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Role of the Timed Up (TUG) and Go Test in Patients With COPD

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National asthma programmes effective

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Prevalence and characteristics of asthma in the aquatic disciplines

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A survey of US adult asthma patients and physicians

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Cardiovascular and neuropsychiatric risks of varenicline: A retrospective cohort study

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Chronic sinusitis is a common condition representing 1-2% of total doctor visits, with a significant burden financially and on QOL. Existing methods for effective management were reviewed. The research included 12 meta-analyses, 13 systematic reviews and 4 RCTs. Saline irrigation and topical Corticosteroids improved symptoms. Corticosteroids also improved polyp scores and reduced polyp recurrence after surgery (RR, 0.59). Systemic steroids, Doxycycline and Leukotriene antagonists were effective for patients with polyps. Macrolides improved QOL for patients without polyps. Researchers concluded that saline irrigation and topical corticosteroids were effective first line treatments, while systemic steroids, Doxycycline or Leukotriene antagonists were appropriate for patients with polyps.

Role of the Timed Up (TUG) and Go Test in Patients With COPD

Al Haddad MA et al. *J Cardiopulm Rehabil Prev*. 2015 Sep 22. [Epub ahead of print]

The TUG test measures functional mobility. The authors investigated applicability of TUG tests for COPD patients and correlation with fall history. 119 COPD patients were included, with 58 smoker control patients. TUG test, 6-minute walk distance with BODE score, spirometry and history of falls were assessed. TUG test time was greater in patients: 11.9±3.7 sec. vs controls, 9.5±1.8 sec. TUG was inversely related to 6-minute walk distance in patients ($r = -0.74$). TUG was related to BODE score in patients ($r = 0.53$; $P < .001$), but not spirometry. A ROC analysis (0.77) demonstrated ability for TUG to indicate falls in the past year, as did a TUG of ≥ 12 sec. with 74% sensitivity and specificity. The results support a potential role for the TUG test to be incorporated into community COPD assessment.

National asthma programmes effective

Selroos O et al. *Eur Respir Rev*. 2015 Sep;24(137):474-83.

National/regional asthma programmes including action plans and patient involvement in self-management education can improve asthma clinical outcomes, QoL and costs. The Finnish 1994-2004 programme was linked to increased use of controller drugs, number of patients reimbursed for drugs and decrease in hospitalization days, disability pensions and asthma-related costs. It was the model for other European programmes, with similar positive results so far from Poland, Spain and France. There is also evidence of improved European asthma outcomes including drops in mortality and rises in inhaled steroid use, linked to use of guidelines rather than formal national asthma programmes.

Prevalence and characteristics of asthma in the aquatic disciplines

Mountjoy M et al. *J Allergy Clin Immunol*. 2015 Sep;136(3):588-94.

Despite noted benefits of swimming as a form of exercise, evidence shows that swimming is linked to asthma. The prevalence of asthma in swimmers is high vs participants in other Olympic sports. The study examined Olympic participants (04'-09') and compared the 5 aquatic disciplines to other sport disciplines for prevalence of asthma. Swimming had the highest prevalence, with aquatic endurance disciplines leading non-endurance disciplines. 3 of the 5 swimming disciplines led all Olympic sports in prevalence. Geographic distribution also plays a part and higher prevalence was observed in North America and Europe vs other locales. Results suggest a need for discipline/geographic-specific prevention.

A survey of US adult asthma patients and physicians

Price D et al. World Allergy Organ J. 2015 Sep 10;8(1):26.

Inhaled Asthma meds are the main form of treatment. However, non-adherence is estimated at over 50%, research suggests that non-satisfaction with treatment regimen is the central factor. Researchers set out to examine satisfaction relationship to adherence and outcome in this survey of physicians and their patients. Of 243 patients included, 41% had poorly controlled asthma. More favourable outcomes were linked to patient satisfaction with drug delivery ($P = 0.002$), as well as adherence ($P = 0.049$) and other factors. The conclusion was that higher patient satisfaction is a significant factor in outcome, indicating the importance of tailoring a user-friendly treatment mode.

Cardiovascular and neuropsychiatric risks of varenicline: A retrospective cohort study

Kotz D et al. Lancet Respir Med. 2015 Sep 4.

Varenicline, an effective pharmacotherapy for smoking cessation, has raised concerns regarding potential adverse effects. In this study, data was collected from 753 practices in England. Patients aged 18-100 who received nicotine replacement treatment (NRT), Bupropion or Varenicline, were followed for 6 months and compared to control groups for various cardiac, vascular, psychiatric etc. incidents. Of the 164766 patients included, bupropion/varenicline showed no increased risk of any cardiovascular or neuropsychiatric event compared with NRT. Hazard Ratios in all 5 measured categories were below 1 (range of HRs: 0.56-0.80). Results suggest the opportunity for broader treatment of smoking using Varenicline vs NRT with minimized harmful events vs NRT.