
POSSIBILITIES OF COMBINED THERAPY TO IMPROVE CONTROL AND TREATMENT EFFECTIVENESS IN PATIENTS WITH BRONCHIAL ASTHMA

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Abstract

Aim: to determine the efficacy and safety of the administration of the combined medicine fluticasone propionate + salmeterol (Airtec) in patients with bronchial asthma.

Materials and methods: Airtec was administered according to previous dose of ICS and a control level as control therapy (for patients who did not receive basic control therapy at the time of inclusion) or instead of the previous control agents. The study used three doses of the drug (fluticasone/salmeterol): 50/25 μg ; 125/25 μg ; 250/25 μg . 9 (3.7 \pm 1.2) % of patients received Airtec 50/25 μg , 61 (24.8 \pm 2.8) % – Airtec 125/25 μg ; 176 (71.5 \pm 2.9) % – Airtec 250/25 μg . 246 patients (equal to men and women), aged 19 to 81 years (mean age 44.9 years) were interviewed and examined. All patients were observed at the primary stage of providing medical care with a diagnosis of persistent bronchial asthma.

Results: the investigated regimen of therapy early and significantly improved the control of the disease. The total ACT score in 1 month in the group as a whole was (16,9 \pm 0,2) points (partial control), in 3 months – (22,4 \pm 0,2) points (good control). The average score of the test of control of BA (ACQ-7) in a month was (1,59 \pm 0,7), after 3 months – (0,80 \pm 0,05) – good control. Clinical improvement was accompanied by improvement of bronchial passivity by the results of spirometry. Already in the first month of the study treatment, a clinically significant (460 ml) and statistically significant improvement in bronchial passivity were detected, which was even more pronounced at the end of the 3 months of treatment. When transferring patients with controlled asthma from their therapies to the Airtec in equivalent doses, control of their disease did not deteriorate, as evidenced by the results of the asthma control and AST questionnaire. All the time, AST and ACQ account was in the range of good control. Participation in the study greatly improved the patient's attractiveness to therapy.

Conclusion: the combination of the Airtec containing inhaled corticosteroid fluticasone propionate and the long acting β_2 -agonist, salmeterol, is an effective preparation for the control of moderate and severe bronchial asthma, is easy to use and safe in keeping with established doses. That is, the constant administration of control therapy in a properly adjusted dose quickly and effectively improves control of the disease. **Regarding the adherence to treatment in this subgroup,** the planned monitoring of patients with the control of the appointment of doctors significantly improved the complications of patients, which had a positive effect on improving the effectiveness of treatment.

Key words: asthma, therapy, combined treatment.

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