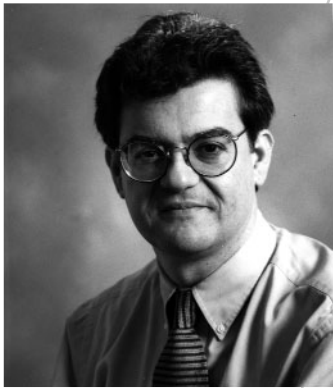


Asthma Management Alternatives for the New Millennium

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In the past, asthma was managed as an episodic disease. Patients with exacerbations of bronchospasm sought help primarily for immediate relief. In recent years, histopathologic studies have revealed that asthma is a *chronic* inflammatory airway disease. The level of inflammation does not always appear to correlate with clinical symptoms. Airway remodeling is a subject of debate but may have significant implications in the way asthma is managed in the future. Several gaps remain in our understanding of asthma development and progression. We are faced with decisions regarding design and interpretation of needed outcomes measures. We also want to understand the effect of the medical delivery system on patient care and

appropriate measurement of therapy results.

This Special Report supplement reviews presentations from a 1-day conference, held in Phoenix, Arizona, on December 1, 1999, that focused on asthma management for the 21st century. The 13-member panel included asthma and allergy clinical specialists, researchers, clinical pharmacists, and medical directors and managers of asthma programs from large managed care organizations. The panel discussed state-of-the-art treatment practices for asthma patients; outcome analysis, design, and interpretation; and emerging therapies. Specifically, the panel reviewed the most recent National Heart, Lung, and Blood Institute asthma guidelines, the Health Plan Employer Data

ACRONYM LIST

The following acronyms appear within this Special Report:

ACE	Angiotensin-converting enzyme
AHCPR	Agency for Health Policy Research
BDP	Beclomethasone dipropionate
BHR	Bronchial hyperresponsiveness
BUD	Budesonide
CME	Continuing medical education
CPM	Committee on Performance Management
CT	Computed tomography
DPI	Dry powder inhaler
DTC	Direct-to-consumer
ED	Emergency department
ETAC	Early Treatment of the Atopic Child
FACET	Formoterol and Corticosteroids Establishing Therapy
FEF	Forced expiratory flow
FEV₁	Forced expiratory volume in 1 second
FP	Fluticasone propionate
HEDIS	Health Plan Employer Data Information Set
HMO	Health maintenance organization
HPA	Hypothalamic-pituitary-adrenal
ICD-9	<i>International Classification of Diseases, Ninth Revision</i>
ICS	Inhaled corticosteroids
Ig	Immunoglobulin
IPA	Independent practice association
LABAs	Long-acting β_2 -agonists
NCQA	National Committee for Quality Assurance
NHLBI	National Heart, Lung, and Blood Institutes
NIH	National Institutes of Health
MAP	Management advisory panels
MCO	Managed care organization
MDI	Metered-dose inhaler
PBM	Pharmacy benefit management
PEFR	Peak expiratory flow rate
PCP	Primary care physician
PDI	Drug powder inhaler
PEF	Peak expiratory flow
pMDI	Pressurized metered-dose inhaler
PMPM	Per member per month
SA	Salmeterol
TAA	Triamcinolone acetonide
URI	Upper respiratory infections

Information Set 2000 asthma measure from the National Committee for Quality Assurance, clinical and cost studies on asthma pharmacotherapies, and gaps in our current understanding of asthma.^{1,2}

... REFERENCES ...

1. National Institutes of Health, National Heart, Lung, and Blood Institute. *Expert Panel Report 2: Guidelines for the Diagnosis and Management of Asthma*. Bethesda, MD: National Institutes of Health; 1997. Publication 97-4051.
2. National Committee for Quality Assurance. *HEDIS 2000. Volume 2: Technical Specifications*. Washington, DC: National Committee for Quality Assurance; 1999. Item 10235-100-00.