in asthmatic patients who require regular bronchodilator treatment. BMJ 1993; 306:1034–1037

Why SMART About Second-Line Treatment When First-Line Treatment Is Being Ignored?

To the Editor:

In a recent issue of CHEST (January 2006),1 the Salmeterol Multicenter Asthma Research Trial (or SMART) demonstrated that the regular use of a twice-daily regimen of salmeterol in asthmatic patients was associated with an unnerving increase in respiratory-related and asthma-related deaths, combined asthma-related deaths, or life-threatening experiences. However, surely one of the other most concerning observations was the fact that at study entry only 47% individuals in both the active treatment and placebo groups were receiving regular therapy with inhaled corticosteroids. Thus, >26,000 subjects with asthma of approximately 16 years duration with a mean peak expiratory flow of 84% predicted were randomized to receive either a placebo inhaler or a long-acting beta-2 agonist over a 28-week period without therapy with inhaled corticosteroids.

Since guidelines2-3 advocate the early use of inhaled corticosteroids in the treatment of asthma, it is therefore inerudious to consider that the investigators felt it reasonable to enroll a majority of individuals who were being inappropriately managed in the community. Perhaps rigorous advertising campaigns are required to emphasize that therapy with inhaled corticosteroids is a long-established, effective, safe, and inexpensive treatment for the management of asthma. And perhaps clinicians and the pharmaceutical industry require reminding too.

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REFERENCES

Cause of Death in the SMART Trial

To the Editor:

The Salmeterol Multicenter Asthma Research Trial (SMART)2 found a higher incidence of death in African Americans with salmeterol therapy compared to placebo. The authors speculated on possible genetic causes, mentioning β-receptor polymorphisms. But another genetic aspect is worth considering.

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REFERENCES