# Oregon's Drug Review: Evidence on Inhaled Corticosteroids

Inhaled corticosteroids (ICS) treat asthma and emphysema (COPD). Asthma guidelines recommend daily treatment with ICS to prevent relapse and chronic symptoms. ICS's are approved as additional therapy for COPD. ICS's are preferable to oral corticosteroids because their anti-inflammatory effect is directed to the bronchial tubes which reduces the risk of unwanted side effects.

## Which Drugs Were Included In This Review?

This review looked at the following ICS's:

- beclomethasone (QVAR, Vanceril)
- budesonide
   (Pulmicort Turbohaler,
   (Pulmicort Respules)

- flunisolide (Aerobid)
- fluticasone (Flovent, Flovent Discus)
- triamcinolone (Azmacort)

#### What Do These Drugs Have In Common?

- In asthma patients all ICS's are similar.
- In COPD patients the evidence is poor that ICS's are effective
- Not enough data exists to show differences in side effects by age, ethnicity, race, or sex.

## What Are the Key Differences Among These Drugs?

- Fluticasone causes less reduction on short-term growth in children.
- The number of inhalations and differences in the inhaler may effect patient compliance with treatment.
- Budesonide is the only ICS allowed in pregnancy

## Ask Your Health Care Practitioner During Your Next Visit:

- □ Am I taking the most effective drug for my condition?
- □ Are alternative drugs available that are equally effective?
- □ Are alternatives drugs available that are effective, but less costly?
- □ Is there a generic available for my brand name drug?
- □ Will this drug interact with other medications I take?