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## **Breathing easy: combination asthma inhalers**

If your patients' asthma is not well controlled by inhaled corticosteroids, they may benefit from the addition of a long-acting beta<sub>2</sub> agonist, according to Dr Christopher Worsnop from the Austin Hospital, Victoria in the latest issue of *Australian Prescriber*. Combination therapy is recommended for all people with severe asthma.

Control of airway inflammation is commonly maintained with a low dose of inhaled corticosteroids. However, long-term use of high doses of corticosteroids can lead to systemic adverse effects. Dr Worsnop highlights that once your patient's asthma is controlled, a reduction in the corticosteroid dose should be considered.

Some patients find it difficult to reduce their corticosteroids. It may become possible for them to reduce the dose if they start a long-acting beta<sub>2</sub> agonist. The addition of a long-acting beta<sub>2</sub> agonist may keep the patient's asthma under control with a lower dose of steroids.

Patients who need a corticosteroid and a long-acting beta<sub>2</sub> agonist to control their asthma may find a combination inhaler more convenient. Combining the two types of drug in one inhaler does not significantly alter their activity.

Patients need to be aware that if they use a combination inhaler to relieve bronchospasm, they will inadvertently receive extra doses of corticosteroid.

Also in the April issue is an article on the choice of treatment for high blood pressure.

For the complete article visit the *Australian Prescriber* website [www.australianprescriber.com](http://www.australianprescriber.com). *Australian Prescriber* is an independent review providing critical commentary on therapeutic topics for health professionals. It is published by National Prescribing Service (NPS), an independent, non-profit organisation funded by the Australian Government Department of Health and Ageing. NPS works to improve the health of all Australians through Quality Use of Medicines.

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