1.32 The Asthma Control Test is a non-specific measure of asthma control when used in a modern cohort of symptomatic individuals with clinically apparent uncontrolled asthma.

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Background: The Asthma Control Test (ACT) is a widely used patient-reported outcome tool. Co-existing reflux, obesity and anxiety are associated with lower ACT scores in severe asthma, distinct to objective control. We hypothesise that comorbid conditions are associated with a lower ACT, regardless of presence of asthma.

Methodology: Participants with a clinical diagnosis of asthma and persistent respiratory symptoms were recruited to a 12-week study, undergoing simultaneous diagnostic testing & remote monitoring of lung function and adherence. Lung function, T2 status and ACT were recorded at 4 visits over 12 weeks. Results from the first 150 participants are presented. Asthma was diagnosed in 78 subjects, an alternative diagnosis was made in 67, while five withdrew from the study.

Results: No significant difference was found in ACT between those with and without asthma. Significant improvement in ACT was noted during the study in individuals with and without asthma(p<0.05). Multimorbid patients demonstrated the lowest ACT throughout the study, with ACT correlating with number of co-morbidities in those with asthma(p<0.05), and without asthma(p<0.01). No correlation was found between ACT and lung function/T2 status.

Conclusion: ACT score is lower in the presence of comorbidities in both individuals with and without asthma.

Disclosures

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Conflict of Interest: Richard Costello has patents on the use of acoustics to assess inhaler errors and adherence, a method to quantify adherence, predict exacerbations, has received grants from Aerogen and GlaxoSmithKline; and speaker fees for Aerogen, AstraZeneca and GlaxoSmithKline.

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Clinical Trial Registry: NCT05357274 https://clinicaltrials.gov/