
Severe Asthma Units Accredited by the Spanish Society of Allergology and Clinical Immunology (SEAIC): Experience and Future

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To the Editor:

Severe asthma is currently estimated to affect 3% to 10% of asthmatic adults [1,2] and up to 2.5% of asthmatic children [3]. Management of these patients has a major impact on health care costs and the consumption of resources: previous studies in Spain have estimated the cost of severe asthma at €8554 per patient per year [4].

Therefore, while it is necessary to perform a rigorous and systematic study in patients who present chronic symptoms of severe asthma, the particularities of the disease in some cases require the study to be individualized. These 2 apparently discordant needs have led to the drafting of consensus guidelines advising that severe asthma should be identified and controlled in specialized and preferably multidisciplinary clinics [5,6]. This reality was recently reinforced with the development of specific biological drugs for the treatment of patients with severe asthma based on very well-defined indications and follow-up [7].

In 2015, the Asthma Committee of the Spanish Society of Allergology and Clinical Immunology (SEAIC) addressed the task of establishing the necessary requirements for the accreditation of different levels of care for severe asthma units throughout Spain.

The objectives of this process were to improve the clinical care of patients with severe asthma by unifying criteria of good clinical practice, to structure and facilitate clinical

management, and to promote research into severe asthma. Another fundamental objective was to improve the education of the asthmatic patient: it is known that adequate training increases adherence and disease control [8].

The accreditation levels were Basic Severe Asthma Unit (SAU) and Excellence SAU. The evaluation was based on essential, recommended, and excellence criteria. According to the fulfillment of these criteria, the SAUs were accredited as Basic or Excellent. The criteria required for the accreditation can be consulted at <https://www.seaic.org/profesionales/acreditacion-unidades-de-asma-grave> and are summarized in the Table.

Briefly, the flow of patients to the SAU must come from both outside and inside the hospital. It is important to inform those responsible for specialized and primary care about the existence and function of the SAU, and the flow of asthmatic patients between primary and specialized care and the asthma unit must be bidirectional. The SAU is recommended to work as a multidisciplinary unit in close contact with related services, such as pneumology, ENT, gastroenterology, and psychiatry.

The units must follow the SEAIC guidelines on asthma management, and their service portfolio must be in line with these recommendations.

As specified in the Spanish Guidelines for Asthma Management [6], the diagnosis of this disease requires a respiratory history compatible with the disease and positive results in functional testing. An SAU must have the necessary tools to avoid false diagnoses.

The endo- and phenotype must be taken into consideration when planning treatment in patients with severe asthma, since the therapeutic approach differs in each case. Therefore, the SAU must have the necessary tools to be able to distinguish between endo- and phenotypes of asthma.

Several comorbidities should be considered in patients with severe asthma, and some are relevant because they may result in misattribution of symptoms to asthma. Identifying and evaluating triggers for asthmatic symptoms (exposure to allergens and workplace chemicals, smoking, and frequent infections) is also important. The SAU must have the means to identify both comorbidities and aggravating asthma factors.

Furthermore, the SAU must provide effective education for the asthmatic patient based on a plan including the key skills for self-management of asthma: inhalation technique, medication adherence, a written action plan, and knowledge of the disease. In addition to scheduled care, the SAU must have the means for occasional treatment of patients who experience clinical worsening.

Five years after initiation of the program, 31 SAUs have been accredited (9 Basic and 22 Excellence). The accreditation program includes a periodic audit and a 5-year reaccreditation process.

Table. Nonexhaustive Summary of Criteria for Accreditation of Basic and Excellent Severe Asthma Units

	Basic	Excellent
Accessibility and continuity of care	<ul style="list-style-type: none"> • Defined referral criteria • Priority appointment of patients with uncontrolled asthma • Appointment program with adequate consultation time per patient 	<ul style="list-style-type: none"> • Own service portfolio included in the Allergology Department portfolio • Regular meetings with primary care and specialist doctors in which the service portfolio is presented
Professionals and equipment	<p>At least 1 allergist designated as responsible with accredited training in severe asthma</p> <ul style="list-style-type: none"> • Assigned nurse with experience in complementary tests for asthma • Organization chart with the distribution of functions and responsibilities that is known by the members of the SAU and the Allergology Department • The SAU works as a multidisciplinary unit: there are designated professionals from other specialties • Clinical activity is based on the recommendations on asthma management in the guidelines of the Spanish Society of Allergology and Clinical Immunology. • The SAU has the necessary instruments, furniture, and office equipment for the development of its service portfolio. All this material is inventoried and periodically reviewed • The unit has the necessary means to treat an asthma attack or a severe allergic reaction 	<p>The SAU holds regular meetings with reference specialists</p> <ul style="list-style-type: none"> • The unit uses a database that is updated in each consultation and enables the information to be used • Support of a day hospital to carry out procedures recommended to be performed in a hospital environment
Continuous improvement and research	<p>Clinical research and publications on asthma</p> <ul style="list-style-type: none"> • The SAU has annual information on the health care activity carried out • The unit collaborates in teaching and continuous postgraduate training 	<p>The SAU periodically conducts user satisfaction surveys</p> <ul style="list-style-type: none"> • The unit has a quality and continuous improvement plan • Collaboration in multicenter studies with other SAU
Service portfolio and patient evaluation	<p>The SAU has the means for the diagnosis of asthma and its classification</p> <ul style="list-style-type: none"> • It has the means for an adequate etiological diagnosis • The unit provides training on asthma and inhalation techniques • Administration of biological drugs and assessment of their efficacy and safety 	<p>The SAU has the equipment to carry out specific bronchial provocation tests</p> <ul style="list-style-type: none"> • Desensitization to nonsteroidal anti-inflammatory drugs • Cellularity of sputum • Exercise test • Nasal examination and function • The unit conducts research with support staff

The accreditation program will continue to improve, with a review of the criteria, which will be adapted to the clinical and therapeutic situation of the asthma patient. In addition, network-based research work will be promoted in accredited SAUs. The program will continue to aim to improve clinical care and research in such a complex disease as severe asthma.

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Conflicts of Interest

The authors declare that they have no conflicts of interest.

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