Systemic Evaluation of Comorbidities in Severe Asthma Clinic

Comorbidities in severe asthma are common and may frequently interact and/or contribute to poor disease control and mimic symptoms of asthma.

It is important that these comorbidities are identified and managed in a systemic, multidisciplinary manner.

Comorbidity	Assessment tools
Allergic rhinitis, Chronic rhinosinusitis (CRS)	SNOT-22 Questionnaire, Nasoendoscopy by ENT
Vocal Cord Dysfunction (VCD)	Nasoendoscopy by ENT or Bronchoscopy
Gastro-esophageal reflux disease (GERD)	FSSG Questionnaire, Gastroenterology assessment (Endoscopy, pH monitoring, Esophageal manometry)
Obstructive Sleep Apnoea (OSA)	STOP-BANG Score, polysomnography
Obesity	Body Mass Index (BMI)
Dysfunctional breathing	Nijmegen Questionnaire
Anxiety and Depression	HADS Scale
Overlapping obstructive airway diseases (e.g. Chronic obstructive pulmonary disease (COPD), bronchiectasis, bronchiolitis)	Lung function tests, CT thorax
Cardiac disease	ECG, Transthoracic echocardiogram (TTE), CT Coronary Angiogram (CTCA)
Active smoking	Smokerlyser

This is a guide only and reflects current practice at Singapore General Hospital.