

■ Allergies And Asthma Linked To Antibiotic Use In Infants

On October 1, 2003, HealthDayNews highlighted research reported at a conference of the European Respiratory Society in Vienna, Austria finds that children who take antibiotics are more likely to develop Allergies and Asthma later in life.

In the study, researchers from the Henry Ford Health System in Michigan examined information from earlier research that followed 448 children from infancy to the age of 7. All the children had taken antibiotics for one reason or another and all had been tested for allergies.

By the age of 7, 38% of them developed allergies to pets, ragweed, grass and dust mites. 5% of them had asthma. Children who had taken antibiotics within the first six months of life were 1.5 times more likely to have developed allergies and 2.5 times more likely to develop asthma.

In the past few years, scientists have been coming to the conclusion that human immune systems are more likely to develop the way they are supposed to as long as they are exposed to germs during infancy.

It's felt that antibiotic use in infants may help allergies develop by killing off the normal bacteria in the intestines that are important in proper immune system growth and function. As a result, there is a higher occurrence of allergies.

Acknowledging that the overuse of antibiotics has also been shown to lead to antibiotic-resistant strains of bacteria, Dr. Keoki Williams, researcher and clinical epidemiologist, concludes the findings of this study indicate "there's potentially more than one reason to use antibiotics judiciously in young children."

■ Asthma Medication May Make Asthma Worse

Research reported in the August 2003 issue of the Journal of Clinical Investigation finds that asthma medications such as albuterol, ventolin and salbutamol can actually make the condition worse if taken over long periods of time.

The drugs in question are called beta-agonist drugs and are used in inhalers, nebulizers, tablets, liquid or injections. All have the effect of relaxing the smooth muscle lining of the lungs, allowing for a freer flow air. Short-term the drugs have an immediate effect but it's a common occurrence that the drugs slowly lose their effectiveness if taken long-term.

Previously scientists thought the drugs stopped working because the patient's body became desensitized to the drug.

This study found that over time, the drugs in question cause the lungs to produce an enzyme that causes them to become even more sensitive to conditions that trigger asthma attacks.

■ Oral Steroids No Help For Viral Wheeze In Children

In the November 1, 2003 issue of The Lancet British researchers report that in children with colds who develop a wheeze, oral steroid therapy does not have any effect.

Many doctors routinely prescribe oral steroids if children develop wheezing during the course of a cold or other upper respiratory infection.

In this study, 120 children between one and five who had previously been hospitalized because of a viral wheeze were followed. 51 of the children were given oral steroids and 69 were given a placebo. Parents were asked to keep a diary of their children's daytime and night-time symptoms over a seven day period. At the end of the seven days, the researchers found that symptom diaries of both groups of children were similar.

According to the researchers, oral steroid therapy for viral wheezing needs to be re-evaluated "since there are no clear benefits to balance potential risks."

Acetaminophen Use Linked To Asthma

The April 1, 2004 issue of the American Journal of Respiratory and Critical Care Medicine reports that people taking acetaminophen on a regular basis suffered a greater incidence of adult-onset asthma.

Acetaminophen is the active ingredient in Tylenol and other over-the-counter pain relievers. In the study, 299 patients newly diagnosed with adult-onset asthma were asked about acetaminophen use. 108 used no acetaminophen while 191 used the drug from 1 to more than 22 times per month.

Acetaminophen has been known to produce spasms of the bronchial tubes in the lungs leading to airway restriction and symptoms of asthma.

■ Drug Company Misled FDA, Doctors And Patients About Safety Of Asthma Drug

The health care consumer group Public Citizen published a letter in the October 7, 2005 issue of the British medical journal the Lancet that reports drug maker GlaxoSmithKline misled the U.S. Food and Drug Administration (FDA) by presenting study results showing the popular asthma drug salmeterol was safer than it actually is. The drug is sold under the brand names Serevent and Advair.

In 1996, a 28 week study involving tens of thousands of asthma patients taking either salmeterol or a placebo was begun. That study showed that patients taking the drug salmeterol ran a higher risk of death than the placebo patients but the results of that study were never published. In August 2003, the drug company submitted final study data that included the six months after the study, after the patients quit taking the drug.

By including this post-study information, the apparent dangers of salmeterol were reduced in four critical study outcomes, including asthma-related death.

Upon learning of the suspicious reporting, the FDA has recommended strengthening the warning on the labels of Serevent and Advair but has yet to actually require it.

Epidemiologist Dr. Peter Lurie, deputy director of Public Citizen's Health Research Group says, "the behavior of GlaxoSmithKline in submitting these faulty data is deplorable. Absent greater transparency at the FDA, we will never know how often this kind of self-serving data analysis occurs."

Public Citizen has listed Serevent as a "Do Not Use" drug on their website at www.worstpills.org.

Together, Serevent and Advair were dispensed more than 16.3 million times in U.S. Pharmacies in 2004.