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STERIODS DO NOT HELP WHEEZING KIDS

Steroid drugs, a common treatment for young children prone to wheezing and colds, do not help and may even be harmful, according to new research. Preschoolers in Britain who were hospitalized with a wheezing attack and treated with the steroid prednisolone stayed just as long as other children who were given dummy pills.

In another study, Canadian children who had previous wheezing trouble and who took the steroid fluticasone as a preventive measure showed modest improvement, but the side effect of possible stunted growth outweighed the benefit, researchers said. Both studies were reported in Thursday's New England Journal of Medicine.

"It is disturbing to contemplate how many unnecessary courses of prednisolone have been given over the years, in good faith, because we all assumed that preschool children are little adults," Dr. Andrew Bush of the Royal Brompton Hospital in London wrote in an accompanying editorial.

Wheezing, a high-pitched whistling noise as a person exhales, occurs when air struggles to get through narrowed airways. It's a frightening symptom that often sends parents to emergency rooms, thinking their kids can't breathe.

Hospitals commonly give such children steroids to open up airways. That's a standard treatment for adults and for children who have asthma, but its effectiveness for children with transient wheezing is unknown.

In the British study led by the University of Leicester, 687 children ages 10 months to 5 years who were hospitalized for wheezing were randomly given prednisolone or placebo treatment. There was no significant difference in time spent in the hospital: 11 hours for the drug

group compared with 14 hours for the placebo group.

In the Canadian study, 129 children ages one to six years with a history of wheezing were given either inhaled fluticasone or placebo by their parents at the first sign of an infection.

After ten months, the drug group had milder symptoms and needed fewer repeat medications. But they also had smaller gains in height and weight compared with the placebo group, prompting the researchers to urge against using the drug for prevention purposes until the side effects are better understood.

The study was funded by GlaxoSmithKline PLC, which makes the inhaled asthma medicine Flovent, a brand of fluticasone. Lead author Dr. Francine Ducharme of the University of Montreal reports receiving research grants from Glaxo and other drug makers.

The British research was paid for by the nonprofit Asthma UK. Several authors report receiving fees and support from various drug makers that make asthma medication.

Dr. Bradley Chipps, an allergy specialist in Sacramento, California, said the research "gives us good information that what we've been doing doesn't work."

"It gives us a lead to pursue a safer alternative," said Chipps, who is on the allergy and immunology executive committee of the American Academy of Pediatrics and had no role in the study.

Pediatrician Dr. Sami Bahna of the Louisiana State University Health Sciences Center in Shreveport said wheezing children who do not have asthma will be better served by a wait-and-see approach.

"The majority will do well without intervention," Bahna said.