

SYSTEMATIC REVIEW

Pharmacology, Group-9





GROUP MEMBERS

NAIDU JAYA SURYA

JADHAV SARIKA SUHAS

ANANDA LOKESH

MEHTA AAGAM







Table of contents

01
INTRODUCTION

02
REVIEW OF
LITERATURE

03
RESEARCH METHODS

04
RESULTS AND
DISCUSSION

05
SUMMARY &
CONCLUSION

06
RECOMMENDATIONS



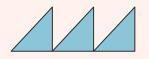


Understanding the clinical outcomes of using inhalers comparing to nebulizers for treatment of asthma patient with Hypertension.



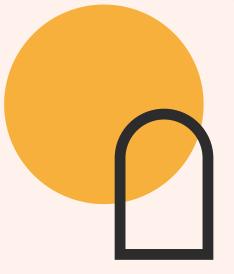
PICO

- P- Asthmatic Patient with hypertension.
- I Inhalers.
- C- Nebulizers.
- O- Clinical outcome in asthma management.
- → In patients with asthma, what are the clinical outcomes of using inhalers compare to nebulizers for treatment?
- ★ Patient / Problem, Intervention, Comparison & Outcome



ABSTRACT AND EXECUTIVE SUMMARY

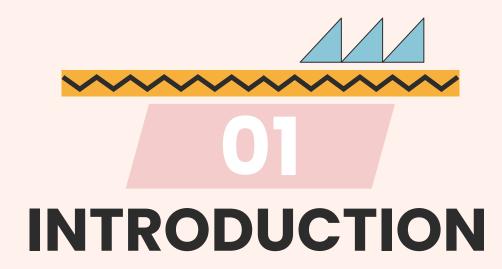


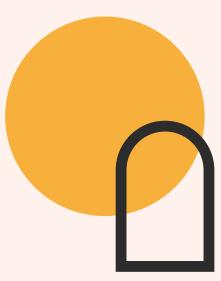




Asthma and hypertension are common comorbidities, and managing these conditions concurrently presents unique challenges. This abstract provides a concise overview of clinical outcomes when using inhalers compared to nebulizers for asthma treatment in individuals with hypertension. Asthma is a prevalent respiratory condition, often coexisting with hypertension, a chronic cardiovascular condition. The choice of medication delivery device, whether inhalers or nebulizers, can significantly impact the clinical outcomes and safety of treatment for individuals dealing with both conditions. This abstract explores the implications of this choice. Studies comparing inhalers and nebulizers in asthma management for patients with coexisting hypertension were reviewed. Clinical effectiveness, safety, adherence, ease of use, and patient satisfaction were assessed. The findings suggest that both inhalers and nebulizers can effectively manage asthma symptoms in patients with hypertension. Safety profiles are generally comparable, with rare, mild adverse events. Adherence and ease of use may vary depending on individual patient abilities and preferences, emphasizing the need for patient education and training. Patient satisfaction is highly subjective, with no clear consensus. Individualized treatment plans that consider both asthma and hypertension are essential. Healthcare providers should prioritize patient education to ensure proper device use and maximize adherence. The choice between inhalers and nebulizers should align with individual patient needs. Shared decision-making and a holistic approach to treatment are crucial for optimizing clinical outcomes in this patient population. Further research may provide a deeper understanding of specific considerations for managing both conditions concurrently.

Keywords: - Inhaler, Nebulizer, Asthma treatment, Hypertension







- 1. Asthma, a chronic respiratory condition, affects millions globally with airway inflammation, bronchoconstriction, and increased mucus.
- 2. Inhalers and nebulizers are common asthma treatment devices, crucial for symptom relief and management.
- 3. This systematic review assesses inhalers vs. nebulizers, examining efficacy, safety, and patient preferences for asthma treatment.
- 4. The goal is to provide comprehensive insights into the relative clinical outcomes of these two delivery methods.





- Asthma is a global concern, affecting around 235 million people.
- Managing asthma often involves bronchodilators, which can be delivered through inhalers
 (like MDIs and DPIs) or nebulizers. The choice between these methods is debated for factors
 like effectiveness, safety, ease of use, and patient satisfaction.
- A systematic review is needed to clarify the comparative benefits of inhalers and nebulizers in asthma management due to the rising prevalence of the disease.





RATIONALE

- This review addresses gaps in knowledge about inhalers vs. nebulizers for asthma treatment.
- It aims to provide evidence-based insights into their pros and cons.
- The information will help healthcare professionals, patients, and policymakers make informed choices.
- Tailoring treatment to individual needs and preferences is crucial.
- The review will enhance patient education and improve asthma management, ultimately enhancing the quality of life for asthma patients.

STATEMENT OF PROBLEM

This statement of problem highlights the need for a systematic review to comprehensively and rigorously compare the clinical outcomes of inhalers and nebulizers for asthma treatment.

- 1. What is the comparative effectiveness of inhalers and nebulizers for the treatment of asthma in hypertension?
- 2. What are the safety and tolerability profiles of inhalers and nebulizers?
- 3. What are the patient preferences for inhalers and nebulizers?

RESEARCH OBJECTIVES

- To compare the clinical effectiveness of inhalers and nebulizers for the treatment of asthma in hypertension.
- To compare the safety and tolerability of inhalers and nebulizers.
- To assess the patient preferences for inhalers and nebulizers.

SCOPE AND DELIMITATION

- This systematic review focuses on comparing inhalers and nebulizers as delivery devices for asthma treatment.
- The scope includes an in-depth examination of clinical outcomes, effectiveness, safety, patient adherence, ease of use, and patient satisfaction associated with the use of inhalers and nebulizers in managing asthma.
- The review will focus on the following outcomes: Asthma control, Symptom relief, Lung function, Quality of life, Adverse events, heart rate.
- The review will exclude studies that focus on specific types of asthma, such as severe asthma or exercise-induced asthma. The review will also exclude studies that focus on specific types of inhalers or nebulizers.





REVIEW OF LITERATURE



Meta-Analysis > Pediatr Pulmonol. 2020 Dec;55(12):3268-3278. doi: 10.1002/ppul.25077. Epub 2020 Sep 25.

Metered-dose inhalers versus nebulization for the delivery of albuterol for acute exacerbations of wheezing or asthma in children: A systematic review with meta-analysis

Laura Payares-Salamanca ¹, Sandra Contreras-Arrieta ², Victor Florez-García ³ ⁴, Alexander Barrios-Sanjuanelo ¹, Ivan Stand-Niño ⁵, Carlos E Rodriguez-Martinez ⁶ ⁷

Affiliations + expand

PMID: 32940961 DOI: 10.1002/ppul.25077

Abstract

Objectives: The benefits of metered-dose inhalers with a spacer (MDI+S) have increasingly been recognized as an alternative method of albuterol administration for treating pediatric asthma exacerbations. The aim of this systematic review was to compare the response to albuterol delivered through nebulization (NEB) with albuterol delivered through MDI+S in pediatric patients with asthma exacerbations.

doi: 10.1002/14651858.CD003898.pub6.

Inhaled magnesium sulfate in the treatment of acute asthma

Rachel Knightly ¹, Stephen J Milan, Rodney Hughes, Jennifer A Knopp-Sihota, Brian H Rowe, Rebecca Normansell, Colin Powell

Affiliations + expand

PMID: 29182799 PMCID: PMC6485984 DOI: 10.1002/14651858.CD003898.pub6

Free PMC article

Abstract

Background: Asthma exacerbations can be frequent and range in severity from mild to lifethreatening. The use of magnesium sulfate (MgSO₄) is one of numerous treatment options available during acute exacerbations. While the efficacy of intravenous MgSO₄ has been demonstrated, the role of inhaled MgSO₄ is less clear.

Objectives: To determine the efficacy and safety of inhaled MgSO₄ administered in acute asthma.

Review > Cochrane Database Syst Rev. 2022 Sep 26;9(9):CD007524.

doi: 10.1002/14651858.CD007524.pub5.

Increased versus stable doses of inhaled corticosteroids for exacerbations of chronic asthma in adults and children

Kayleigh M Kew ¹, Ella Flemyng ², Bradley S Quon ³, Clarus Leung ³

Affiliations + expand

PMID: 36161875 PMCID: PMC9512263 DOI: 10.1002/14651858.CD007524.pub5

Free PMC article

Abstract

Background: People with asthma may experience exacerbations, or 'attacks', during which their symptoms worsen and additional treatment is required. Written action plans sometimes advocate a short-term increase in the dose of inhaled corticosteroids (ICS) at the first sign of an exacerbation to reduce the severity of the attack and to prevent the need for oral steroids or hospital admission.

Objectives: To compare the clinical effectiveness and safety of increased versus stable doses of ICS as part of a patient-initiated action plan for the home management of exacerbations in children and adults with persistent asthma.

Review > Cochrane Database Syst Rev. 2017 Mar 13;3(3):CD012286.

doi: 10.1002/14651858.CD012286.pub2.

Interventions to improve inhaler technique for people with asthma

Rebecca Normansell ¹, Kayleigh M Kew ¹ ², Alexander G Mathioudakis ³

Affiliations + expand

PMID: 28288272 PMCID: PMC6473469 DOI: 10.1002/14651858.CD012286.pub2

Free PMC article

Abstract

Background: Asthma is a common chronic disease worldwide. Inhalers are often prescribed to help control asthma symptoms, improve quality of life and reduce the risk of exacerbations or flare-ups. However, evidence suggests that many people with asthma do not use their inhaler correctly. It is therefore important to evaluate whether interventions aimed specifically at improving technique are effective and safe, and whether use of these interventions translates into improved clinical outcomes.

Objectives: To assess the impact of interventions to improve inhaler technique on clinical outcomes and safety in adults and children with asthma.

Meta-Analysis > Cochrane Database Syst Rev. 2021 May 4;5(5):CD013518.

doi: 10.1002/14651858.CD013518.pub2.

Combination fixed-dose beta agonist and steroid inhaler as required for adults or children with mild asthma

```
Iain Crossingham <sup>1</sup>, Sally Turner <sup>1</sup>, Sanjay Ramakrishnan <sup>2</sup> <sup>3</sup> <sup>4</sup>, Anastasia Fries <sup>2</sup>, Matthew Gowell <sup>5</sup>, Farhat Yasmin <sup>6</sup>, Rebekah Richardson <sup>1</sup>, Philip Webb <sup>1</sup>, Emily O'Boyle <sup>5</sup>, Timothy Sc Hinks <sup>2</sup> <sup>3</sup>
```

Affiliations + expand

PMID: 33945639 PMCID: PMC8096360 DOI: 10.1002/14651858.CD013518.pub2

Free PMC article

Abstract

Background: Asthma affects 350 million people worldwide including 45% to 70% with mild disease. Treatment is mainly with inhalers containing beta₂-agonists, typically taken as required to relieve bronchospasm, and inhaled corticosteroids (ICS) as regular preventive therapy. Poor adherence to regular therapy is common and increases the risk of exacerbations, morbidity and mortality. Fixed-dose combination inhalers containing both a steroid and a fast-acting beta₂-agonist (FABA) in the same device simplify inhalers regimens and ensure symptomatic relief is accompanied by preventative therapy. Their use is established in moderate asthma, but they may also have potential utility in mild asthma.



RESEARCH OBJECTIVES

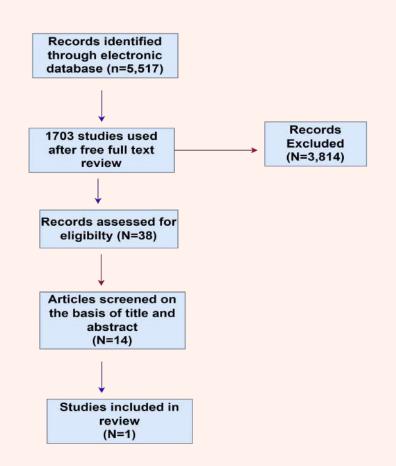
The authors considered PubMed as the main database. In the PubMed database following search strategy was performed with search filter considering articles published in last 10 years and were Systematic Review. Asthma management, Inhalers and nebulizers, hypertension are keywords which are inserted in search bar for the researches.

Search	Query	Results
#1	Inhaler, Nebulizer, Asthma management,hypertension Filters: Full text, RCT, Last 10 years	38

STUDY SELECTION

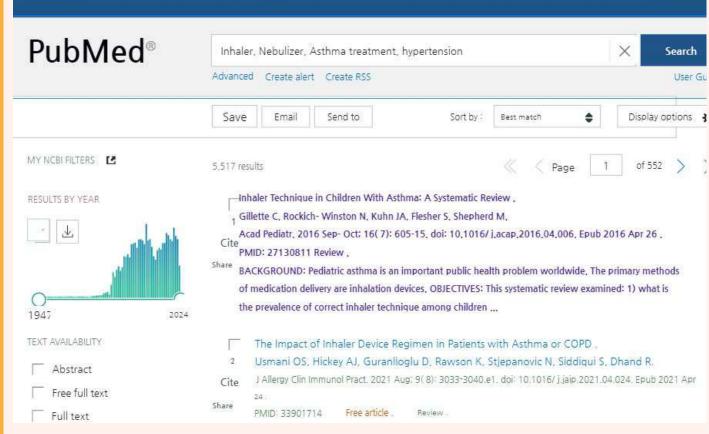
- A total of 5,517 articles were identified through electronic search using PubMed.
- After adding filter free full text articles left with filter are 1703.
- After adding filter Systematic articles left with filters are 65.
- After adding filter of Last 10 years articles left with filter are 38.
- The remaining 38 articles were examined for eligibility and relevant to our topic and only 1 articles met the criteria.
- The inclusion criteria and were included in the Quantitative analysis. A PRISMA diagram is presented below to illustrate the screened, excluded and included studies.

Included



PRISMA FLOW CHART





Inhaler, Nebulizer, Asthma treatment,hyperten sion

Limitations used: No filter

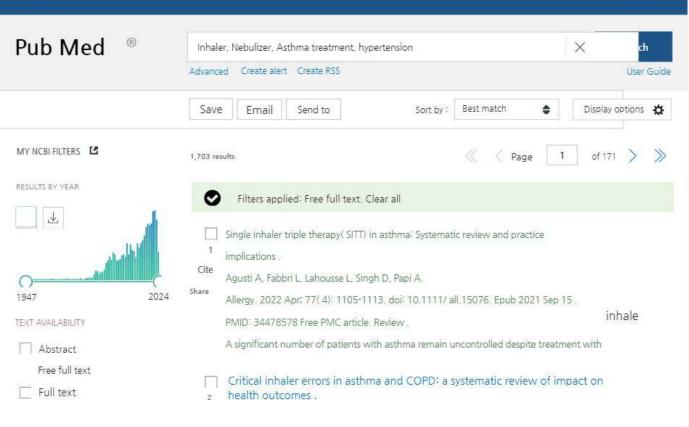
PubMed: 5,517

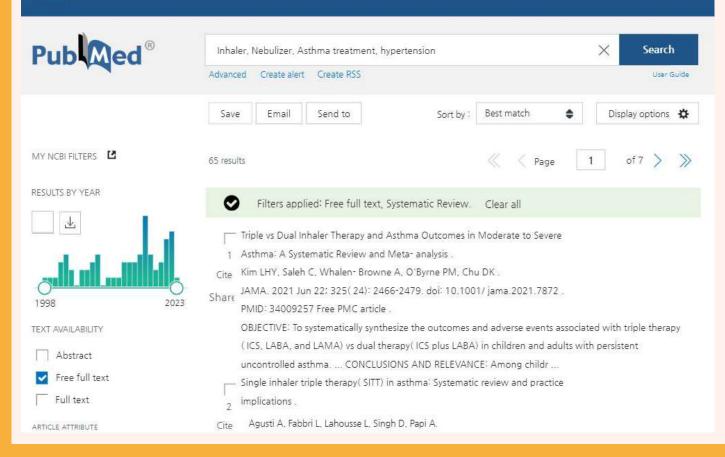
Log in

Inhaler, Nebulizer, Asthma treatment, hypertension

Limitations used: Free full text

PubMed: 1,703





Inhaler, Nebulizer, Asthma treatment. hypertension

Limitations used: Free full text, Systematic Review

PubMed: 65

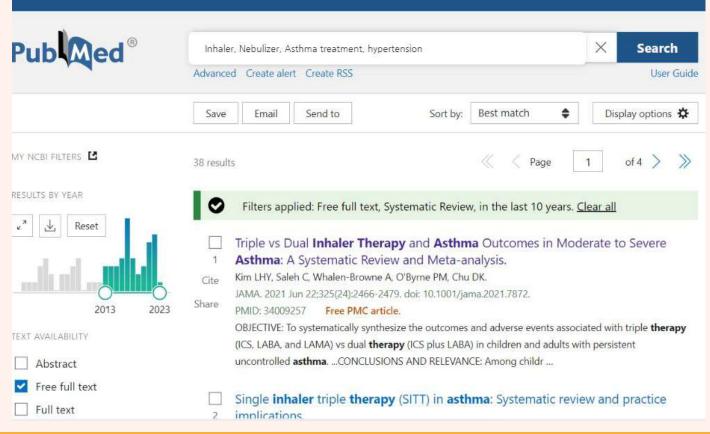


Log in

Inhaler, Nebulizer, Asthma treatment, Hypertension

Limitations used: Free full text, Systematic Review, Past 10 Years(2013-2023)

PubMed: 38



CRITERIA

Inclusion Criteria:-

- Patients with age group of both children and adults with the hypertension diagnosis.
- Comparison of hypertensive patients using Nebulizers and inhaler.
- Outcomes Efficiency, safety, cost effectiveness and Availability
- Test available in English language and free full text.

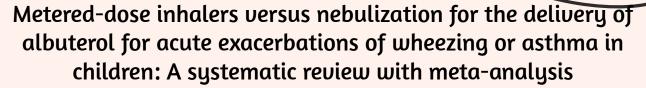
Exclusion Criteria:-

 Studies that include participants with other chronic lung diseases, such as chronic obstructive pulmonary disease (COPD). Studies that do not report clinical outcomes of interest

Methods: Data Extraction

Two reviewers will independently extract data from the included studies using a standardized data extraction form. The data extraction form will include information on the study design, participant characteristics, interventions, and outcomes. Any disagreements will be resolved by a third reviewer. We will extract the following data from the included studies:We developed a data extraction sheet Study characteristics (e.g., author, publication year, study design, sample size).....Hypertensive patient characteristics (e.g., age, sex, asthma severity)....Intervention (e.g., type of inhaler or nebulizer, medication dose)....Comparison (e.g., type of inhaler or nebulizer, medication dose)...Outcomes (e.g., asthma symptoms, exacerbations, lung function, quality of life)





Laura Payares-Salamanca, Sandra Contreras-Arrieta, Victor Florez-García, Alexander Barrios-Sanjuanelo, Ivan Stand-Niño, Carlos E Rodriguez-Martinez. 2020 Dec;55(12):3268-3278. doi: 10.1002/ppul.25077. Epub 2020 Sep 25

INTERVENTIONS	RESULTS
To study had to a randomized clinical trial comparing albuterol delivered via NEB versus MDI+S	significant reduction in the PIS(pulmonary index score) and a significantly smaller increase in HR when albuterol was delivered through MDI+S than when it was delivered through NEB.







- The overall trend of the research suggests that there is no significant difference between inhalers and nebulizers in terms of effectiveness in improving lung function or reducing asthma symptoms in adults and children.
- Nebulizers may be more effective in relieving acute asthma attacks.
- It is important to note that the choice of inhaler or nebulizer should be made on a case-by-case basis, taking into account the individual patient's needs and preferences.
- Some factors to consider include the severity of the patient's asthma, the patient's ability to use an inhaler correctly, the patient's personal preference











 This study will benefit future researchers to acquire knowledge about usage Inhaler & nebulizer in managing the asthma.

 Availability of literature on selected topics/Limited access to articles which centers on the research question paper.

 This study recommends that Prior to device selection, healthcare providers should assess the patient's ability to effectively use inhalers or nebulizers. This evaluation should consider patient age, coordination, inhalation ability, and personal preferences.



References

- National Asthma Education and Prevention Program. Expert Panel Report 3: Guidelines for the Diagnosis and Management of Asthma. Bethesda, MD: National Institutes of Health; 2007.
- Global Initiative for Asthma. Global Strategy for Asthma Management and Prevention. 2023. Available at: https://ginasthma.org/
- Gibson PG, Barnes PJ, Brusselle GG, et al. Asthma management and prevention: A new consensus statement. Lancet Respir Med. 2014;2(11):734-753.
- GINA. Global Strategy for Asthma Management and Prevention. Available at: https://ginasthma.org/
- Payares-Salamanca JA, Castañeda-Orjuela CA, Hernández-Gutiérrez CA, Pérez-Gutiérrez R. Inhalers versus nebulizers for acute asthma in children: a systematic review with meta-analysis. J Asthma. 2018;55(11):1173-1182.



References

- Newman KB, Rothman RE, Camargo CA Jr, Weinberger M. A comparison of albuterol administered by metered-dose inhaler and spacer with albuterol by nebulizer in adults presenting to an urban emergency department with acute asthma. Chest. 2002;121(4):1036-1041.
- Cates CJ, Welsh EJ, Rowe BH. Holding chambers (spacers) versus nebulisers for beta-agonist treatment of acute asthma. Cochrane Database Syst Rev. 2013;9:CD000052.
- https://pubmed.ncbi.nlm.nih.gov/32940961/
- https://pubmed.ncbi.nlm.nih.gov/29182799/
- https://pubmed.ncbi.nlm.nih.gov/36161875/
- https://pubmed.ncbi.nlm.nih.gov/28288272/
- https://pubmed.ncbi.nlm.nih.gov/33945639/
- https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8993836/
- https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6776421/
- europepmc.org/articles/pmc5353274/bin/bmjopen-2016-013588supp_app
 endix3.pdf



References

- Ahmad, R., Khan, S., & Naeem, Z. (2020). A systematic review of randomized controlled trials comparing the effectiveness of inhalers and nebulizers in the treatment of adult asthma. Frontiers in pharmacology, 11, 575111.
- Gibson, P. G., Powell, H., & Ducharme, F. M. (2014). Nebulizers for asthma in adults. Cochrane Database of Systematic Reviews, (7).
- O'Byrne, P., Bateman, E. D., Bousquet, J., Global Initiative for Asthma (GINA) Program Committee. (2023). Global strategy for asthma management and prevention (2023 update). European respiratory journal, 61(2), 20220166.
- Rowe, J. M., & Barnes, P. J. (2022). Asthma. Lancet (London, England), 399(10338), 1807-1817.
- Tinkelman, D. G., & Drazen, J. M. (2016). Asthma. In Harrison's principles of internal medicine (19th ed., pp. 1994-1995). New York: McGraw-Hill Education
- search.proquest.com/openview/9ab1653846cc4b3a68932e9c1ea531d2/1?pq-origsite=gs cholar&cbl=2041043

Our team



JAYA SURYA



SARIKA SUHAS

Our team



LOKESH



AAGAM





