

EMBARGOED UNTIL 00:01 Wednesday 05 December

Simple breath test could identify millions of people living with lung disease

Wednesday 05 December 2018: The Taskforce for Lung Health is today calling for an inexpensive breath test to be much more widely used in GP practices, community health services and hospitals to improve the diagnosis of lung disease. For the sake of a short training course for health professionals and at a cost of less than a thousand pounds a year for a specialist device, millions of patients could have an accurate diagnosis.

The spirometry test takes about 10 minutes and is used to tell if breathing is obstructed by narrowed or inflamed airways by measuring the total amount of air you can breathe out from your lungs and how quickly you can exhale. The Taskforce for Lung Health wants this test to be used routinely in diagnosing lung conditions such as chronic obstructive pulmonary disease (COPD) and asthma, in people whose medical history and symptoms indicate lung disease.

Spirometry tests are currently underutilised in GP practices and diagnostic hubs within hospitals. Patients aren't being tested because the equipment isn't to hand, or health professionals aren't trained to use it or they don't have the necessary time to undertake the test.

This needs to change if people are to have the best chance of an accurate diagnosis and access to treatments early enough to get the best results.

Due to the gradual progression of lung conditions such as COPD and interstitial lung disease (ILD), many patients remain undiagnosed or misdiagnosed for years and only learn of their condition when opportunities for treatment have already passed by. Currently 1.2 million people are living with diagnosed COPDⁱ, but over two million peopleⁱⁱ are estimated to be undiagnosed and so receive no treatment, even as their condition deteriorates. Early

and accurate diagnosis for all lung diseases is critical - identifying the disease at the earliest stages means that more measures can be taken to slow its progression, which in turn can add years to people's lives and significantly improve their quality of life.

Carol Cooper-Taylor, 62, from Stourport was diagnosed with asthma in her late 20s but it took two decades for her to be diagnosed with COPD. She said: "By the time I was diagnosed I was so breathless that I had to retire early at 51. I worked in academia and absolutely loved my job, so I was grieving for both my health and my career at the same time as adapting to a less active and less mobile life. The future my partner and I had looked forward to dissolved before our eyes.

"If my COPD had been caught at an earlier stage, my life could have been very different; I might have been able to take medication to slow the progression and pulmonary rehabilitation might have helped me stay a bit more active and social. I think people with persistent breathlessness should be having spirometry and other tests much earlier in the diagnosis stage - it really can make a huge difference."

Dr Steve Holmes from the Royal College of General Practitioners said: "Spirometry tests are extremely effective, but we need to see GP practices supported to fund the one-off cost and subsequent training sessions needed for practice staff to use them and interpret the results. A relatively small amount of funding has the potential to save lives. We also need to see public campaigns about lung disease, so that patients are more aware of potential symptoms and can seek medical assistance at an earlier stage in their condition."

Lung disease is the third biggest killer in the UK, but there is no clear route to be followed by GPs, community pharmacists, nurses and other health care professionals when a patient presents with severe breathlessness or other symptoms. Nor are there time targets for how quickly they should be seen and receive the diagnostic tests and start treatment, unlike for other serious illnesses such as cancer.

The Taskforce for Lung Health is calling for these targets to be put in place to improve early diagnosis, including:

- 93% of patients who need to be referred to a specialist are referred within two weeks



- 96% to start treatment, where possible, within 31 days of a diagnosis and with a package of care agreed

These recommendations and targets form part of a five-year plan being launched today by the Taskforce for Lung Health, a unique collaboration between patient representatives, health care professionals and other experts with a shared vision for lung health.

Research commissioned by the Taskforce to support the launch of their five-year plan also shows a lack of public awareness around lung disease - 92% of respondents didn't know much or anything about lung disease when questioned. This low awareness prevents people from going to their family practice or general practice.

One in five people live with lung disease. Respiratory conditions are responsible for a major part of the gap in life expectancy between the poorest and wealthiest. Despite this, there is no comprehensive national plan in place for lung health.

Dr Penny Woods, Chair of the Taskforce for Lung Health, said: "Early diagnosis for lung disease is crucial. That's why it's so important that patients are able to have a spirometry test when suffering from breathlessness and other symptoms - if we can catch it early, they won't get lost in the system.

"Unlike other major disease areas, lung disease is lagging in both public awareness and mortality rates, and treatment varies across the country. But up until now, patients haven't had a voice. The Taskforce plans to change this by transforming the care for people living with lung conditions."

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Notes to editors

For more information, please contact the British Lung Foundation press office (open 7am-10pm seven days a week) on press@blf.org.uk / 020 7688 5580.

About the Taskforce

The Taskforce for Lung Health is a unique collaboration between patient representatives, health care professionals and other experts. The 29 members have a shared vision for lung

health; we want to transform the care and treatment for patients and change the mortality rate for lung disease, which has barely improved in over a decade.

Coming together for the first time, we've worked throughout 2018 to develop a five-year plan to improve lung health in England. Our report makes vital, realistic recommendations to NHS England and other governing bodies about all aspects of lung health; from prevention and diagnosis right through to end of life care. Together we're giving people with lung disease a powerful voice. For further information visit www.blf.org.uk/taskforce

ⁱ British Lung Foundation. 2016. *The Battle for Breath – the impact of lung disease in the UK*

ⁱⁱ NICE. Last updated 2016- *COPD Quality Standard*