

Asthma Q&A's

Which drugs can be used in pregnancy & lactation?

♦While none of the drugs used to treat asthma have been "proven safe", there is less experience with the newer agents (e.g. LABAs and LTRAs); B2-agonists, inhaled corticosteroids, ipratropium, and cromolyn may be used. Patients requiring systemic glucocorticoids are at higher risk for complications (↓birth wt, pre-eclampsia, etc.).

Is there any scientific evidence to support the use of alternative therapies in the treatment of asthma?

♦The recent Canadian consensus conference report stated there is "no objective evidence of any benefit, apart from placebo effect, from ...unconventional therapies such as acupuncture, chiropractic, homeopathy, naturopathy, osteopathy, and herbal remedies." ¹

Is there a role for allergy shots in asthma?

♦Immunotherapy ("allergy shots") is generally not recommended and should not be used in place of adequate environmental measures (Sorry, the cat has to go!!!). It may be considered if asthma is inadequately controlled by avoidance of environmental allergens and pharmacotherapy. Response rates are highly variable but it will likely be of greatest possible benefit in patients in whom specific allergens have been identified as asthma triggers and where those allergens can not be avoided.² The major concern is that asthmatics are often more allergic and tend to be at higher risk for adverse allergic reactions to the injections.³

Can you make your own aerochamber?

♦Funny you should ask. "Home-made" aerochambers from 500ml pop bottles, etc. have been made and studied. In some cases, these have been shown to work as well as the real thing; however, as you can imagine, there may be significant variability in how they are made and thus how well they work.

How does Airomir[®] compare to other salbutamol inhalers?

♦It is CFC free and considered interchangeable with other salbutamol inhalers in Saskatchewan; however, it has a rounder shaped mouthpiece and will not fit older models of the Aerochamber[®] as easily as other salbutamol inhaler products. The Aerochamber[®] has recently been redesigned with a more flexible port to improve insertion of rounder MDI mouthpieces. The Space Chamber[®] also allows for a better fit with Airomir[®] and other rounder shaped MDIs.

What about the beta 2 agonist controversy?

♦Overuse of SABAs has been associated with an increase in mortality but re-analysis of earlier studies, as well as more recent ones, suggest increased beta-2 agonist use is an **indicator of asthma deterioration rather than a causative factor**.⁴ Currently there is no convincing evidence that regular use of long-acting beta agonists worsens asthma or increases risk of death.^{5,6}

¹ Boulet LP et al. Canadian Asthma Consensus Report 1999. CMAJ 1999; 161 (11 Suppl), S39.

² Boulet LP et al. Canadian Asthma Consensus Report 1999. CMAJ 1999; 161 (11 Suppl), S23.

³ Cockcroft, D. Personal communication.

⁴ Suissa S et al. Patterns of increasing beta agonist use and risk of fatal and near-fatal asthma. Eur Respir J 1994; 7: 1602-9.

⁵ NHLBI. National Asthma Education and Prevention Program. Expert panel report 2 - guidelines for diagnosis and management of asthma. NIH Publications No. 97-4051 Bethesda MD. US Dept of Health and Human Services, 997.

⁶ Nelson H. Beta adrenergic bronchodilators. New Engl J Med 1995; 333: 499-506.