



Resource impact statement

Resource impact

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Indicator

IND316. The percentage of patients with asthma on the register aged 12 years or over with a risk factor for poor outcomes who are prescribed maintenance and reliever therapy (MART) in the preceding 12 months.

Resource impact

This indicator aims to improve asthma control and prevent future events such as exacerbations, hospitalisations and deaths. A focus on improved medicines optimisation in the indicator population aims to support better asthma control.

As an example, switching from inhaled corticosteroids (ICS)/long-acting beta-2 agonist (LABA) inhalers to MART is estimated to lead to the following resource impact per 100 people:

- additional costs of around £3,400 per year
- this would be offset by a reduction in savings from exacerbations equivalent to around £1,600 per year
- the net resource impact would therefore be around £1,800 per year.

The potential capacity benefits per 100 people switching are as follows:

- 11 fewer GP/nurse visits per year
- 1 or 2 less A&E attendances per year
- around 1 less hospitalisation per year.

<u>Clinical Practice Research Datalink (CPRD)</u> data indicate that the number of people aged 12 or over who were on the asthma register and had a risk factor for poor outcomes, is around 165 per 10,000 population.