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Word Count:

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MALAYA

Warning: Asthma Dangers

What is Asthma?

Bronchial Asthma is a medical condition that is characterized by bronchial (breathing tube) spasm, precipitated by a variety of factors to which the person is “allergic to.” When exposed to the allergen, usually by inhalation, the patient’s bronchial system abnormally (hyper) reacts to the substance, and bronchospasm ensues, leading to shortness of breath and wheezing.

How prevalent is Asthma?

There are about ten million bronchial Asthma patients in the United States alone, or about 4% of its population. Mathematical extrapolation might suggest that we should have about 1.4 million of asthmatics in the Philippines, but this may not be epidemiologically accurate, since there are many etiologies and other factors involved. Unfortunately, we do not firm statistical data on this.

Are there more asthmatics today?

The statistics in the United States show that from 1980 to 1987, the prevalence of asthma increased by 29%, and from 1970 to 1987, in 17 years, the rate nearly tripled. Death rate from 1980 to 1987 increased 31% from the previous years. Obviously, our more polluted environment does not help.

What causes Asthma?

A variety of inhaled allergens could lead to an asthmatic attack. Some persons react to some of these, and others to other allergens, like viral infection, exercise and even unknown irritants. Somehow, in these persons, their bronchial tree (breathing pipe) is hypersensitive or hyper responsive to a known or unknown allergen, which precipitates the bronchial spasm and asthmatic attack.

What happens when bronchial spasm occurs?

When the patient develops bronchial spasm, the breathing pipe narrows down and the breathing passage becomes so constricted, severely reducing the amount of oxygen that could get into the lungs of the patient. In some very severe cases, it could totally deprive the individual of oxygen and death could follow from

the suffocation. During the asthmatic attacks, some persons may not be able to speak complete sentences and need to pause after each word or two to breathe. The wheezing is due to tightly constricted bronchial tubes.

Can food products be the allergen?

Yes, some food and food products can be the triggering allergens. I lost a fellow cardiac surgeon some years ago, who, while eating in a chinese restaurant in Nice, France, violently reacted to MSG (Mono Sodium Glutamate), commonly known as Vetsin, had bronchial spasm and died. Some individuals with asthma could also hyper react to Sulfites, a popular food preservative, suggested by those who develop an asthmatic attack after eating in a salad bar or drinking beer or red wine.

How about allergies to animals and pets?

Some people are allergic to cats, dogs or horses, to their dander, hair, and develop asthmatic attacks after exposure. A teenage daughter of colleagues of mine was on a field trip with some friends, went to a horses' barn, and had a severe asthmatic attack and died right there and there.

How about physical exertion and stress?

Stress and/or physical exercise appear to precipitate asthmatic attacks in some persons. Others even react to exposure to cigarette smoke or other fumes polluting our environment, changes in temperature, atmospheric pressure and humidity. Psychologic factors, particularly associated with screaming, crying, or hard laughing may trigger an asthmatic attack. This does not mean that asthma was caused by these factors. These are just precipitating irritants. Why some people have bronchial asthma and others in the same family or household do not is still not known.

Could other diseases mimic asthmatic attacks?

Yes. Heart failure and foreign body in the breathing pipe are among conditions that could mimic Bronchial Asthma. This is why medical consultation is very important among people who has shortness of breath or wheezing.

Do children outlive their Bronchial Asthma?

Not all do, but a significant number somehow gets rid of bronchial asthma when they grow up. Some persons do not have any symptom at all, others mild, others more severe. It is important for children having shortness of breath, with or without wheezing, to be seen by a Pediatrician without delay for proper diagnosis and therapy. The treatment could help prevent complications. Obviously, adults having this symptom should consult their physician immediately also. Staging the

severity of bronchial asthma is very important in its proper treatment, since each stage warrants a specific form of therapy.

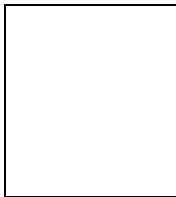
Why should aspirin be avoided by asthmatic patients?

For some persons known to have asthma, taking aspirin (especially among those with polyp tumors in their nose) precipitate bronchial spasm. Those hyper reacting to aspirin could also do the same for Indomethacin (a gout medication) or to NSAIDS (arthritis medications).

What is the best management for bronchial asthma?

First and foremost is education of the patient, including young children. The more the person knows about bronchial asthma, precipitating factors, what to watch out for, what to do when an attacks ensues, etc., the better. Prevention is obviously key in minimizing attacks, so knowing what allergens trigger bronchial spasm is essential. There are many drugs in the market that are used to prevent an attack or to treat bronchial asthmatic attacks, depending on the stage of severity. Most of the medications cause relaxation of the spastic bronchial airways to open the air passages for easier breathing. Nowadays, there are many new drugs and inhalers, which are very convenient to use. Pulmonologists, subspecialists in lung diseases, are consulted by other physicians for those cases that are more resistant to conventional treatment.

Our readers are invited to send in their medical questions for possible inclusion in future issues of this column. Mail your questions to the author at Heart to Heart Talk, c/o Cebu Cardiovascular Center, Cebu Doctors' Hospital, Osmeña Boulevard, Cebu City, Philippines, or e-mail them to heart@chua.net



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