Reducing SABA Monotherapy in asthma patients at Toa Payoh Polyclinic

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Problem Statement

Despite guidance from local and international agencies, asthma patients (aged 6 years and above) are still being prescribed with Short Acting Beta Agonist (SABA)w monotherapy. This has been shown to increase the risks of asthmarelated death, urgent asthma-related healthcare provision, worse long-term outcomes, and increased healthcare costs. Every asthma patient given a SABA monotherapy prescription is a missed opportunity to reverse these risks.

Project Aim

To reduce the percentage of asthmatic patients aged 6 years and above treated in Toa Payoh Polyclinic who are prescribed with SABA monotherapy from 7.6% to 0% over 6 months

Lessons Learnt

- 1. Addressing problems at the systems-level was more reliable but challenging to implement. We found that reduction in SABA-monotherapy prescriptions was sustained effectively through Intervention 3, but this required coordination from multiple parties and buy-in from the relevant stakeholders.
- Importance of a multi-disciplinary approach. Through the project, our team learnt that a seemingly simple problem of SABAmonotherapy is caused by a variety of issues, thereby highlighting the importance of adopting a multidisciplinary approach so that this problem can be tackled effectively.

Potential Solutions

- New patient education materials and clinic based Continuing Medical Education programme (Jun-Jul 2022)
 - Reiterated importance of switching patients out of SABA monotherapy



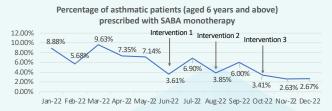
2. Placing reminders to switch patients with a history of SABA prescriptions out of SABA monotherapy in electronic medical records (Aug-Sep 2022)

Patient Care Coordination Note a Wang Long Randy CHEONG Mon, 15 Aug, 2022 10:58 AM 15 Aug: Patient has a history of SABA-only prescription, do consider switching out of SABA-only therapy at the next consultation. Patient education material available with smartphrase ".sabaasthma".

3. Introduced phone interventions at pharmacy if SABA prescriptions were made (Oct-Nov 2022)

Outcomes & Impacts

Overall, our project saw a consistent decrease and maintenance in the percentage of patients who were given SABA monotherapy from 7.6% to 2.6% over a 6-month intervention period in Toa Payoh Polyclinic



Future steps in ensuring sustained decrease in SABA monotherapy rates include:

- Making pharmacy intervention for SABA-only prescriptions a permanent workflow
- Automating reminders for patients with a history of SABA-only prescriptions
- Engaging key stakeholders to raise awareness of this problem