Physiotherapy Breathing Retraining for Asthma: A Randomized Controlled Trial
The Lancet Respiratory Medicine Volume 6, Issue 1, January 2018, Pages 19-28

Setting the scene:
To assess the effectiveness of a digital self-guided breathing retraining intervention.

What did they do?
In this randomized, patients from 34 general practices were recruited. Eligibility criteria for patients with asthma were broad, comprising a physician diagnosis of asthma, age of 16–70 years, receipt of at least one anti-asthma medication in the previous year, and impaired asthma-related quality of life (Asthma Quality of Life Questionnaire [AQLQ] score of <5·5), three face-to-face breathing retraining sessions, or standard care, in a 2:1:2 ratio, for 12 months. The primary outcome was the AQLQ score in the intention-to-treat population at 12 months. The trial was powered to show equivalence between the two active intervention groups, and superiority of both intervention groups over usual care. Secondary outcomes included patient-reported and physiological measures of asthma control, patient acceptability, and health-care costs.

Takeaway message:
Breathing retraining programmes improve quality of life in patients with incompletely controlled asthma despite having little effect on lung function or airway inflammation. Such programmes can be delivered conveniently and cost-effectively as a self-guided digital audio-visual programme, so might also reduce health-care costs.