

Debate Pack

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By Devyani Gajjar,
Hannah Burnett

Respiratory health

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Summary

A Westminster Hall debate on respiratory health is scheduled for Thursday 14 November 2024. The debate will be led by Jim Shannon MP.

This briefing describes what respiratory conditions are, factors that can affect respiratory health and government activity.

Health policy is devolved. Section one provides information relevant to England. Subsequent sections have materials relating to the United Kingdom.

1 Background

1.1 What are respiratory conditions?

The respiratory system is essential for breathing and includes the nose, throat, larynx, windpipe, lungs and the diaphragm.

Conditions that can affect the respiratory system are wide ranging and can have varying levels of severity. They include:

- asthma, a common lung condition that causes occasional breathing difficulties¹
- chronic obstructive pulmonary disease, a group of lung conditions that cause breathing difficulties²
- cystic fibrosis, an inherited condition that causes sticky mucus to build up in the lungs and digestive system³
- lung cancers
- pulmonary fibrosis, a condition when the lungs become scarred and breathing becomes difficult⁴
- respiratory infections, such as flu, covid, respiratory syncytial virus, pneumonia or tuberculosis
- sleep related breathing disorders, such as [sleep apnoea](#) when breathing stops and starts during sleep⁵

There can be numerous symptoms of respiratory conditions, such as difficulty breathing or coughing, and they vary depending on the specific condition.

The government said in October 2024 that [chronic respiratory diseases are the third biggest contributor](#) to peoples' years of life lost in England. It estimated the annual economic cost to the NHS of asthma and chronic obstructive pulmonary disease to be £3 billion and £1.9 billion, respectively. The government estimated lung conditions to directly cost the NHS in the UK £11 billion annually.

¹ NHS webpage, "[asthma](#)", accessed 8 November 2024

² NHS webpage, "[chronic obstructive pulmonary disease](#)", accessed 8 November 2024

³ NHS webpage, "[cystic fibrosis](#)", accessed 8 November 2024

⁴ NHS webpage, "[Idiopathic pulmonary fibrosis](#)", accessed 8 November 2024

⁵ NHS webpage, "[sleep apnoea](#)", accessed 8 November 2024

1.2

Factors that can affect respiratory health

Air quality

Reports from the Parliamentary Office of Science and Technology (POST) highlight strong evidence that certain individual pollutants and poor [indoor](#) and [outdoor air quality can worsen some existing respiratory illnesses](#), such as asthma and chronic obstructive pulmonary disease.

Lord Darzi's final report on the independent investigation into the NHS highlighted links between clean air improving respiratory health and [urged the government to keep its climate ambitions](#). It said (p95):

Given the global health imperatives, the NHS must stick to its net zero ambitions. There is no trade-off between climate responsibilities and reducing waiting lists. Indeed, often health and climate are mutually reinforcing goals: cleaner air is good for the environment and good for respiratory health.

Cold weather

Many respiratory diseases and lung conditions can be [caused or worsened by cold weather](#). Winter typically sees higher incidence of illnesses such as flu, noroviruses and pneumonia. This can [worsen pressures and capacity issues in the NHS](#). For example, [NHS England reported](#) that the number of people in hospital with flu at the end of December 2023 (an average of 648 patients per day in the week of the 21 December) was four times the figure at the end of November 2023 (160 in the week of 26 November).

A report published in September 2024 by the British Medical Association highlighted various measures to reduce the impact of respiratory illnesses on NHS pressures over winter 2024, including:⁶

- making sure frontline staff have access to sufficient and appropriate respiratory protective equipment
- promoting responsible public health policies, such as vaccine uptake and public messaging and education of the risk of covid
- improving ventilation

⁶ The British Medical Association, "[Weathering the storm: vital actions to minimise pressure on UK health services this winter](#)", 18 September 2024

Smoking

Smoking can worsen respiratory health. [Data from NHS digital](#) reports that in 2022/2023, 16% of all hospital admissions for respiratory diseases in people aged 35 and over were estimated to be attributed to smoking. The [Library briefing on smoking statistics](#) contains more statistics.

[This collection of Library briefings](#) discuss in further detail the effect of tobacco on health, government proposals and stakeholder opinions.

Occupational chemicals and particles

Certain jobs, such as those in manufacturing, baking and agriculture, put people at repeated long-term exposure to chemicals and particles that can cause lung problems.⁷ For example, the Health and Safety Executive, the national regulator for workplace health and safety, lists jobs with the highest rates of asthma caused or worsened by work environments to include bakers, vehicle spray painters and solderers.⁸

Deprivation

Disadvantaged groups and areas of social deprivation can face higher risks of respiratory disease.⁹ Various reports have highlighted how more deprived communities have higher incidence of smoking rates¹⁰, exposure to higher levels of air pollution¹¹, poor housing conditions¹² and exposure to occupational chemicals and dust¹³.

1.3

Government activity

The [2019 NHS Long Term Plan has various milestones related to respiratory health](#), including:

- goals to make England a “smoke-free society” and help support people to quit (paragraph 2.9)
- reducing air pollution from all sources (2.21)
- reducing health inequalities and addressing variations in care (2.23)

⁷ John Hopkins Medicine website, “[Occupational Lung Diseases](#)”, accessed 8 November 2024

⁸ Health and Safety Executive website, “[Your trade](#)”, accessed 8 November 2024

⁹ NHS England website, “[Respiratory disease](#)”, accessed 8 November 2024

¹⁰ Office for National Statistics, “[Likelihood of smoking four times higher in England’s most deprived areas than least deprived](#)”, 14 March 2018

¹¹ University of York, “[Deprived communities in England experience higher emissions of air pollution](#)”, 22 August 2023

¹² Parliamentary Office of Science and Technology, “[Indoor Air Quality](#)”, 26 September 2023

¹³ The King’s Fund, “[What are health inequalities?](#)”, 17 June 2022

- extending health checks for lung cancer risks (3.56)
- improving treatment and support for those with respiratory disease (3.82 to 3.88).

In May 2022, the government published [guidance on respiratory disease prevention](#) for healthcare professionals. Recommended actions for healthcare professionals and managers in this guidance include:

- understanding risk factors, at risk populations and symptoms of respiratory illness
- implementing best practice guidelines around diagnosis and management of people with respiratory conditions
- referring patients to specialist services where appropriate
- promoting uptake of the flu and pneumonia vaccinations among eligible groups

The Department of Health and Social Care published a [Major conditions strategy: case for change and our strategic framework](#) in August 2023, which covers six conditions (respiratory diseases, cancer, heart disease, musculoskeletal disorders, mental ill-health and dementia). A final major conditions strategy was not published before the general election was called in May 2024.

The new Labour government is currently working on a new 10-year health plan. When asked in October 2024 [if respiratory health will be central to its plans](#), the government said:

The 10-Year Health Plan will consider the change needed to meet the three health mission goals: a fairer system where everyone lives well for longer; a National Health Service that is there when people need it; and fewer lives lost to the biggest killers. We will carefully be considering policies with input from the public, patients, health staff, and our stakeholders as we develop the plan.

On 5 November 2024, the government announced plans to use cutting-edge technology and data to create a real-time surveillance system to [monitor the threat of future pandemics and respiratory infections](#) in partnership with various organisations. It said this technology would enhance “the capacity for the NHS to determine new and emerging pathogens causing severe acute respiratory infections” which “will improve the detection and emergence of infections”.

The National Institute for Health and Social Care has published [guidance documents for a range of respiratory conditions](#) for healthcare professionals and the public.

2 Parliamentary material

2.1 Parliamentary questions

[Air Pollution: Schools](#)

30 October 2024 | UIN 10723

Asked by: Mary Glindon

To ask the Secretary of State for Health and Social Care, pursuant to the answer of 22 October 2024 to Question 9455 on Air Pollution: Poverty, if he will take steps to reduce the number of schools in England that are in areas exceeding World Health Organisation guidelines for fine particulate matter (PM2.5) concentrations.

Answering member: Andrew Gwynne | Department of Health and Social Care

The Government is determined to improve air quality and protect children from the harms of pollution and is committed to meeting the legal targets for air quality, including the targets recently set under the Environment Act 2021. The Department of Health and Social Care is working across Government to achieve this, including with the Department for Environment Food and Rural Affairs on their Clean Air Strategy to reduce emissions and reduce harms associated with air pollution.

Local air quality is the responsibility of local authorities, who should prepare air quality action plans to ensure the level of pollutants is reduced, if it is not compliant with relevant limits. Local authorities are responsible for monitoring air quality in their areas and will decide where to undertake their monitoring, which may be around schools. The Government will continue to work with local authorities to support their work on improving air quality. Active Travel England and the Department for Transport are working on guidance for local authorities to help them implement School Streets vehicle access restrictions effectively.

[Air Pollution: Poverty](#)

22 October 2024 | UIN 9455

Asked by: Mary Glindon

To ask the Secretary of State for Health and Social Care, what assessment his Department has made of the impact of air pollution on neighbourhoods with high levels of poverty.

Answering member: Andrew Gwynne | Department of Health and Social Care

Although air pollution can be harmful to everyone, some people are more affected because they live in a polluted area, are exposed to higher levels of air pollution in their day-to-day lives, or are more susceptible to health problems caused by air pollution, such as cardiovascular and respiratory diseases, lung cancer, and a shortened life expectancy.

There is clear evidence that people with a low income are affected by air pollution in a number of different ways. The disadvantages that come about as a result of poor income add up, with deprived populations who are more likely to be in poor health and are at greater risk from air pollution and its adverse health impacts. These inequalities can affect people throughout their lives, from the prenatal stage through to old age, particularly as deprived communities often have limited opportunities to improve their environment. Further information on pollution is available at the following link:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1124738/chief-medical-officers-annual-report-air-pollution-dec-2022.pdf

A 2021 study by the UK Health Security Agency found that one-third of the schools in England were in areas exceeding World Health Organisation guidelines for fine particulate matter (PM2.5) concentrations. Schools with higher annual mean PM2.5 concentrations are more likely to have a high deprived pupil intake and be in neighbourhoods with high levels of child income deprivation compounding existing socioeconomic disadvantages.

Respiratory Diseases

17 October 2024 | UIN 7261

Asked by: Dr Beccy Cooper

To ask the Secretary of State for Health and Social Care, if he will make an assessment of the potential merits of ensuring people with lung conditions are given an annual (a) review and (b) medication check.

Answering member: Andrew Gwynne | Department of Health and Social Care

Annual reviews, including reviews of medication, play a key role in the ongoing management of people with respiratory diseases, such as asthma and chronic obstructive pulmonary disorder (COPD). They are recommended by the National Institute for Health and Care Excellence (NICE), playing a core part in its guidance for the diagnosis and management of asthma and COPD. Further information on the NICE's guidance for the diagnosis and management asthma and COPD is available respectively at the following two links:

<https://www.nice.org.uk/guidance/ng80>

<https://www.nice.org.uk/guidance/ng115>

The majority of patients with COPD and asthma are managed by general practitioners and members of the primary care team, with onward referrals to secondary care where required, and so the provision of annual reviews is incentivised in primary care through the Quality and Outcomes Framework. There are specific indicators for annual reviews for both COPD and asthma within this framework, specifically sections COPD010 and AST007. The Quality and outcomes framework guidance for 2024/25 is available at the following link:

<https://www.england.nhs.uk/publication/quality-and-outcomes-framework-guidance-for-2024-25/>

The NICE is currently reviewing its guideline for the diagnosis, monitoring, and management of chronic asthma, and an updated version is due to be published in November 2024. Based on the draft that has been published for consultation, we anticipate annual reviews will remain a recommended core component of the ongoing management of people with asthma.

[Respiratory Diseases](#)

11 October 2024 | UIN 6728

Asked by: James Naish

To ask the Secretary of State for Health and Social Care, what steps he plans to take to improve the (a) availability and (b) quality of data on respiratory health.

Answering member: Andrew Gwynne | Department of Health and Social Care

Chronic respiratory diseases are the third biggest contributor to Years of Life Lost in England. The annual economic burden of asthma and chronic obstructive pulmonary disease on the National Health Service in the United Kingdom is estimated as £3 billion and £1.9 billion, respectively. In total, all lung conditions, including lung cancer, directly cost the NHS in the UK £11 billion annually. Further information is available at the following link:

<https://www.england.nhs.uk/ourwork/prevention/secondary-prevention/respiratory-high-impact-interventions/>

NHS England is working alongside a range of organisations with an interest in respiratory data, including Asthma and Lung UK, Health Data Research UK, and the British Thoracic Society, and have developed a collective vision for the future of high-quality respiratory data. The vision is due to be finalised in October 2024 and is supported by a working group of key stakeholders to take forward.

[Smoking: Health Services](#)

10 October 2024 | UIN 7545

Asked by: Mary Kelly Foy

To ask the Secretary of State for Health and Social Care, if he will make an assessment of the potential merits of introducing of a polluter pays levy on tobacco company to fund smoking cessation services; and if he will make it his policy to increase funding for (a) the swap-to-stop scheme, (b) tobacco control enforcement and (c) the national smoke-free pregnancy incentive scheme.

Answering member: Andrew Gwynne | Department of Health and Social Care

The Government is funding a broad package of measures to tackle the harm caused by smoking, including additional funding for local authority Stop Smoking Services, more enforcement activity around illegal tobacco and vape products, as well as recently launching a national smoke-free pregnancy incentive programme.

On the issue of a polluter pays levy on the tobacco industry, the Chancellor makes decisions on tax policy at fiscal events in the context of public finances. The Government keeps all taxes under review during its yearly Budget process.

[Respiratory Diseases: Health Services](#)

11 September 2024 | UIN 4452

Asked by: Sarah Green

To ask the Secretary of State for Health and Social Care, if he will make an assessment of the accessibility of treatment for terminal lung condition idiopathic pulmonary fibrosis on the NHS.

Answering member: Andrew Gwynne | Department of Health and Social Care

NHS England is committed to improving outcomes for people with respiratory conditions, particularly through early and accurate diagnosis, which is a priority area under the NHS Long Term Plan.

A key component of an early and accurate diagnosis for a number of respiratory conditions, including pulmonary fibrosis, is the provision of quality assured spirometry. Additional funding has been made available to systems in 2021/22, 2022/23, 2023/24 and 2024/25.

NHS England has worked with a range of partners, including Asthma and Lung UK, the British Thoracic Society, the Association for Respiratory Technology and Physiology, and clinical network leads, to develop a package for systems containing the information and support required to help increase

the number of people receiving early and accurate diagnosis for respiratory disease.

NHS England is investing in additional diagnostic capacity for respiratory pathways as part of the £2.3 billion 2021 Spending Review capital investment in diagnostics. Community Diagnostic Centres are being established to deliver additional, digitally connected diagnostic capacity in England, providing patients with a coordinated set of diagnostic tests in the community, in as few visits as possible, enabling an accurate and fast diagnosis on a range of clinical pathways, including people with chronic respiratory disease.

2.2

Debates

[Air Pollution](#)

7 December 2023 | House of Commons | 742 c464

[Lung Cancer Screening](#)

26 June 2023 | House of Commons | 735 cc52-62

[COP26 and Air Pollution](#)

2 November 2021 | Westminster Hall | 702 cc330WH-344WH

3 Press and stakeholder material

The following is a selection of news and media articles relevant to this debate.

Please note: the Library is not responsible for either the views or the accuracy of external content.

3.1 Press articles

[Thousands of lung cancer cases detected in lorry clinics](#)

BBC News

8 November 2024

[Asthma: Scientists find new cause of lung damage](#)

BBC News

5 April 2024

[Lung disease patients waiting up to 10 years for diagnosis in poorer areas of England](#)

The Guardian

24 March 2024

[GPs' lack of asthma testing is abysmal, charity says](#)

BBC News

26 September 2023

3.2 Stakeholder material

[Fewer children admitted to hospital for asthma as air quality improves](#)

Nuffield Trust

27 September 2024

[Healthcare-associated infections](#)

Nuffield Trust

29 August 2024

[NHS Confederation responds to urgent and emergency care situation report](#)

NHS Confederation

30 November 2023

[Saving Your Breath: How better lung health benefits us all](#)

Asthma + Lung UK

September 2023

[Protecting and Promoting Respiratory Health in Northern Ireland](#)

Northern Ireland Chest Heart & Stroke

2023

[Respiratory disease: a suitable case for integrated care?](#)

NHS Confederation

22 October 2018

[Out in the cold: lung disease, the hidden driver of NHS winter pressure](#)

British Lung Foundation (now Asthma + Lung UK)

December 2017

4

Press releases and government publications

[Chronic respiratory diseases](#)

World Health Organisation

[Respiratory conditions](#)

National Institute for Health and Care Excellence

[Respiratory disease](#)

NHS England

[UK to create world-first 'early warning system' for pandemics](#)

Gov.uk

5 November 2024

[Respiratory disease: applying All Our Health](#)

Public Health England

19 May 2022

[NHS to speed up diagnosis and treatment of respiratory and heart conditions](#)

NHS England

3 August 2023

[Quality statement for respiratory disease](#)

Welsh Government

30 November 2022

[Respiratory care - action plan: 2021 to 2026](#)

Scottish Government

24 March 2021

[Respiratory infections](#)

Public Health Agency (Northern Ireland)

5 Further reading

5.1 House of Commons Library

- [NHS readiness for winter 2024/25](#), 28 October 2024
- [Asbestos in the workplace](#), 14 April 2023
- [Health inequalities: Cold or damp homes](#), 16 February 2023
- [Improving asthma outcomes in the UK](#), 3 December 2021
- [Support for people with chronic obstructive pulmonary disease](#), 15 November 2021

5.2 Parliamentary Office of Science and Technology (POST)

- [Indoor Air Quality](#), 26 September 2023
- [Urban outdoor air quality](#), 23 January 2023

5.3 House of Lords Library

- [Respiratory syncytial virus and its impact on the NHS](#), 6 June 2022

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