#AskAboutAsthma

Preventing asthma deaths in children:

Asthma + Lung UK's view

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The fight for breath

1_N5 PEOPLE

people in the UK will experience a lung condition

Poor lung health is the 3_{RD} BIGGEST KILLER in the UK

Every

10 SECONDS

someone has an asthma attack

5 MINUTES

someone dies from a lung condition

Children with asthma

- Asthma is one of the most common childhood health conditions, affecting 1 in 11 children
- 1 million children in the UK are receiving treatment for asthma.
- Children are less likely than adults to receive good basic asthma care – less than 25% of children with asthma have a personalised asthma action plan (PAAP).
- Outcomes are worse for children and young people living in deprived areas, following the same trend for adults



Childhood asthma: condition prevalence

- A SABINA Jr study published in 2023 found that asthma prevalence rates in 1-17-yearolds had decreased by 76% between 2008 and 2018.
- Despite this, the exacerbation rate for the 1-17-year-olds has increased by 36% in the same period.
- Every year since 2019/20 the most deprived 10% accounted for 1 in 5 while the least deprived accounted for 1 in 20 of all childhood emergency hospital admissions



Childhood asthma deaths

The National Child Mortality Database's 2024 report on deaths due to asthma and anaphylaxis is a landmark publication.

It found:

- There were 54 child deaths due to asthma between April 2019 and March 2023.
- Deaths were highest among 15–17-year-olds.
- The death rate was four times higher for children from deprived areas.
- SABA overuse is linked to 87% of CYP asthma deaths.
- 12% of CYP deaths studied where the lack of an integrated dose counter on a SABA inhaler was implicated as a contributor to the fatal outcome.

Thinking about teens

Prefrontal Cortex Development:

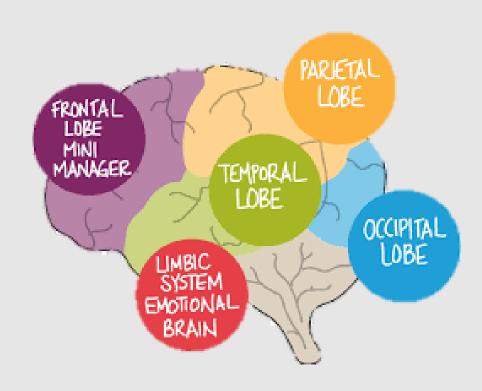
- Still developing through teens into mid-20s
- Controls decision-making, planning, impulse control
- Emotional centres (amygdala) mature earlier → imbalance

Early Years vs Teenage Years:

- Early years: rapid growth, learning basics (language, movement, attachment)
- Teenage years: major rewiring, synaptic pruning, high plasticity

Behavioral Impact:

- Risk-taking and impulsivity
- Peer influence is stronger than adult guidance
- Emotional intensity, but huge learning potential



Lack of basic care

- We know that less than 25% of children and young people receive basic asthma care.
- This contributes to children and their parents or carers relying on inadequate treatment, including empty inhalers.

Lack of follow-up care

 Our 2025 Life with a Lung Condition survey found that 60% of people admitted to emergency care get no follow-up care.

Deprivation and unequal outcomes

 We know that children in the most deprived communities have far worse health outcomes than those in the least deprived.

The perfect storm

Children and young people are at risk because of multiple factors.

Air pollution

- Air pollution can stunt the growth of children's lungs and contribute to up to 43,000 early deaths a year in the UK.
- The risk is everywhere: children playing in 99% of playparks in Britain are breathing air that exceeds World Health Organisation limits on air pollution.

Youth vaping and smoking

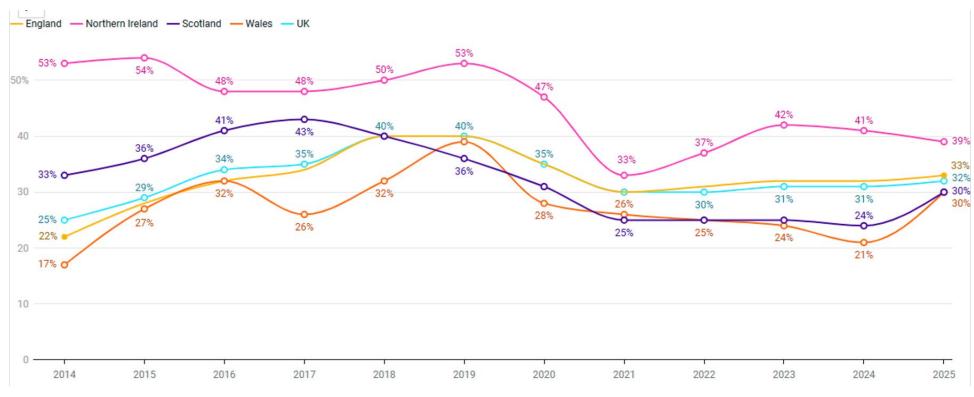
- Vaping and smoking put children and young people at risk.
- Despite targeted legislation, too many children and young people can get their hands on vapes and tobacco products.

An uncertain NHS

- The changing shape of the NHS hampers long-term planning and service provision.
- This impacts the care that people receive.

Lack of basic care

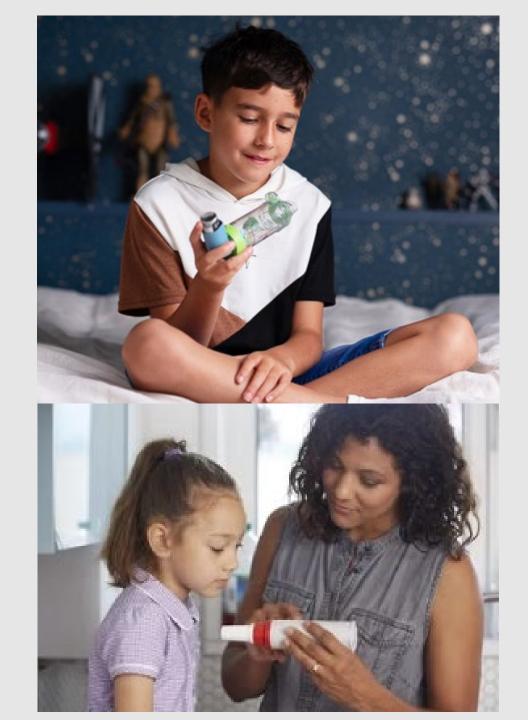
- Basic asthma care is essential to keep people well.
- Despite this, we know that only 32% of people with asthma receive all three elements of basic care.
- This figure is even lower for children and young people, with NHS England reporting that less than 25% of children with asthma have a personalised asthma action plan (PAAP).



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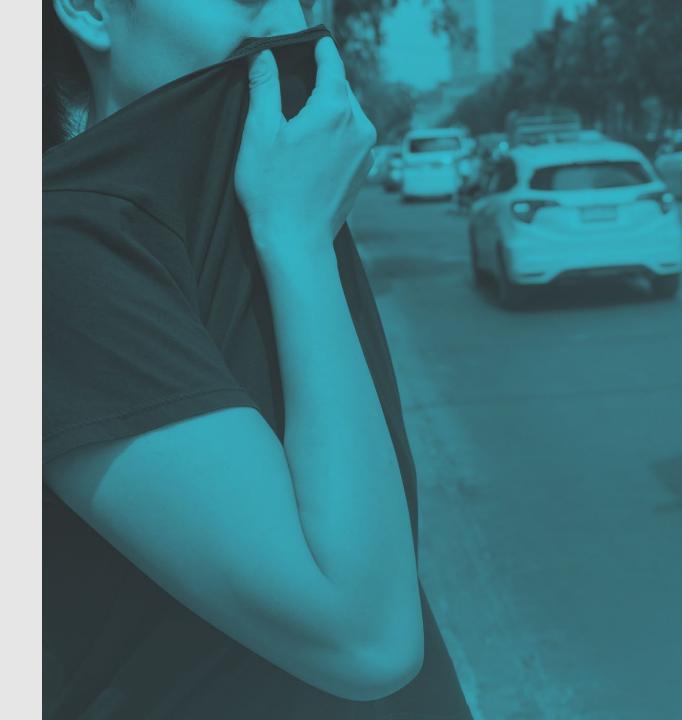
Lack of follow-up care

- Follow-up care is a vital, time-sensitive opportunity to amend a person's care following an emergency admission.
- Survey data from 2025 tells us that 60% of people admitted to hospital have no follow-up care.
- The National Child Mortality Database like NRAD before it – identified multiple examples where a lack of follow-up care led to worsening health outcomes and death.



Air pollution

- Air pollution is the greatest environmental threat to human health
- It causes new lung conditions like lung cancer and worsens existing ones like asthma and (COPD)
- It can stunt the growth of children's lungs and contribute to up to 43,000 early deaths a year in the UK
- The two worst pollutants for health are fine particulate matter (PM2.5) which comes from a range of sources including wood burning and road transport and nitrogen dioxide (NO2) which predominantly comes from the exhaust of polluting vehicles



Deprivation and unequal outcomes

- Half of all children and young people admitted to hospital are from minority and ethnic backgrounds, compared with 28% white children.
- Hospitalisation caused by a life-threatening asthma attack increases by 430% for children from the most deprived areas when returning to school
- The most deprived 10% were 2.5x more likely to be admitted to hospital with an asthma exacerbation compared to the least deprived 10% of children under 5



Youth vaping and smoking

- In 2025, 7% of children aged 11-17 currently vape, and 20% have tried vaping. After rising for years, these rates have plateaued 2023-25.
- 3% of children aged 11-15 currently smoke, and 11% have tried smoking.
- Long term health impacts of vaping are still being researched but we know that it can trigger lung conditions, and causes inflammation in the lungs.
- Vaping is a helpful smoking cessation tool, but this is not relevant to CYP. Upcoming legislation will drive down CYP use of tobacco and vapes.



Uncertain NHS

- NHS England will be absorbed into the Department for Health and Social Care by early 2027.
- Changes to ICBs including mergers were planned for early 2026, but some ICBs may not have the funds to cover the costs of redundancies.
- This uncertainty hampers long-term planning. This means that plans to improve CYP care may not be implemented as they should be.



What are we doing about it?

What are we doing? Health Advice

- Asthma + Lung UK produces child-focused asthma resources.
- These help parents and carers understand their child's condition and treatment.
- Resources like our <u>Child Asthma Action Plan</u> can be found online.
- Further support can be found through our <u>Parent and Carer support groups</u>.

Asthma + Lung UK also have the <u>Healthcare</u>
 <u>Professionals Hub</u> of resources.

I will see my doctor or asthma nurse at least once a year (but more if I need to)

Date my asthma plan was updated:

Date of my next asthma review:

Doctor/asthma nurse contact details:

Parents and carers – get the most from your child's action plan

- Take a photo and keep it on your mobile (and your child's mobile if they have one)
- · Stick a copy on your fridge door
- Share your child's action plan with their school

Learn more about what to do during an asthma attack asthmaandlung.org.uk/child-asthma-attacks

ASTHMA QUESTIONS?

Parents and carers ask our respiratory nurse specialists
Call 0300 222 5800

WhatsApp 07999 377 775 (Monday-Friday, 9am-5pm over 16 only)



CHILD ASTHMA ACTION PLAN

Fill this in with your GP or nurse

Name and date:

What are we doing? Research and innovation

Asthma + Lung UK is a key partner in respiratory insight work, including:

CARE - A clinical trial to test the use of ICSformoterol as a reliever in children aged 4-11 years across a range of asthma severities

SPIROMAC – A clinical trial to test whether using spirometry in children can help guide more personalised treatment (with the aim of being able to safely reduce the amount of steroids children need to take)

We're currently funding 17 projects looking at asthma - around £4.6 million

Four of those are looking at asthma in children or young people - about £2.6 million



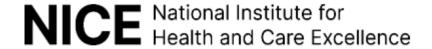
What are we doing? Policy

- We are working to influence the Department for Health and Social Care to introduce a Modern Service Framework for respiratory care, improving service provision for everyone with a respiratory condition.
- We are working to ensure the progression of the Tobacco + Vapes bill through the House of Lords to ensure the next generation will never smoke.
- We are publishing data from our 2025 Life with a Lung Condition survey to shine a light on the abysmal provision of basic asthma care.



What are we doing? Policy

- Supporting the implementation of the NICE/SIGN/BTS asthma guideline.
- We are calling for:
 - Greater focus on FeNO access for CYP asthma diagnosis
 - Clear guidance to support clinicians in prescribing for children and young people with asthma







What are we doing? Clean air

- We campaign for cleaner air for all, with a focus on towns and cities where children live, play and go to school.
- We are calling on governments across the UK to adopt bold air quality targets to protect future generations from the health harms of air pollution.
- Our local campaigning networks bring together parents, schools and children alongside others to call for cleaner air in their areas.
- Our <u>accessible online resources</u> empower people to better understand their condition and learn about the impact of air pollution.



What are we doing? Clean air

- OUR AIR, OUR VOICES is a participatory policy research project, engaging people aged 16-24 in London, especially those disproportionately impacted by air pollution.
- OUR AIR, OUR VOICES aims to co-create fair and effective clean air policies.
- Over the coming months, Asthma + Lung UK
 will continue to work with this group of
 young participants to develop and publish a
 policy report advocating for more inclusive
 government policy on air quality.





THANK YOU

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