

# Survey reveals 42% of primary care physicians are unfamiliar with biologics to treat asthma

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Biologics for the treatment of asthma were first introduced about 20 years ago. Since then, more and more people with asthma have found

them to be an effective treatment in getting their symptoms under control.

A new study being presented at the American College of Allergy, Asthma and Immunology ([ACAAI](#)) Annual Scientific Meeting in Anaheim, Calif. shows that 42% of the primary care physicians (PCPs) surveyed were unfamiliar with asthma biologics. They didn't know the criteria for starting them—including the need for lab work—and often waited until a patient had experienced two or more exacerbations in a year before referring to an asthma specialist.

"We know that many people who suffer from asthma are regularly seen by PCPs, and we wanted to know if PCPs were familiar with biologics to treat asthma," said Bijalben Patel, MD, lead author of the study. "We also wanted to explore at what point PCPs were referring asthma patients with uncontrolled symptoms to asthma specialists, and whether they were aware of eligibility requirements for a patient to start biologic treatment."

The [survey](#) was sent via email to [primary care](#), attending and resident physicians in the departments of Internal Medicine, Family Medicine and Pediatrics. Of the 85 PCPs surveyed, 77% referred to specialists after two or more exacerbations per year, 42% were unfamiliar with biologics, 82% do not get labs, and 90% do not use absolute eosinophil count (a test for levels of a certain type of white blood cell that is active in allergic conditions) to guide management.

"The results of the survey point to the need to improve the communication between [primary care physicians](#) and asthma care specialists, including regarding use of biologics," said allergist Juan Carlos Cardet, MD, MPH, ACAAI member and senior author of the study. "Biologics have become an important tool in the treatment of asthma and other allergic diseases such as [atopic dermatitis](#) (eczema),

[chronic rhinosinusitis](#) with [nasal polyps](#) and [eosinophilic esophagitis](#), and can prevent substantial ill results from occurring in patients who are eligible for them."

The researchers also found the frequency of PCP referrals to a specialist did not change familiarity with biologics or eligibility criteria. PCPs who saw asthma patients more frequently and those who referred patients to specialists were more likely to get lab work to manage asthma.

**More information:** Abstract: Primary care physician referral patterns and awareness of biologic therapy for uncontrolled asthma

<https://annualmeeting.acaai.org/>

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