

GOING UPSTREAM on Asthma

Toward an Ontario Chronic Disease Strategy

ACT EARLIER. IMPROVE OUTCOMES. STRENGTHEN ONTARIO'S SYSTEM.

Nearly 2.5 million Ontarians live with asthma¹ – up to half are not well controlled.



Asthma is a **chronic, inflammatory disease** that can worsen suddenly and is often poorly managed despite available treatments.



There is currently no cure – but with proper management **most asthma can be controlled at the primary care level**



Ontario saw over 28,000 emergency department visits and 13,000 hospitalizations for asthma in 2022/23²



Asthma hospitalization rates have risen **45% since 2021**, exceeding pre-pandemic levels³



Over **90 Ontarians die** from asthma every year.² Ontario Health considers every one of those deaths preventable



Costs reach **\$1.8B annually in Ontario**,⁴ driven by avoidable acute care use

Asthma is a manageable disease – but lack of access to early community care is driving avoidable emergency department use.

Acting upstream will:



Improve patient outcomes



Reduce avoidable emergency department visits and hospitalizations



Support Ontario's priorities on access, **system capacity, and sustainability**

Three Actions to Move Asthma Care Upstream



Connect unattached patients to asthma care in the community

Scale services that link patients without a family doctor to respiratory education, navigation, and support (e.g., helplines and community-based models).²



Expand early management in primary care and communities

Embed respiratory educators in primary care and incorporate asthma control tools into future EMR systems to identify and manage uncontrolled asthma earlier. In Ontario primary care, only 15% of asthma patients have ever received a documented control assessment.²



Implement standardised asthma care and referral pathways

Establish clear criteria, timelines, and care pathways to ensure patients receive the right specialist care when asthma is uncontrolled.



Act now.
Learn more at
Asthma Canada:
asthma.ca



Read LSO's vision paper
Going Upstream: Toward an Ontario Chronic Disease Strategy, starting with Diabetes

¹ Canadian Chronic Disease Surveillance System 2025
² Ontario Health, Asthma Quality Standards (Adults; Children and Adolescents), June 2025
³ Ontario Asthma Surveillance Information System (OASIS), ICES, Ontario. Asthma Hospitalization Crude Rates, 1996-2024. Available at: <https://lab.research.sickkids.ca/oasis>
⁴ Smetanin P, Stiff D, Briante C, Ahmad S, Wong L, Ler A. Life and economic impact of lung disease in Ontario: 2011 to 2041. RiskAnalytics on behalf of the Ontario Lung Association; 2011.