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| **Why was the PREPARE study done?** |

* African American/Black and Hispanic/Latinx persons have nearly twice as many asthma attacks and deaths due to asthma compared to White persons.

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| **What happened in the study?** |

* About 1200 African American/Black and Hispanic/Latinx patients with poorly controlled asthma participated. You were assigned by chance (like rolling the dice) to one of two groups:
1. **PARTICS** (*Patient-Activated Reliever-Triggered Inhaled Corticosteroid*) group were asked to:

**“*take one puff of inhaled corticosteroid (ICS); for each puff of rescue inhaler*” or “*5 puffs of ICS (QVAR) after their nebulizer/machine treatment,”*** and to continue with their usual asthma medicines

* + - ***QVAR was the brand of ICS***

**OR**

1. Usual Care group were asked to continue with their usual asthma medications

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| **What was the result of the study?** |

* The **PARTICS** group had:
	1. Fewer asthma attacks.
	2. Better asthma control.
	3. Better quality of life.
	4. Fewer days lost from work, school, or usual activities.
* To read more about the PREPARE study, visit [WWW.PREPARESTUDY.NET](http://WWW.PREPARESTUDY.NET)

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| **Would you like to use PARTICS?** |

* To use PARTICS, you will need to ask your doctor to prescribe it. See the Provider Information Sheet included here.

Thank you for your participation!

**Dr. Elliot Israel (Principal Investigator) and the PREPARE team**

**Provider Information Sheet**

* The results of the PREPARE study were published in the New England Journal of Medicine:

<https://www.nejm.org/doi/10.1056/NEJMoa2118813>

* The PARTICS group used 1 puff of beclomethasone 80mcg (**QVAR**) with each puff of rescue beta-agonist and 5 puffs of QVAR when they used nebulized beta-agonist.
* **Asthma exacerbations were significantly reduced, asthma control improved, and patients decreased their use of beta-agonists. The average yearly increase of controller medications (accounting for a reduction in maintenance controllers) was only 1.1 canisters a year**.
* You will need to write a prescription for a medium dose inhaled steroid (see table below) with the instructions “**Use 1 puff of [ICS] for every 1 puff of rescue inhaler [e.g., albuterol] and 5 puffs of [ICS] for every 1 rescue nebulizer/machine treatment**”. This prescription should be written in addition to, NOT IN PLACE OF, any of your patient’s regular asthma medications.

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| **Medium Dose Inhaled Corticosteroids (ICS)** |
| **Generic Name of ICS** | **Brand Name of ICS** | **Dose** |
| Beclomethasone | QVAR | 80 mcg |
| Budesonide | Pulmicort Flexhaler | 180 mcg |
| Fluticasone propionate | Flovent HFA | 110 mcg |
| Fluticasone propionate | Diskus | 100 mcg |
| Fluticasone propionate | ArmonAir RespiClick | 113 mcg |
| Mometasone furoate | Asmanex HFA | 200 mcg |
| Mometasone furoate | Twisthaler | 220 mcg |
| Ciclesodine | Alvesco HFA | 160 mcg |
| Fluticasone furoate  | Arnuity Ellipta  | 200 mcg |

* You can share with your patients the link or the QR code to watch the in instructional video that explains how to use PARTICS:

<https://www.youtube.com/watch?v=RgfHNr9uAM4>

* Most insurances should cover this, but in some cases you may need to appeal a denial.
* Note that the use of ICS as part of rescue therapy is now backed by US asthma guidelines (NAEPP EPR4) as well as the GINA international asthma guidelines.

Thanks,

Dr. Elliot Israel (Principal Investigator) and the PREPARE team