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Effectiveness and cost-effectiveness of a digital social intervention for people with troublesome asthma promoted by primary care clinicians (AD-HOC)

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'A connected asthma system' that supports people throughout their 'asthma journey'

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AD HOC – developing self-management skills

Mediating variables

"just having someone to talk to, who understands your condition can sometimes be all that is required to relieve anxiety and potentially avoid an exacerbation."
PPI - NIHR application

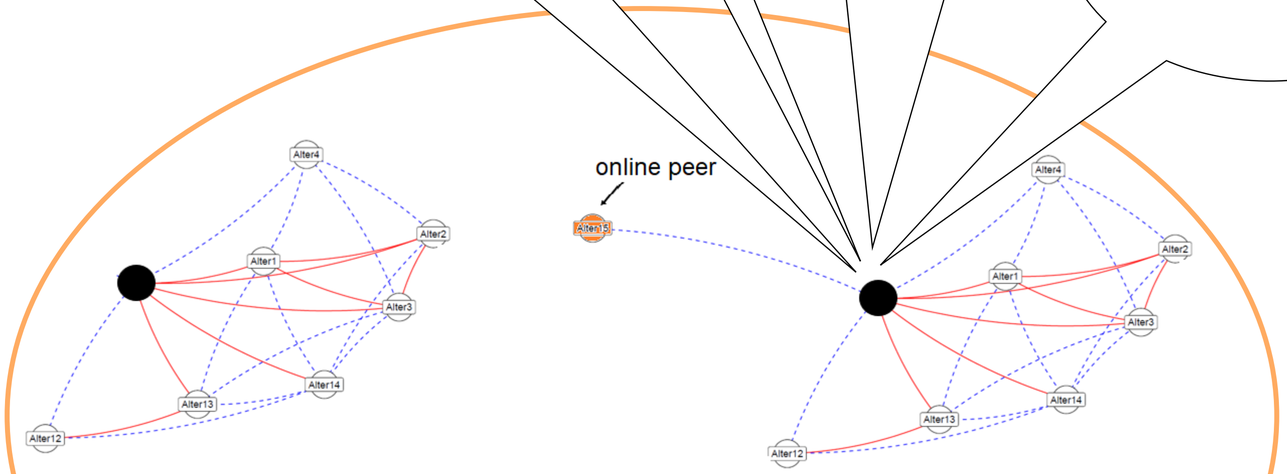
"To get validation"
De Simoni et al. JMIR 2020

"many people find comfort and support in such communities that cannot be offered by family members and/or friends that have not experienced the day-to-day living of conditions".

"To learn from others who actually know what it can be like and to learn from their experiences…"

Intervention

Intervention components	Proposed mediating variables
1. Recommendation by health professionals (HCPs) to join online communities	• Acquisition of norms and values of OHC engagement through HCPs
2. OHC engagement	• **Augmenting social network** • Providing timely, relevant and reliable **information** & advice with empathy • Addressing **health concerns** • Reinforcing **help-seeking behaviours** • Decreasing **barriers to care** • Supporting **effective coping** • Promoting social comparison • **Modelling good self-management** behaviours



Tool for quantitative social network assessment

network size	density	constraint	effect size
7	0.7	46.7	4.0
8	0.5	40.4	5.2

Trial outcomes

Study outcomes

ACT Score

- GAD-7
- PHQ-8
- Self-efficacy
- Asthma Quality of Life Questionnaire (AQLQ)
- EQ5D-5L
- Primary and secondary care service use
- Number of exacerbations
- Asthma medication adherence
- Social mapping tool measures
- OHC engagement metrics data: amount of engagement (number of days, hours/day etc.), number of logins, number of likes, time spent on pages, votes on polls, pageviews.

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Thank you!

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