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Ministry of Defence

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Dear

Thank you for your email of 17 August 2020 requesting the following information:

"The number of currently serving UK armed forces personnel, by trade, service and regular or reserve status with a code in their electronic medical record for asthma; of which how many had a current prescription for an inhaler. A current prescription for an inhaler is defined as a prescription issued within the previous 12 months."

I am treating your correspondence as a request for information under the Freedom of Information Act 2000.

A search for the information has now been completed within the Ministry of Defence, and I can confirm that information in scope of your request is held. Some of the information falls within the scope of the absolute exemption provided for at section 40 (personnel data) of the FOI Act and has been withheld.

Section 40(2) has been applied to some of the information to protect personal information as governed by the Data Protection Act 2018 and GDPR. In line with JSP200 Statistics Disclosure Guidance, numbers fewer than five have been suppressed to reduce the possible inadvertent disclosure of individual identities; secondary suppression has been applied so numbers cannot be derived. Section 40 is an absolute exemption and there is therefore no requirement to consider the public interest in making a decision to withhold the information.

As at 1 July 2020, **14,328** UK armed forces personnel had a Read code for asthma entered in their electronic medical record (**Table 1**). Of these, **2,367** had a current prescription for an inhaler. An inhaler prescription was considered current if it was prescribed within the previous 12 months.

Table 1: UK armed forces personnel<sup>1</sup> with an asthma Read code by service and regular/reserve, numbers

1 July 2020

Service	All	Regular	Reserve
All	14,328	11,301	3,027
Royal Navy <sup>2</sup>	2,156	1,904	252
Army	10,492	7,913	2,579
RAF	1,680	1,484	196

Source: DMICP and JPA

Please see the annex for **Tables 2** to **4** which provide the numbers of personnel with a Read code for asthma entered in their electronic medical record, by service and trade. This information is also presented by branch for the Royal Navy (**Table 2**), arm/service for the army (**Table 3**), and branch/trade

<sup>&</sup>lt;sup>1</sup> Includes trained and untrained regular and reservist personnel.

<sup>&</sup>lt;sup>2</sup> Royal Navy includes Royal Navy and Royal Marines personnel.

group for the RAF (**Table 4**) to assist with the interpretation of the information provided. Trades are presented as recorded in the Joint Personnel Administration system (JPA) which is the system used by the UK armed forces to deal with matters of pay, leave and other personnel administrative tasks.

Under Section 16 (Advice and Assistance) you may find it useful to note the following:

Personnel include all UK armed forces regular and reservist personnel. This does not include entitled or non-entitled civilians, foreign service or non-UK military. This response relates to all personnel who were in service as at 1 July 2020.

Reservist personnel were included, however, please note that the majority of reservist personnel receive their primary medical care from the NHS. Any personnel who were only seen by the NHS were not included in the figures presented for the number of personnel with a Read code entered into their military medical record.

Information on asthma and inhalers was derived from the Defence Medical Information Capability Programme (DMICP). DMICP has a centralised data warehouse of Read coded information. It is the source of electronic, integrated healthcare records for primary healthcare and some MOD specialist care providers from which searches can be run.

The following Read codes were used to identify personnel with asthma:

14B4	H/O: asthma	H331z	Intrinsic asthma NOS
H33	Asthma	H332	Mixed asthma
H330	Extrinsic (atopic) asthma	H333	Acute exacerbation of asthma
H3300	Extrinsic asthma without status asthmaticus	H334	Brittle asthma
H3300-1	Hay fever with asthma	H335	Chronic asthma with fixed airflow obstruction
H3301	Extrinsic asthma with status asthmaticus	H33z	Asthma unspecified
H330-1	Allergic asthma	H33z0	Status asthmaticus NOS
H3301-1	Extrinsic asthma with asthma attack	H33z0-1	Severe asthma attack
H330-2	Childhood asthma	H33z1	Asthma attack
H330-3	Hay fever with asthma	H33z-1	Hyperreactive airways disease
H330-4	Pollen asthma	H33z1-1	Asthma attack NOS
H330-99	Extrinsic asthma - atopy	H33z2	Late-onset asthma
H330z	Extrinsic asthma NOS	H33zz	Asthma NOS
H331	Intrinsic asthma	H33zz-1	Exercise induced asthma
H33-1	Bronchial asthma	H33zz-2	Allergic asthma NEC
H3310	Intrinsic asthma without status asthmaticus	H33zz-3	Allergic bronchitis NEC Asthma-chronic obstructive pulmonary disease
H3311	Intrinsic asthma with status asthmaticus	НЗВ	overlap syndrome
H331-1	Late onset asthma	TRIQQOC1	Occupational asthma
H3311-1	Intrinsic asthma with asthma attack		

The following drug names and brands were used to identify prescriptions for an inhaler:

Budesonide	Fluticasone Propionate And Azelastine	Qvar 50
Budesonide And Formoterol	Fluticasone Propionate And Salmeterol	Qvar 50 Autohaler
Clenil Modulite	Fobumix Easyhaler	Qvar Easi-Breathe
Duoresp Spiromax	Formoterol	Salamol
Flixotide	Fostair	Salamol Easi-Breathe
Flixotide Evohaler	Fostair Nexthaler	Salbutamol
Fluticasone And Formoterol	Montelukast Sodium	Symbicort
Fluticasone Furoate	Qvar 100	Ventolin
Fluticasone Furoate And Vilanterol	Qvar 100 Autohaler	Ventolin Evohaler
Fluticasone Propionate		

Please note that if information was entered as free text in the patient record then it was not available in the DMICP data warehouse and was not retrieved using the search for Read codes.

DMICP is a live data source and is subject to change. Date of extract 20 August 2020.

Joint Personnel Administration (JPA) is the system used by the UK armed forces to deal with matters of pay, leave and other personnel administrative tasks. It is the most accurate source for demographic information for UK armed forces personnel and was used to gather information on a person's service, regular/reserve status and trade. Trade is recorded differently within JPA across the three services, and to assist with interpretation of the information provided, trade has also been displayed by service-specific groupings.

Would you like to be added to our contact list, so that we can inform you about updates to our statistical publications in the UK armed forces and consult you if we are thinking of making changes? You can subscribe to updates by emailing: <a href="mailto:Analysis-Health-PQ-FOI@mod.gov.uk">Analysis-Health-PQ-FOI@mod.gov.uk</a>.

If you have any queries regarding the content of this letter, please contact this office in the first instance.

If you wish to complain about the handling of your request, or the content of this response, you can request an independent internal review by contacting the Information Rights Compliance team, Ground Floor, MOD Main Building, Whitehall, SW1A 2HB (e-mail <a href="CIO-FOI-IR@mod.gov.uk">CIO-FOI-IR@mod.gov.uk</a>). Please note that any request for an internal review should be made within 40 working days of the date of this response.

If you remain dissatisfied following an internal review, you may raise your complaint directly to the Information Commissioner under the provisions of Section 50 of the Freedom of Information Act. Please note that the Information Commissioner will not normally investigate your case until the MOD internal review process has been completed. The Information Commissioner can be contacted at: Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF. Further details of the role and powers of the Information Commissioner can be found on the Commissioner's website at <a href="https://ico.org.uk/">https://ico.org.uk/</a>.

I hope this is helpful.

Yours sincerely

Defence Statistics Health