Asthma: DMP is largely consistent with guidelines

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On 22 January 2014 the German Institute for Quality and Efficiency in Health Care (IQWiG) published the results of a literature search for evidence-based clinical practice guidelines on the treatment of people with asthma. The aim of the report is to identify those recommendations from current guidelines of high methodological quality that may be relevant for the planned revision of the disease management programme (DMP). According to the results of the report, there is no compelling need for revision of any part of the DMP. However, IQWiG identified some aspects that could be supplemented and specified.

DMPs are revised regularly

After being commissioned by the Federal Joint Committee (G-BA), IQWiG systematically searched for new guidelines, assessed their methodological quality, and extracted relevant recommendations from these guidelines. In a next step these recommendations were compared with the specifications for the German DMP.

A need for revision may arise if new studies provide new evidence on a disease and its treatment. It is therefore legally specified that a DMP must be revised at regular intervals. It is the Institute's responsibility to firstly identify differences between the guideline recommendations and the DMP. It is then the G-BA's responsibility to examine whether these differences should actually lead to a revision of the DMP.

12 relevant guidelines identified

IQWiG was able to include a total of 12 guidelines in its investigation. Six of these guidelines comprehensively address the care of patients with asthma. The others address specific aspects such as hospital care, occupational asthma or the promotion of asthma control in infants and children.

Only few discrepancies

As IQWiG determined, the recommendations of the current guidelines are largely consistent with the requirements of the DMP; only few discrepancies were found. However, compared with the wording in the DMP directive, most recommendations are more detailed.

Moreover, some guidelines address topics that are not contained in the current directive. For example, the diagnosis of occupational asthma is not addressed and the information is lacking that treatment should be targeted towards asthma control and its results. In addition, the guidelines describe a step-by-step scheme for drug treatment.

Provided by Institute for Quality and Efficiency in Health Care

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