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## *UK Opportunity Analysis: Comparing UK Practice to CONQUEST Quality Standards (2000-2019)*

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- ❖ An observational, longitudinal, descriptive study for the CONQUEST programme
- ❖ Focused on a population of high-risk patients with diagnosed or potential COPD (Table 1) registered at general practitioner (GP) practices.
- ❖ Analysis sample was identified in 2019 and in each previous year back to 2000.
- ❖ Routinely collected primary care data was assessed over the relevant time frame for each outcome; the 12 months before or after 1 January of each study year.
- ❖ 2019 was chosen as the key year for the data as it provides the most up-to-date information prior to the COVID-19 pandemic.



Collaboration On Quality Improvement Initiative  
for Achieving Excellence in Standards of COPD Care.

## **Identification of key opportunities for optimising the management of high-risk COPD patients in the UK using the CONQUEST quality standards: an observational longitudinal study**

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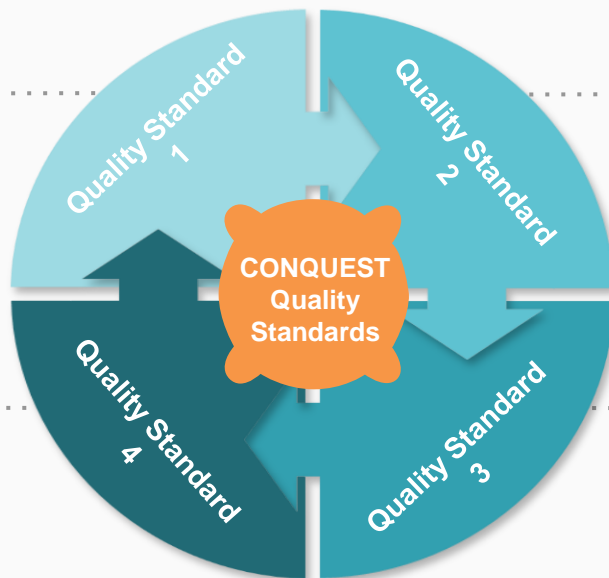
*The Lancet Regional Health – Europe*, 2023. Volume 29, 100619

CONQUEST is conducted by Optimum Patient Care Global and the Observational and Pragmatic Research Institute and is co-funded by Optimum Patient Care Global and AstraZeneca

Annual, cross-sectional descriptive study assessing each country's clinical practices in the management of COPD relative to global & national standards, and the CONQUEST QS

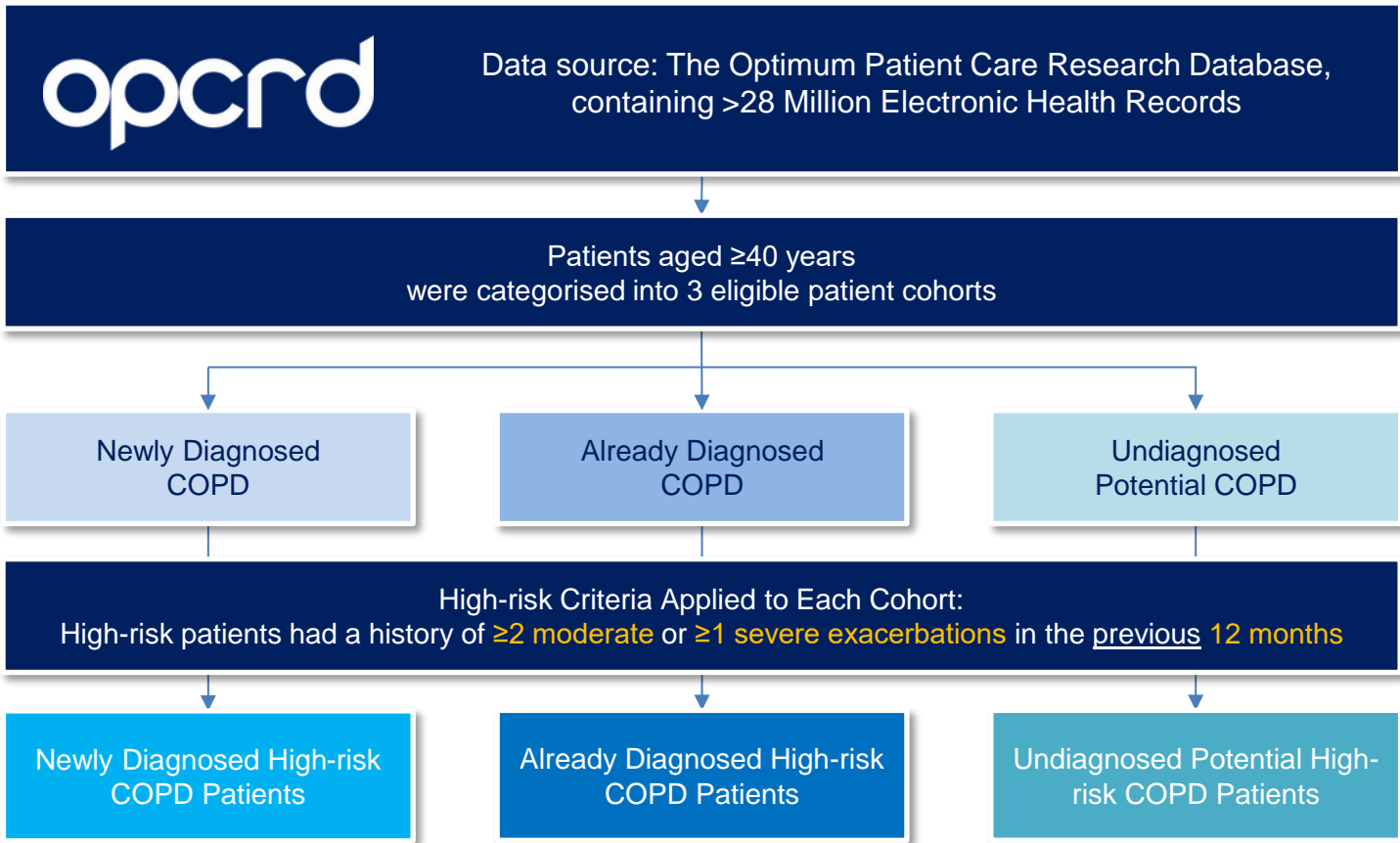
Identification of  
target population

Assessment of disease &  
quantification of future risk



Follow up

Non-pharmacological &  
pharmacological intervention

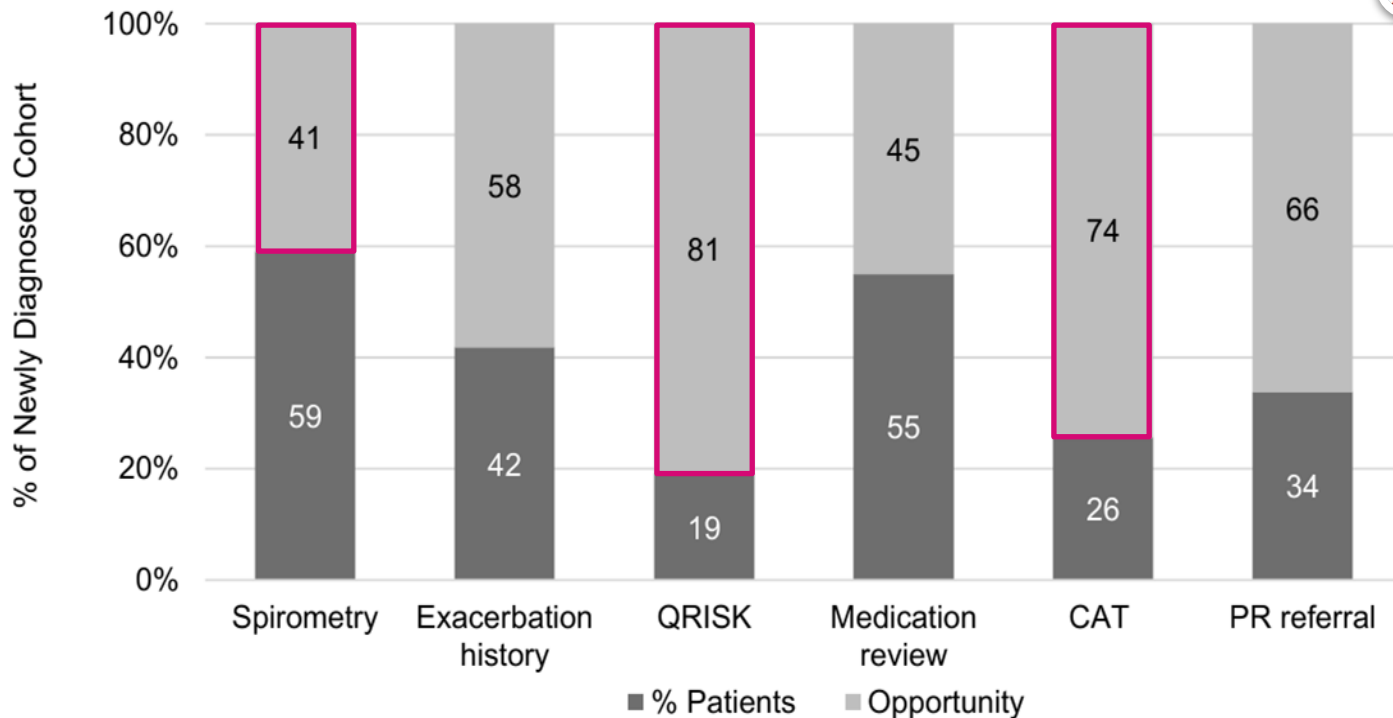


# Key UK Results

**2019 Data for High-risk Patient Cohorts**

## Newly Diagnosed High-risk Cohort

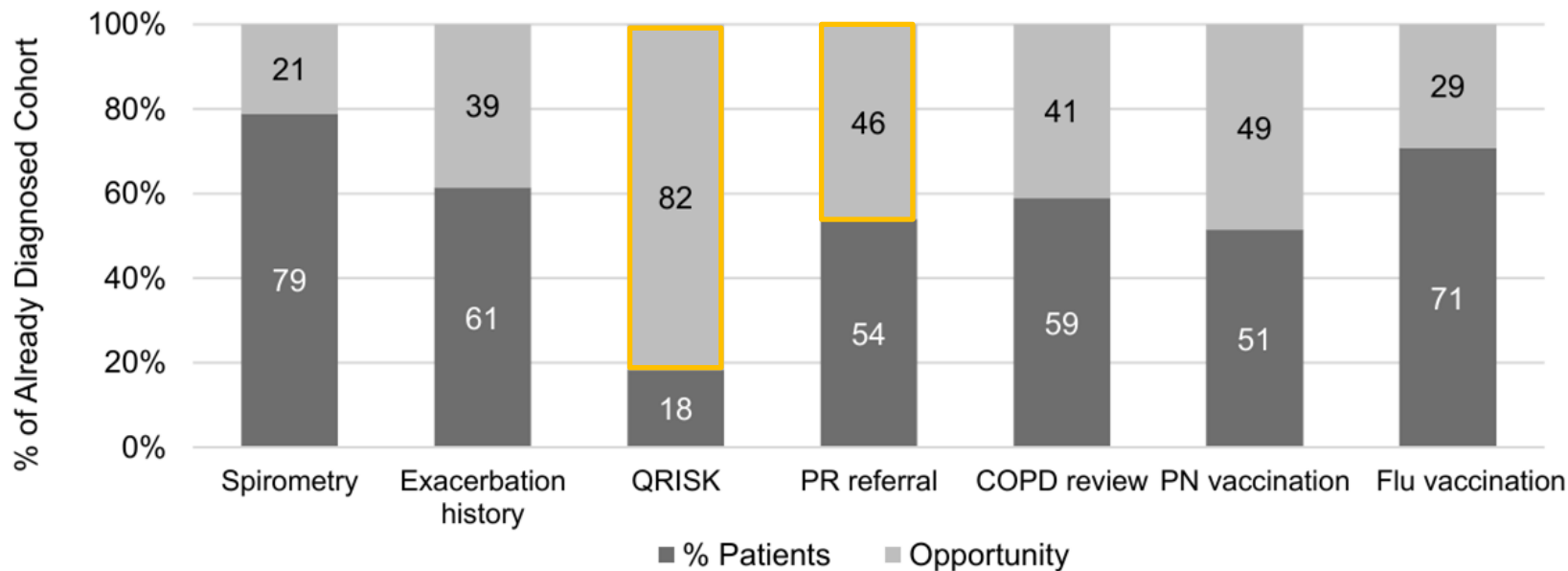
### 2019 Snapshot



- Significant opportunity to conduct **cardiac risk assessment** in 81% of newly diagnosed high-risk patients
- Scope to record **spirometry data** within the EMR for >40% of this newly diagnosed cohort and COPD assessment test (**CAT**) scores in almost 75% of these patients



# Already Diagnosed High-risk Cohort: 2019 Snapshot



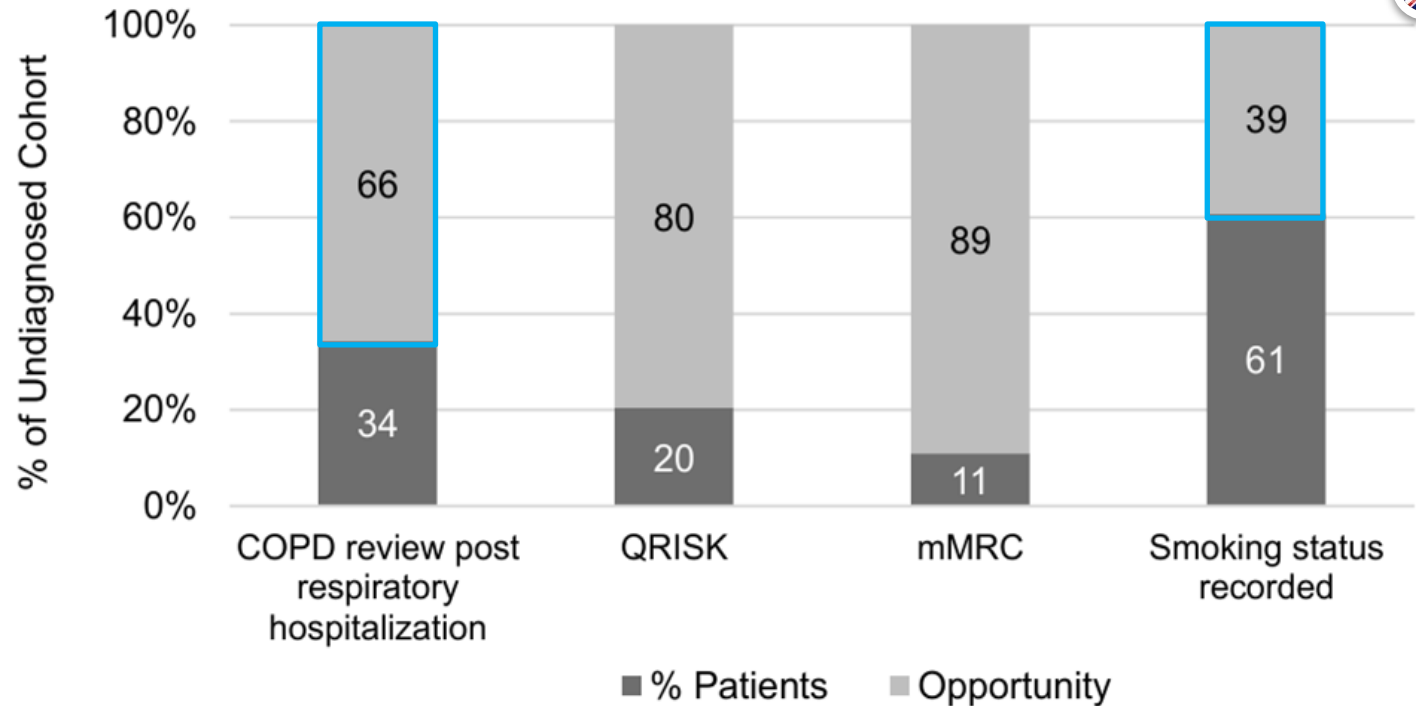
- Significant opportunity to conduct **cardiac risk** assessment in over ¾ of already diagnosed patients
- Scope to offer or refer almost 50% of patients to **Pulmonary Rehabilitation** (PR)

PN: Pneumococcal; QRISK – validated cardiac risk assessment score. Halpin et al. 2023. The Lancet Regional Health – Europe, Volume 29, 100619. <https://doi.org/10.1016/j.lanepe.2023.100619>



## Undiagnosed High-risk Cohort

### 2019 Snapshot



- Significant opportunity to **review** patients within 6 weeks following a respiratory hospitalization
  - Scope to record patient **smoking status** in over 1/3 of patients



# Key UK Take Away Messages & Conclusions



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Identification of key opportunities for optimising the management of high-risk COPD patients in the UK using the CONQUEST quality standards: an observational longitudinal study

1

**Earlier Identification of COPD** in Patients Experiencing Respiratory Flare-ups Pre-Diagnosis

2

Conducting **Cardiac Risk Assessment** in COPD Patients Experiencing Exacerbations who are at High-Risk of Myocardial Infarction and other Cardiac Events

3

Step-up or **Optimization of Treatment** in Patients with High-risk COPD

4

**Pulmonary Rehabilitation** (PR) Referral for Symptomatic Diagnosed Patients

## 4 Top Areas of Opportunity from UK Opportunity Analysis: Patient Identification through to Management Optimisation

1

### Earlier Identification of COPD in Patients Experiencing Respiratory Flare-ups Pre-Diagnosis

- 35% of patients experienced  $\geq 2$  moderate or  $\geq 1$  severe exacerbations many years prior to receiving a diagnosis of COPD.
- The scope for earlier identification (up to 10-years before diagnosis) remains unchanged from that reported by the OPRI group almost a decade ago.

2

### Conducting Cardiac Risk Assessment in COPD Patients Experiencing Exacerbations who are at High-Risk of Myocardial Infarction and other Cardiac Events

- Scope to conduct cardiac risk assessment in  $>80\%$  of both newly and already diagnosed high-risk patients.

3

### Step-up or Optimization of Treatment in Patients with High-risk COPD

- Opportunity to optimize medication for the 7% of diagnosed patients not on any COPD inhaled therapy, and the 17% on single agent maintenance or reliever therapy only.

4

### Pulmonary Rehabilitation (PR) Referral for Symptomatic Diagnosed Patients

- Scope to offer or refer 66% of newly diagnosed patients to PR.
- PR is one of the most effective interventions in COPD to improve symptoms and health related quality of life.



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*For More Information on the Findings of the UK  
Opportunity Analysis Manuscript*

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➤ View the full article here: <https://doi.org/10.1016/j.lanepe.2023.100619>