

UKRRC Research Priorities 2007 / 2008

| Specific Disease Area | Research questions and opportunities for priority funding |
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| Paediatric influences in chronic adult lung disease | <p>Development of improved phenotypic definition of pre- chronic obstructive pulmonary disease.</p> <p>Longitudinal cohort study of children with repeated measures of individual exposure to cigarette smoke, oxidative stress, lung function and genetic assessments of polymorphisms known to influence oxidative stress.</p> <p>Early intervention studies. Candidate gene studies and whole genome association studies</p> |
| Lung Fibrosis. Idiopathic Pulmonary Fibrosis (IPF) | <p>2x2 trial of best supportive care vs N-acetylcysteine vs warfarin vs N-acetylcysteine & warfarin.</p> <p>Utilise the opportunities for patient / carer contact presented by recruitment into therapeutic trials to acquire high quality, ethically approved data from large cohorts of patients with lung fibrosis which can then be utilised for more basic scientific study.</p> <p>Development of a National Lung Fibrosis Network (with Regional 'Leaders') would be set up to facilitate recruitment into trials of therapy for patients with IPF in the first instance.</p> |
| Evaluating the delivery of respiratory healthcare | <p>Randomised equivalence trial Patients being discharged from hospital following admission for an exacerbation from (a) asthma and (b) COPD would be randomised to specialist follow up care or to primary care follow up, and outcomes would be unscheduled use of healthcare over the subsequent two years (hospital admissions, emergency department attendances, unscheduled primary care attendances) with patient satisfaction scores and quality of life.</p> <p>Develop evidence based guidelines for the frequency of spirometry testing in the management of patients with COPD.</p> |
| Obesity and the paediatric lung | <p>Prospective long-term cohort study involving collection of anthropometric data, physiological and biochemical measurements. Shorter interventional clinical studies to assess benefits of weight reduction/drug intervention.</p> <p>Long-term study of patients with asthma (over a range of severities) to compare usual care plus general dietary advice or usual care plus intensive efforts at weight reduction. The study needs to be of at least 1-year duration, and assess weight loss, the level of treatment required to control asthma symptoms and the number of exacerbation experiences.</p> |
| Asthma | <p>Large scale trial of patients with uncontrolled severe asthma treated for at least a year with either:</p> <ul style="list-style-type: none"> § increased dose of inhaled corticosteroids § addition of leukotriene receptor antagonists § addition of oral theophyllines. |
| Virus infections, respiratory syncytial virus in infancy | <p>Follow-up 2000 infants with RSV disease. Collection of epidemiological data, naso-pharyngeal samples, DNA mouth swabs for genetics investigations, extensive questionnaires at 6, 12 & 36 months. Clinical review at 6 years re. atopic asthma.</p> |

UKRRC Research Priorities – full list from Delphi Exercise September 2007

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| General population | <p>Investigation of factors that may predict expedited decline of lung function in the normal population. Methodology: obtain ethical approval via MREC and then site specific approval for lung function centres around the UK. Each centre would then test subjects (normal and patients) from 25 years old and above on a preset number of occasions over as long a period as possible in order to investigate the decline in lung function and the factors that may influence this.</p> <p>Development of up to date reference values for lung function testing.</p> |
| Asthma | <p>Studies to understand the triggers to better self-management and the types of information that would aid this process.</p> <p>Exploratory and descriptive studies into the psychosocial aspects of life with asthma (across the spectrum of people with asthma) to understand expectations, motivations and barriers to medication and management regimes prescribed by health care professionals.</p> <p>Studies to compare the accuracy of diagnosis in people receiving a diagnosis of asthma according to usual methods and in those where the diagnosis was reached after a full range of tests and procedures, in order to establish the relative value of each test and procedure.</p> <p>Studies to examine different pharmacological approaches to the treatment of severe acute exacerbations and organisation of care following asthma emergencies.</p> |
| Paediatric and adult cystic fibrosis | <p>Neonatal screening for CF will allow early identification of patients, the ability to develop long-term intervention studies and allow much clearer identification of factors responsible.</p> |
| General population | <p>The role of quality assurance in lung function testing.</p> <p>Does spirometry training make a difference?</p> |
| Paediatric suppurative lung disease | <p>Large, multi-centre follow-up of children with community-acquired pneumonia with age-matched controls. Long-term follow-up, identification of those with chronic symptoms, comparison of genetic environmental and biochemical/inflammatory assessments.</p> |