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The ACT and the ATAQ are useful surrogates for asthma control in resource-poor countries with inadequate spirometric facilities.

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Abstract

OBJECTIVE: The objective of this study is to determine the utility of simple asthma control questionnaires in assessing the asthma control in our practice setting.

METHODS: The Asthma Control Test (ACT), Asthma Therapy Assessment Questionnaire (ATAQ), and mini Asthma Quality of Life Questionnaire (mini AQLQ) were administered to previously diagnosed asthma patients. Spirometry was performed to obtain the prebronchodilator forced expiratory volume in 1 second (FEV1). The relationship between test scores (ACT and ATAQ) and the FEV1 and mini AQLQ scores, respectively, was explored.

RESULTS: A total of 106 patients (mean age 41 ± 15.3 years, 61 (57.5%) females) participated in the study. The mean ACT score was 17 ± 5.3 and the mean ATAQ score was 1.46 ± 1.34 . There was a significant positive correlation between the ACT score and FEV1% predicted indicating the improvement in asthma control when FEV1% predicted increases (Pearson's correlation = 0.518, $R^2 = 0.268$, $p < .0001$) and a negative correlation between the ATAQ score and FEV1% predicted also indicating the improvement in asthma control when FEV1% predicted increases (Pearson's correlation = -0.516, $R^2 = 0.266$, $p < .0001$). The ACT score was significantly and positively related to the mini AQLQ score signifying an improvement in quality of life with increasing ACT score (Pearson's correlation = 0.691, $R^2 = 0.461$, $p < .0001$). The ATAQ score was significantly and negatively related to the mini AQLQ score indicating an improvement in quality of life with decreasing ATAQ score (Pearson's correlation = -0.654, $R^2 = 0.428$, $p \leq .0001$). The FEV1% predicted and the mini AQLQ score were the only significant determinants of both the ACT score and the ATAQ score.

CONCLUSION: The ACT and ATAQ are the objective and reliable tools in determining asthma control due to their strong correlation with the FEV1 and the asthma-specific health-related quality of life. Use of either questionnaire routinely will identify more patients with poor asthma control even when spirometry services are not readily available.

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