

CONFIRM SEVERE AIRWAY OBSTRUCTION BEFORE CONSIDERING AN INHALER FOR COPD

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None of the expensive medications currently available for COPD alter progression of the disease (subsequent loss of FEV1). GOLD guidelines suggest that long-acting bronchodilator inhalers (such as salmeterol, formoterol, and tiotropium) are indicated in stage II COPD, when the FEV1 is 50-80% of predicted. Combination inhalers (ICS+LABA) are too often prescribed by primary care practitioners for smokers with unmeasured lung function and without substantial dyspnea. The patients often believe that this is a cure for their COPD and that they can avoid all the trouble of trying to quit smoking. A comprehensive 2005 report from the U.S. Agency for Healthcare Research and Quality (AHRQ) states that there is no evidence that any inhaled medication improves any COPD outcome measures when lung function is above 50% predicted.