# Feasibility of a Mobile Health App for Air Quality Forecasting to Support Asthma Self-Management: A Pilot Randomised Controlled Trial in Malaysia

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### Background

- Outdoor air pollution, particularly haze, is common in Malaysia.
- Increased air pollutants  $\rightarrow$  higher risk of asthma exacerbation.

### **Methods**

### The intervention: AQA app

A mobile app to provide 48-hour air quality forecast data using the **Atmospheric** Dispersion **Modelling System** (ADMS) model

### Aim of study:

Assess feasibility of the app and its impact on asthma control

### Study design

Pilot RCT

### RCT design

Parallel two-arm trial - 1:1 block randomization (block size 2)

#### Site

· Single centre; public primary care clinic in Malaysia

#### Sample

Adult patients with asthma; reported exacerbations with haze

#### Groups

- Intervention: AQA app + usual care (n=30)
- Control: Usual care only (n=30)

#### Assessments

- Asthma control (GINA tool) at baseline, 1, 3, 6, 12 months.
- Secondary: Exacerbations, emergency visits, medication use

Week 1

- Usability: System Usability Scale (SUS).
- · App utility: Dashboard analytics

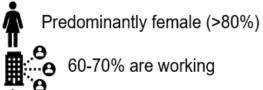
## Results at 1-month follow up (n=30 per arm)

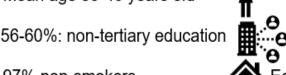
#### Similar baseline characteristics for both arms (p>0.05)



Mean age 39-40 years old

97% non-smokers





Equal exposure to indoor air pollutants (e.g. mosquito coils, joss-sticks)

## **Challenges:**

Technical issues: Auto log offs from app, forecast data interruptions Low utility issues → qualitative study to evaluate this at the end of trial

## No significant difference in asthma control (p = 0.637). Mean SUS score: **70.1** → indicates good usability.

#### Utility reducing at 1-month follow-up

Frequency of using the app functions (air quality forecast and map)

—AQ Forecast —AQ Map

Week 3

Week 4

Week 2

# Conclusion

App shows promise in usability.

Ensuring smooth data flow is key to optimal app performance.

Investigating the low utility issue may improve future app design.