

LONG ACTING BRONCHO-DILATORS AND ASTHMA

FORADIL AND SEREVENT

Recently the FDA issued stern warnings regarding the use of long acting broncho-dilators such as *Foradil* and *Serevent* to control asthma. These warnings indicate that patients using either of these medications alone to control asthma symptoms are at greater risk of death from asthma. The information leading to the FDA's response is not new or unique. Studies have indicated that chronic use of short-acting bronchodilators such as albuteral has similar effects.

When used in combination with an inhaled corticosteroid, medications such as Foradil and Serevent have long been considered safe and effective. These medications augment the effectiveness of the inhaled corticosteroid. By adding one of these inhalers we are able to greatly increase the benefits of the inhaled corticosteroid without greatly increasing the dose of the steroid. The problems with these medications arise when they are used alone, without an inhaled corticosteroid, to control asthma.

We have never prescribed either Foradil or Serevent alone to control asthma and have never accepted this practice as an appropriate treatment for asthma control. The accepted standard guidelines for treating moderate to severe asthma recommends the addition of a long acting bronchodilator such as Foradil or Serevent when asthma symptoms are not fully controlled by an inhaled corticosteroid alone. This has been and remains the standard of care for the treatment of moderate to severe asthma based on medical research and clinical experience of asthma experts throughout the world.

Inhaled corticosteroids are the preferred treatment for persistent asthma. Asthma is an inflammatory disease of the lungs and treatment of persistent asthma requires the use of an anti-inflammatory medication for control. When low to moderate doses of inhaled corticosteroid alone are not adequate, then the addition of a long acting broncho-dilator such as Foradil or Serevent remains the preferred choice. When symptoms of asthma require the use of a short-acting rescue medication such as albuteral more than twice per week, or when asthma symptoms cause night time cough more than twice per month, then an inhaled corticosteroid is the preferred medication in most cases. The continued use of a short-acting broncho-dilator on a regular basis can have the same effects as using a long-acting bronchodilator alone to control asthma symptoms.

Advair consists of an inhaled corticosteroid (fluticasone also known as Flovent) and Serevent. Symbicort consists of an inhaled corticosteroid (budesonide known as Pulmicort) and Foradil. Since these medications “blend together” an inhaled corticosteroid with a long-acting bronchodilator, they are still considered a safe and effective medication for the control of moderate to severe persistent asthma.

In summary:

The FDA has warned that the use of a long acting bronchodilator such as Foradil or Serevent is not safe when used alone to control asthma and may lead to an increased risk of death.

We have never prescribed long-acting bronchodilators alone for the the control of asthma symptoms and have never considered this a safe or effective practice.

When used in combination with an inhaled corticosteroid, these medications are still considered safe and effective.

When low to moderate doses of an inhaled corticosteroid alone fail to adequately control asthma symptoms, the addition of a long-acting bronchodilator such as Foradil or Serevent remains a safe and effective treatment.

Short-acting bronchodilators such as albuteral should never be used alone to control persistent asthma. Albuteral is a safe and effective *rescue* medication.

Advair and Symbicort remain a safe and effective treatment for moderate to severe persistent asthma.