BRONCHIAL ASTHMA

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PRINCIPLES OF DIAGNOSIS AND TREATMENT

Fourth Edition

Edited by

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PREFACE

*“They asked if the sneezes came after the wheezes,
or if the first sneeze came first.”*

It has been nearly 25 years since the first edition of this textbook was published. During that time, we have witnessed an enormous improvement in the understanding of the basic pathophysiology of asthma and, more importantly, better treatment options. However, and with regret, the incidence and prevalence of asthma during this 25 year period increased significantly. Recent studies from the NIH highlight this point and illustrate that despite improved care and diagnosis, mortality continues to rise. In fact, asthma remains the most common chronic childhood illness and is among the most common chronic adult diseases. Despite improved medications, increased awareness, and a better understanding of the pathophysiology of this disease, mortality and morbidity continue to rise. Both international and national consensus positions have been published that offer guidance on treatment approaches. The importance of the primary care physician and provider cannot be overestimated in the appropriate diagnosis and management of this disease. The management options in asthma are changing rapidly with the advent of new drugs and approaches. The recent introduction of the leukotriene inhibitors has added an entirely new class of anti-inflammatory agents in the treatment of asthma. The potential of even newer approaches, including cellular modulation of the asthma patient with specific anti-IgE antibodies, opens up exciting possible treatments.

Bronchial Asthma: Principles of Diagnosis and Treatment is directed to primary care providers. As in earlier editions, we have tried to inform them of the changing approaches to diagnosis and management of asthma, and serve as a standard resource. Thus, we have provided a review of basic definitions, the mechanisms, and the medications of asthma. A definitive emphasis has been given to the management and recognition of asthma, and such special problems as asthma in the pregnant patient, in the pediatric patient, and the patient with exercise-induced asthma. Allergic broncho-pulmonary aspergillosis, alternative/herbal medications, environmental and occupational effects, food additives, recreational drug use, and other topics are reviewed with the primary care physician in mind. Although much emphasis is placed on diagnosis and treatment, the psychological, social, and legal aspects of asthma are also addressed. We also have not ignored the adult onset asthmatic, where the data suggest that the frequency of this problem is also increasing. We believe that an understanding of these areas are key for complete and comprehensive care of the asthma patient.

We hope that this review of the spectrum of cellular to psychological/social aspects of asthma provides the primary care provider, in the same way it has provided us, with a framework or guide to the day to day interactions with asthma patients. In this volume, we hope we have prepared a practical, but spirited, review that will help patients, as well as provide algorithms for physicians. Patients need to be individualized, and the care

between people is rarely the same. However, our goal was to provide a basic framework upon which good treatment options will follow.

We wish to thank the faculty at the University of California at Davis for reading and critiquing our manuscripts. As in any book, there will be errors and omissions; any faults will be our own. Finally, we especially wish to thank Nikki Phipps for her steadfast diligence in helping in the organization of *Bronchial Asthma: Principles of Diagnosis and Treatment*.

M. Eric Gershwin, MD
Timothy E. Albertson, MD, PhD

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