

ATS issues conditional guidance for persistent infantile wheezing

August 5 2016



(HealthDay)—A committee sanctioned by the American Thoracic

Society has developed conditional guidelines for the diagnostic evaluation of infants with recurrent or persistent wheezing, but more research is needed. The guidelines were published in the Aug. 1 issue of the *American Journal of Respiratory and Critical Care Medicine*.

Clement L. Ren, M.D., from the Riley Hospital for Children in Indianapolis, and other members of the [committee](#) developed guidelines for evaluation of infants with recurrent or persistent wheezing that is not relieved or prevented by standard therapies.

The authors found that few studies addressed the clinical questions, and the studies that did constituted very low quality evidence, being made up almost exclusively of case reports with risk of selection bias, indirect patient populations, and imprecise estimates. The committee made conditional recommendations to perform bronchoscopic airway survey, bronchoalveolar lavage, esophageal pH monitoring, and a swallowing study. Conditional recommendations were also made against empiric food avoidance, upper gastrointestinal radiography, and gastrointestinal scintigraphy. Additional research was recommended regarding the roles of infant pulmonary function testing and avoidance of food or dietary changes based on allergy testing.

"Although infantile wheezing is very common, there is a paucity of evidence to guide clinicians in selecting diagnostic tests for recurrent or persistent wheezing," the authors write. "Our committee made several conditional recommendations to guide clinicians; however, additional research that measures clinical outcomes is needed to improve our confidence in the effects of various diagnostic interventions and allow advice to be provided with greater confidence."

Several authors disclosed financial ties to the pharmaceutical industry.

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Citation: ATS issues conditional guidance for persistent infantile wheezing (2016, August 5)
retrieved 19 April 2024 from

<https://medicalxpress.com/news/2016-08-ats-issues-conditional-guidance-persistent.html>

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