4 seconds, then breathe out slowly away from puffer**
- **Repeat** 1 puff at a time until 4 puffs taken – remember to shake the puffer before each puff
- **Replace cover**

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**How to Use Inhaler**

**BRICANYL**
For children 6 and over only

- **Remove cap and shake well**
- **Get child to breathe out away from puffer**
- **Place mouthpiece between child’s teeth and seal lips around it**
- **Ask child to take a big strong breath in**
- **Press once firmly on puffer while child breathes in**
- **Get child to hold breath for at least 4 seconds, then breathe out slowly away from puffer**
- **Repeat** 1 puff at a time until 4 puffs taken – remember to shake the puffer before each puff
- **Replace cap**

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**Severe Allergic Reactions**

**CALL AMBULANCE IMMEDIATELY (DIAL 000)**

Follow the child’s Action Plan for Anaphylaxis if available. If you know that the child has severe allergies and seems to be having a severe allergic reaction, use their adrenaline autoinjector (e.g. EpiPen, Anapen) before giving asthma reliever medicine.

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**Not Sure if it’s Asthma?**

**CALL AMBULANCE IMMEDIATELY (DIAL 000)**

If the child stays conscious and their main problem seems to be breathing, follow the asthma first aid steps. Asthma reliever medicine is unlikely to harm them even if they do not have asthma.

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For more information on asthma visit: Asthma Foundations [www.asthmaaustralia.org.au](http://www.asthmaaustralia.org.au)

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Although all care has been taken, this chart is a general guide only which is not intended to be a substitute for individual medical advice/treatment. The National Asthma Council Australia expressly disclaims all responsibility (including for negligence) for any loss, damage or personal injury resulting from reliance on the information contained. © National Asthma Council Australia 2011.

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**Sit the child upright.**
Stay calm and reassure the child. Don’t leave the child alone.

**Give 2 separate doses of a Bricanyl inhaler**

- If a puffer is not available, you can use Bricanyl for children aged 6 years and over, even if the child does not normally use this.

**Wait 4 minutes.**
If the child still cannot breathe normally, **give 1 more dose.**

- If child still cannot breathe normally, **CALL AN AMBULANCE IMMEDIATELY (DIAL 000)**
- Say that a child is having an asthma attack.
- **Keep giving reliever**
  - Give one dose every 4 minutes until the ambulance arrives.

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**BRICANYL**
For children 6 and over only

- **Unscrew cover and remove**
- **Hold inhaler upright and twist grip around then back**
- **Get child to breathe out away from inhaler**
- **Place mouthpiece between child’s teeth and seal lips around it**
- **Ask child to take a big strong breath in**
- **Press once firmly on puffer while child breathes in**
- **Get child to hold breath for at least 4 seconds, then breathe out slowly away from puffer**
- **Repeat** 1 puff at a time until 4 puffs taken – remember to shake the puffer before each puff
- **Replace cap**

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Sensitive Choice

Sensitive Choice was launched in 2006 to help people with asthma and allergy to identify products and services that may be better choices for them, and to provide the NAC with an additional source of revenue. Sensitive Choice approved products and services can use our blue butterfly trademark. All proposed products and services must be assessed by an independent panel of experts as offering potential benefits to people with asthma or allergies, and also doing no harm. The program is not a standards-based certification program; rather, it is a type of course-related marketing program.

The Sensitive Choice program has four stated objectives:
1. Educate Australians and New Zealanders about the importance of managing their asthma.
2. Encourage manufacturers and suppliers to produce products and services that are asthma and allergy friendly and that could benefit people with asthma and allergies.
3. Provide consumers with a way of identifying products and services that may benefit people with asthma and/or allergies and improve health and wellbeing.
4. Generate sponsorship funds to enable both the Australian and the New Zealand asthma organisations to continue their work in improving asthma care.

The Sensitive Choice program continued to grow and develop, finishing the year with 51 partners. Three partners departed the program during the year, but 13 new partners joined.

The following chart shows partnerships by country:

We thank our partners for their involvement in a program that benefits the community (particularly those with asthma and allergies) and the NAC. Partners are listed later in this report.

Our People

The program is led by a small team at the NAC in Melbourne, supported by assistance from other staff members as needed. A critical part of the process is the assessment of applications for approval (or rejection) of products and services by the volunteer members of the Product Advisory Panel, whose insights and expertise add rigor and value to the program.

Panel membership remained unchanged for the year. Panel members are thanked for their valuable contribution.

Program efficiency

The vast majority of funds raised by the Sensitive Choice program are able to be allocated to the important work of the NAC, with only around 16% of costs consumed by salaries, other operating costs and the costs of promoting the program.

This cost ratio is well below the cost ratios of many charities.

Promotional activities

Public awareness of and confidence in the program is important to its ongoing success. During the year, market research was undertaken that indicated awareness of the Sensitive Choice program was modest, but building, with 81% of respondents having a favourable reaction to the program (none unfavourable).

Some of our larger partners promote the Sensitive Choice approved status of their products in television, radio and print advertising. This not only promotes their products, but it also improves general awareness of the program.

New Zealand

New Zealand has the second highest rate of asthma in the world. The Sensitive Choice program operates in New Zealand in conjunction with the Asthma Foundation there.

Both the NAC and the Asthma Foundation share the financial benefits and we acknowledge the valuable support of the Asthma Foundation in promoting the program in New Zealand.

During the year, the New Zealand program showed strong growth and improved public awareness.
Activity Highlights

Asthma Awareness

National Asthma Week
To coincide with National Asthma Week, 1–7 September 2012, we unveiled Asthma Buddy, the first free iPhone asthma management app developed specifically for Australians.

Using the latest app technology, Asthma Buddy transformed our evidence-based written asthma action plan template into an interactive app, complete with quick access to the First Aid for Asthma steps. We promoted the app with the National Asthma Week theme of ‘Be prepared’.

World Asthma Day
Our focus for World Asthma Day, 7 May 2013, was the publication of the final two resources in the asthma information brochure series. The resource sets, Asthma & Healthy Living and Asthma & Older Adults, nicely supported the global theme of ‘You can control your asthma’.

Our media activities focussed on healthy habits and lifestyle choices for people with asthma. We highlighted the advice on issues such as asthma and mental health, quitting smoking, avoiding influenza and losing weight to improve lung health.

Asthma mortality statistics
Data from the Australian Bureau of Statistics released in March revealed that Australian women are most at risk of dying from asthma, with 263 females dying from the condition in 2011 – more than double the number of males.

In total, 378 asthma-related deaths were recorded affecting 263 females and 115 males.

The majority of deaths occurred in those aged 45 years and over, with women outstripping men in every 10 year age bracket from 45 upwards. The greatest number of deaths occurred in those aged over 75 years with 226 deaths recorded (167 women and just 59 men). In contrast to this, there were only 13 deaths in the 25 and under age group.

Our supportive media activities highlighted that this figure marks an encouraging decrease in the overall annual asthma death toll and a positive decline in both male fatalities and deaths amongst younger Australians. However, there is no room for complacency, especially among older women with asthma and those caring for them.
**Tonic TV**

In October 2012, ABC News24 aired an episode of *Tonic TV* all about asthma called ‘Breathe Easy – Living with Asthma’, which was produced with the assistance of the NAC. *Tonic* is a magazine-style program that relies on the latest evidence and advice from world-leading health experts to inform viewers and help them to live a healthier life.

Dr Norman Swan and his team of reporters looked at how asthma affects the lives of people living with it, through the eyes of Kathy and Jeff, two very different people with asthma. Kathy wasn’t diagnosed until her late twenties, after a series of misdiagnoses and years of struggling with not being well and not really understanding why. Jeff on the other hand was diagnosed as a child and has found that managing his asthma well allows him to live a life full of sport and fitness. Asthma expert Prof. Matthew Peters talked about the latest in asthma research and why this common condition is mistreated and misdiagnosed, and had loads of great information for people with asthma and their loved ones.


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**Education resources**

**Allergic rhinitis and asthma publications**

In readiness for spring 2012, we updated our *Managing allergic rhinitis in people with asthma* information paper for health professionals and *Allergic rhinitis (hay fever) and your asthma patient* brochure to reflect the latest evidence and management recommendations.

The patient brochure explains the asthma/allergic rhinitis link in easy to understand language, providing information on symptoms, diagnosis, treatment and a range of frequently asked questions, plus tips on how to use nasal sprays correctly.

The eight-page health professional guide details a comprehensive, step-by-step approach to management, including investigation of allergic rhinitis and effective treatment.

We thank the ad hoc expert panel involved in the resource development:

- Prof. Peter Smith, allergist
- Assoc. Prof. Richard Harvey, rhinologist and ear, nose and throat surgeon
- Assoc. Prof. Ian Charlton, general practitioner
- Ms Debbie Rigby, pharmacist

Both new resources can be downloaded from [www.nationalasthma.org.au](http://www.nationalasthma.org.au) and copies were distributed directly to general practitioners through MSD’s representative network. The publications were supported by an unrestricted educational grant from MSD and have been endorsed by the Australasian Society of Clinical Immunology and Allergy.
In spring 2012 we launched Asthma Buddy, the first free iPhone asthma management app developed specifically for Australians. Asthma Buddy is based on our latest evidence-based written asthma action plan template. The app makes the paper plan interactive, providing an easy to use, take anywhere version of the patient’s action plan.

As well as the action plan’s personalised instructions and medication information, Asthma Buddy includes step-by-step advice on how to handle an asthma attack, a direct dial link to 000 and space to add emergency contact details.

There are also links to our popular library of inhaler usage videos that demonstrate the correct way to use the various inhalers currently available in Australia.

The end of the financial year saw more than 2000 downloads from 22 countries and territories around the world and still growing.

Development of an Android version of Asthma Buddy is currently underway and will be launched in spring 2013. Following feedback from current users of the app, we will be including two new features: multiple profiles to allow parents/carers to record information for each of their children in the one place; and a journal function to allow users to keep track of symptoms over a period of time.

Conferences

GPCE

We continued our regular presence at the General Practitioners Conference and Exhibition (GPCE), presenting a 1-hour seminar at each iteration of the conference. The event visited Brisbane for the first time in September 2012, where we presented on the popular topic of allergic rhinitis.

Our seminar, ‘Allergic rhinitis: Asthma of the nose?’ was presented by Assoc. Prof. Richard Harvey, ENT surgeon and rhinologist. The presentation looked at the strong association between asthma and allergy, discussing the differential diagnosis and practical strategies for management of concurrent asthma and allergic rhinitis. The seminar was supported by an unrestricted education grant from MSD. We used the session to promote our new Managing allergic rhinitis in people with asthma resource set.

At GPCE Melbourne in November 2012, GP Dr Vicki Kotsirilos presented the session ‘Complementary therapies for asthma – what works vs what doesn’t’. During this session, Dr Kotsirilos talked about how up to 80% of patients with asthma will turn to complementary therapies to help manage their condition, yet evidence of effectiveness is still unclear for many treatments. We used the session to promote our new Asthma & complementary therapies resource set.

At Sydney GPCE in May 2013, Assoc. Prof. Ian Charlton spoke on healthy living and asthma. Discussing healthy habits and lifestyle choices for people with asthma, Assoc. Prof. Charlton provided a GP perspective on this important topic for an engaged and enthusiastic audience. Attendees received the recently published Asthma & Healthy Living resources, on which the presentation was based. The seminar was well received with many GPs commenting that the session was very valuable to assist in their management of asthma patients.

PNCE

A conference stream for nurses, the Practice Nurse Conference and Exhibition (PNCE), is now held alongside GPCE. We have extended our conference participation to reach this important group of health professionals.

At PNCE Melbourne in November, NAC Program Manager and asthma & respiratory educator Ms Judi Wicking presented a seminar ‘Inhaled Respiratory Medications and Emergency Management of Asthma’. The two-part session that looked at the role of inhaled respiratory medications including how and when they are used, as well as asthma emergency management. The session was very well received by the attendees.

At PNCE Sydney in May we presented a similar seminar to that at GPCE Sydney, which was held on the same day. Ms Suzanne Hull, asthma & respiratory educator, presented the session ‘Asthma management beyond the preventer: Healthy living with asthma’ to approximately 60 nurses, with much positive feedback.
TSANZ Annual Scientific Meeting 2013

At each Thoracic Society of Australia and New Zealand (TSANZ) Annual Scientific Meeting, we hold a workshop session with the Asthma and Allergy Special Interest Group. At the ASM in Darwin, we took part in a session on ‘Hands on teaching using aerosol devices for respiratory therapy – nebulisers, pMDIs, spacers and DPIs’. Ms Judi Wicking, NAC Program Manager and asthma & respiratory educator, provided practical hands-on advice for this session.

Asthma awards

Research awards

The NAC funds annual awards to encourage research into asthma. Offered via our stakeholder bodies, the awards focus on asthma research presented at each organisation’s annual/biennial scientific meeting or conference.

The winner of the 2012 ASCIA and NAC Asthma Research Awards was Associate Professor Efren Rael from the Pennsylvania State University in the USA. His winning presentation was ‘Asthma phenotype triggers correlate with clinical outcome’.

The winner of the 2012 TSANZ and NAC Asthma prize was Mr Md Ashik Ullah from the School of Biomedical Science, University of Queensland. His winning presentation was ‘The activation of the receptor for advanced glycation end products (rAGE) contributes to the induction of HDM-specific Th2 responses’.

Bangladesh Lung Foundation travel award

We have a long relationship with the Bangladesh Lung Foundation and were pleased to sponsor the Bangladesh Lung Foundation Travel Awards again in 2013. The travel awards are presented to the top three abstracts on research in the asthma/respiratory area to enable the winners to attend the next Asia Pacific Society of Respirology conference.

The winners of the 2013 awards were:

- Dr Md. Ashraful Alam Khan, Medical Officer, ICU, NIDCH, Dhaka: ‘Changing trends of asthma in Bangladesh: 1999 to 2009’
- Dr Rawshan Arma Khanam, MD (Chest Diseases) Thesis Part Student, NIDCH, Dhaka: ‘A controlled trial of noninvasive positive pressure ventilation (NIPPV) in patients of COPD with respiratory failure’
- Dr Fazle Rabbi Mohammed, MD (Chest Diseases) Thesis Part Student, NIDCH, Dhaka: ‘A controlled trial of noninvasive positive pressure ventilation (NIPPV) in patients of COPD with respiratory failure’

International activities

Asia-Pacific Paediatric Asthma Advisory Board

In September 2012, the NAC acted as secretariat for a meeting of the Asia-Pacific Paediatric Asthma Advisory Board, supported by GSK Asia-Pacific. The meeting aimed to share the participants’ experience of treating paediatric asthma in the primary care setting in the Asia-Pacific region, with the intention of achieving a better understanding of the challenges and possible solutions.

An article describing the meeting’s findings and key resolutions, titled ‘Primary care challenges for treating paediatric asthma in the Asia-Pacific region’, has been submitted to the Primary Care Respiratory Journal. We are hopeful it will be accepted for publication as a letter to the editor.

The members of the Advisory Board were:

- Dr Lorna Abad, The Philippines
- Dr Weena Chaiyote, Thailand
- Dr Wai Seong Chin, Malaysia
- Dr Yong-Jae Choi, Korea
- Dr Kelvin (Tze Chien) Goh, Singapore
- Dr Chin-Tung Hsieh, Taiwan
- Dr Lukas Jusuf, Indonesia
- Dr Thi Dieu Huyen Nguyen, Vietnam

United Nations Environment Programme (UNEP)

Our CEO, Kristine Whorlow, Australian Government nominee to the UNEP Medical Technical Options Committee, attended their annual meeting from 13-15 March 2013 in Beijing, China. The phase-out of (CFC)-containing metered dose inhalers is not yet over with a few countries still working on this.

Other engagements

- CEO presented at the 1st Anniversary Symposium of Gyeonggi-Do Atopy Asthma Education and information Center, Seoul National University Bundang Hospital, September 11, 2012
- CEO attended 3rd IPCRG International Primary Care Respiratory Group Scientific Meeting, Uppsala, Sweden, 23–24 May 2013
Our People

Board

- Assoc. Prof. Noela Whitby AM, Chairman
  General Practitioner
  The Royal Australian College of General Practitioners representative
- Prof. Charles Mitchell
  Respiratory physician
  Asthma Australia representative (until September 2012)
- Mr Stephen Hughes
  Community pharmacist
  Pharmaceutical Society of Australia representative
- Assoc. Prof. Janet Rimmer
  Respiratory physician and allergist
  Australasian Society of Clinical Immunology and Allergy representative
- Dr Jonathan Burdon
  Adult Respiratory Physician
  Independent Director

Finance Committee

- Mr Stephen Hughes
- Mr Peter Norman
- Mr Alasdair Norton
- Mr Robert Yeo
Asthma Handbook Guidelines Committee

- Prof. Amanda Barnard general practitioner (Chair)
- Ms Naomi Fenton nurse practitioner
- Dr Jenny Gowan pharmacist
- Dr Jane Marr general practitioner
- Assoc. Prof. Helen Reddel respiratory physician
- Assoc. Prof. Janet Rimmer respiratory physician and allergist
- Prof. Peter van Asperen paediatric respiratory physician
- Assoc. Prof. Peter Wark respiratory physician

Pharmacists’ Asthma Group

The Pharmacists’ Asthma Group works to coordinate the expertise, enthusiasm and skills of community and hospital pharmacists who have a special interest in the management of asthma.
- Mr Marcus Weidinger (Chair)
- Mr Simon Appel OAM
- Prof. Carol Armour
- Mr Kingsley Coulthard
- Mr Mark Feldschuh
- Mr Peter Holder
- Mr Stephen Hughes
- Ms Karalyn Huxhagen
- Mr Grant Kardachi
- Mr Kevin Morgan
- Ms Toni Riley
- Dr Bandana Saini
- Mr Chris Flood (ex-officio)
- Mr Paul Mackey (ex-officio)

General Practitioners’ Asthma Group

The General Practitioners’ Asthma Group works to coordinate the expertise, enthusiasm and skills of general practitioners who have a special interest in the management of asthma.
- Dr Kerry Hancock (Chair)
- Prof. Amanda Barnard
- Dr David Batt
- Assoc. Prof. Ian Charlton
- Assoc. Prof. H. John Fardy
- Assoc. Prof. Chris Hogan
- Dr Steven Rudolphy
- Dr Victoria Smith
- Assoc. Prof. Noela Whitby AM
- Assoc. Prof. Sanjiva Wijesinha
- Dr Russell Wiseman

Sensitive Choice Product Advisory Panel

The Sensitive Choice Product Advisory Panel considers products and services for acceptance into the Sensitive Choice program. It is supported by Ms Angela Francis, chief executive, Asthma Foundation (NZ), and Ms Kristine Whorlow, chief executive officer, NAC.

The Panel consists of the following experts:
- Adult respiratory physician (Chair)
- Allergist
- Community pharmacist
- General practitioner
- Industrial chemist
- A person with asthma

Staff
- Ms Kristine Whorlow, Chief Executive Officer
- Ms Siobhan Brophy, Communications Manager
- Ms Rhonda Cleveland, Operations Manager
- Mr Adam Trumble, Partnerships Manager
- Ms Judi Wicking, Program Manager
- Ms Melissa Bell, Marketing Coordinator
- Ms Kathryn Goldsworthy, Communications Project Assistant
- Ms Jessica Groom, Project Administration Officer
- Ms Miriam Hagan, Publications Officer
- Ms Leanne Koster, Online Communications Officer
- Mr Mark Olszewski, Communications Project Officer
- Ms Senka Perera, Executive Assistant/Office Manager
Acknowledgments

The NAC is able to carry out our important work thanks to the generosity of our sponsors and supporters. The Australian Government Department of Health and Ageing continued to provide invaluable backing for our GP and Allied Health Professional Asthma and Respiratory Education Program (GPAHPAREP) under the Department’s Asthma Management Program 2009–2013.

We thank the Department for their ongoing support of the NAC and asthma management more widely.

Our sponsors from the pharmaceutical and spirometry industry are important allies in spreading the best-practice respiratory management message. We were able to develop many of our latest resources as a result of unrestricted educational grants from these companies and we look forward to their continued support.

We are also grateful to our many Sensitive Choice® Partners who continue to raise awareness of asthma in the community and support our important educational activities.

Our recent change in Deductable Gift Recipient (DGR) status has led to an increase in donations made to the NAC. We are particularly grateful to the generous individuals and organisations for their contributions.

Finally, we extend our thanks to the many tireless health professionals who help us in all facets of our work. You truly are the cornerstone of the NAC.
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National Asthma Council Australia
Your patients may soon be asking you for this!

Asthma Buddy – the interactive iPhone app for written asthma action plans.

Help your asthma patients stay on track with this easy to use app:

- Personalised instructions for good self-management
- A reminder of their prescribed asthma medications
- Advice on what to do if their asthma is getting worse

Complete with quick access to First Aid for Asthma steps plus the National Asthma Council Australia library of How-to videos on inhaler use.

For more information go to www.nationalasthma.org.au/asthmabuddy

The Asthma Buddy app is based on the latest written asthma action plan template, revised and updated in 2011 by the National Asthma Council Australia in consultation with leading respiratory clinicians.
Your patients may soon be asking you for this! Help your asthma patients stay on track with this easy to use app:

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- Advice on what to do if their asthma is getting worse
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