Asthma Survey Reveals Gaps in Communication

**Asthmatic Youths With Anxiety or Depression Have More Symptom Days**

- **5.4 days**
- **3.5 days**

**With anxiety and depressive disorders**

**Without anxiety and depressive disorders**

**Note:** Based on survey of 767 asthma patients in the previous 2-week period. Source: Dr. Richardson.

**In Habit Cough, Hold Off on Steroids and Consider Stress**

**Dr. Landau** said there often is evidence of stress in these patients, but that is not to suggest they have major psychological problems. They are frequently high-achieving children under a lot of pressure to perform either in school or sports. The typical duration of a habit cough is difficult to define because diagnosis frequently is made after several referrals, making the origin of the cough difficult to pinpoint. The literature is not consistent in its definition of habit cough, and most studies haven’t differentiated among habit coughs, tics, and Tourette’s syndrome.

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On rare occasions, habit cough may be a manifestation of a tic disorder or symptom of Tourette’s syndrome, but it is uncommon, Dr. Landau said. The American College of Chest Physicians recently published evidence-based clinical practice guidelines for habit cough, tic cough, and psychogenic cough in adults and pediatric populations (Chest 2006;129:1748-95).

The good news, Dr. Landau explained, is that treatment is very effective after the diagnosis is made and education is given to the parents. Habit cough is generally managed by exclusion of organic disease, reassurance, addressing any local irritant triggers and breathing control exercises, he added.

—Patrice Wendling

**Depression Worsens Teen Asthma**

**BY JANE SALODOF MacNEIL Southwest Bureau**

**MONTEREY** — There is a disconnect in communications between physicians and parents of children with asthma, according to an analysis of data from a new global asthma survey.

Parents and physicians disagree on the amount of time dedicated to asthma education in the office, who initiate discussions about medication side effects, and the level of treatment compliance with asthma medication.

The North American pediatric findings of the Global Asthma Physician and Patient (GAPP) study also confirm what most physicians already know: Asthma medication compliance is low; patients with poor compliance experience more symptoms, and side effects lead patients to switch therapies or discontinue medications.

The authors conclude that patient compliance and outcomes could be enhanced through better physician-patient communication and the availability of new treatment options with lower side-effect profiles.

**In 2005,** the Global Asthma Patient and Physician (GAPP) survey was conducted between May and August 2005 in 16 countries and included a total of 3,482 online and telephone interviews with 1,017 parents of children diagnosed with asthma, 1,006 physicians who treat children with asthma, 1,726 adults over 18 years of age with asthma, and 1,753 physicians who treat adults.

It was supported by an educational grant from Altana Pharma and conducted in cooperation with the World Allergy Organization and American College of Allergy, Asthma, and Immunology. It was sufficiently powered to ensure statistical significance globally and in each country.

The analysis presented here was based on 618 interviews conducted in North America among 314 parents and 304 physicians.

Among parents interviewed, 62% reported their children’s asthma as mild; 33% as moderate; and 5% as severe. In the week before the interview, parents reported a number of events demonstrating poor asthma control such as making an unscheduled visit to their doctor (34%), going to the emergency department (11%), and admission to the hospital (5%).

According to parents, physicians don’t discuss specific asthma management issues such as development of an individual management plan (66%); correct inhaler technique (69%); and keeping daily symptom or medication diaries (23%). Physicians’ perceptions of the incidence of these experiences were 90%, 97%, and 33%, respectively.

Parents also perceive that less time is spent on asthma education than physicians perceive. Whereas 18% of parents reported a typical office visit, no time is spent on asthma education, about 84% of physicians report spending at least half of their office time on education.

For more information on the study findings, go to www.gappsurvey.org.