## THE STRAITS TIMES

## Database on severe asthma patients to boost understanding of condition

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Diagnosed with severe asthma four years ago, Mr Orson Lim would often be breathless and wake up gasping for air at least once a month. "I felt like a fish out of water," said the 72-year-old parttime security trainer.

People who have severe asthma like him suffer frequently from symptoms such as breathlessness and wheezing. Some may even miss work or find it difficult to sleep because of this condition.

But they are set to benefit from the Singapore Severe Asthma Registry (SSAR), a database on such patients that will be used to understand more about the condition, provide more effective treatments and improve severe asthma care here.

SSAR was set up in April by a research network formed by Nanyang Technological University's Lee Kong Chian School of Medicine (LKCMedicine), Changi General Hospital, Singapore General Hospital (SGH) and Tan Tock Seng Hospital.

The anonymous data collected includes patients' medical history, their treatment, the condition's impact on them and their asthma attack history. The information can help, for instance, in research on other treatments.

Currently, steroids are one of the most common treatments for severe asthma, said Associate Professor Mariko Koh, SSAR chair and a senior consultant in the department of respiratory and critical care medicine at SGH.

"Patients on long-term oral steroids have higher risk of stroke, heart diseases, osteoporosis and diabetes," she said. "It should be used as a treatment of last resort."

The data can also help researchers understand how high use of steroids affects patients here and determine ways to reduce their use.

The registry has collected data from 139 patients so far and aims to have registered 200 patients by the end of the year.

SSAR has been linked up with the International Severe Asthma Registry, which contains data from 12,772 patients in 26 countries. This will allow researchers to compare data of Asian and non-Asian patients.

Currently, guidelines used to treat patients are mostly based on data from non-Asian patients, said Associate Professor Sanjay Chotirmall, assistant dean for faculty affairs and provost's chair in molecular medicine at LKCMedicine.

He said there is a huge gap and need for more data on Asian patients as the disease affects them differently from non-Asian patients because of factors such as different climates, genetics, cultures and healthcare systems.

Meanwhile, Mr Lim said he has not experienced an asthma attack since he started seeing a specialist more than three years ago. He urged those suffering from severe asthma to seek proper help and be patient with their condition.

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