

Asthma: Commonly used medication shows no clear benefits in children

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There are no clear benefits to using long-acting beta2-agonists (LABAs) for treatment of asthma in children, a new study concludes. In an overview of recent Cochrane reviews, Child Health Field researchers report that there is currently insufficient evidence to suggest the drugs, which are recommended to relieve the symptoms of asthma, offer any additional benefit to conventional preventative medications.

LABAs such as salmeterol and formoterol can reduce the symptoms of asthma for periods of up to 12 hours and are often given to relax the airways overnight or after exercise. Currently, LABAs are recommended as add-on therapies to inhaled corticosteroids (ICS), which are taken on a daily basis to help control symptoms over a longer term. Since LABAs have previously been shown to increase the risk of life-threatening adverse effects in adults when used as the only drug (monotherapy), they are not recommended as the main treatment agent in asthma in any age groups.

Now researchers say that although giving LABAs to children can improve lung function, their use does not generally provide any further benefit over regular ICS therapy. "We found no evidence to suggest that LABA should be used alone or in combination with ICS in the majority of young asthma sufferers. ICS should remain the therapy of choice," says Amy Plint, who led the study at the University of Ottawa in Canada.

The overview included four previous reviews of trials in children above the age of four. Together, the trials showed that ICS in combination with

LABAs significantly improved lung function compared to ICS combined with placebos. LABAs did not, however, reduce severity of asthma symptoms as measured by hospital admissions or the need for steroid medication.

The researchers say more long-term trials are needed to establish the effectiveness of LABAs in children. However, they think that the drugs may improve lung function in the most severe cases. "We should not rule out combination therapy as a treatment option in children with poorly controlled asthma despite compliance with moderate dose ICS agents," says Plint.

Source: Wiley

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