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Study of Asthma

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Short Commentary

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Introduction

Asthma is an incurable chronic disease which severely affects the airways to the lungs. People with asthma have the airways linings swollen and highly inflamed causing resistance for the flow of air in and out of the body. This makes the person more sensitive to irritations leading to allergic condition and the whole lining of the airways are constricted. In the asthmatic patients this resistance of air in and out of the lungs causing tightness of chess, shortness of breath, wheezing, coughing. The cough usually absorbed in the nights and early in the morning.

According WHO around 300 million are suffering from asthma all around the world. In US almost 25 million people suffer with this disease out of which 7 million are children. In Canada 3 million people suffer from asthma. Asthma may be acquired by inheritance and or may occur in certain following cases like exercise induced asthma, occupational asthma, allergy induced asthma.

Causes of Asthma

The exact cause for the condition of asthma is poorly known but the most cases are from inheritance. The primary factors or condition in which asthma generally occurs are-

Airborne allergy or viral infection From inheritance (atopy) From childhood respiratory infections From parents who have asthma

In the case of allergic asthma everybody is allergic to certain particles from the air but in this case they are highly sensitive certain particles like pollen grains, moulds ,mites, animal danders, cockroach etc.

In the same case if accidentally or willing swallowing of some drinks, nuts, shrimp, antibiotics etc.

Sometimes vigorous exercise also causes asthma.in other condition from parents or inherited

Symptoms of Asthma

An asthmatic patient the general process of symptoms occurs on a manner. Once the air is inhaled the inner linings are highly inflamed and swollen making the less access of air to inside and

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outside. Then the muscles around the linings are constricted making more obstruction to air and to the final stage airways secrete more mucus making further blockade.

The normal symptoms of asthma include: Tightness of chest Coughing Obstruction in breathing wheezing

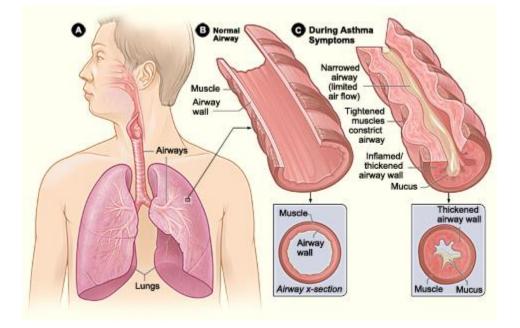


Fig 1: layout of Asthmatic affected individiual

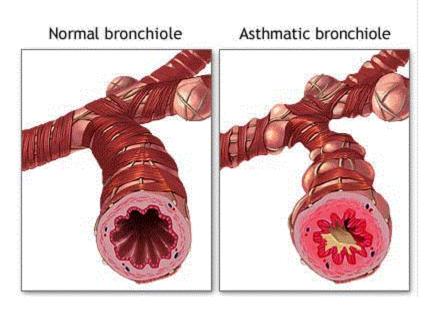


Fig 2: Bronchioles' showing the differences between the normal and Asthmatic person **Treatment of Asthma**

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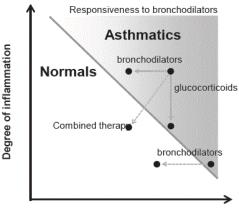
Asthma is an incurable disease and there is no specific medication or treatment of this disease. In the treatment of this disease the main aim is to control it. The proper controlling steps would include

The maintenance of healthy lung condition Prevention from allergens Prevent from coughing Reduce the need for quick relief medicines

Medication include in two processes in long acting and short acting. The long acting medicines include Theophylline Inhalers – Salmeterol and Formeterol etc Oral medication –Zileuton, zafirlukast

Short acting Medication Allergy therapy – antihistamines, omalizumab, immunotherapy Oral and IV corticosteroids Beta agonists Bronchiodialators

In the recent advantages most of the cases of the asthma include the bronchial thermoplasty where the smoothening of the inner linings of the airway or treated to reduce sensitiveness.



Level of airway responsiveness

Overall Study

In this review study of asthma our main motto is to study the condition of the allergen induces asthma. Depending upon the various experimental studies that are enlisted below in some cases the asthma is mostly allergically caused by house dust mite which causes severe irritation in the

Airway, this can be largely prevented by the induction of Treg cell. House dust mite specific immunotherapy plays an important role in the suppression of the allergic asthma in the present time

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there several advances in the specific immunotherapy which helps in the controlling of the allergic asthma.

Various comparative studies on the time period of 3months on the infected children with chronic and the episodic asthma suggests that the episodic asthma showed earlier oneset of infection, delayed diagnosis and poorer results of spirometry results.

From many studies conclude that the air conditions like the speed of the wind and the humidity changes directly hit the increase the number of asthmatic infected patients.

References

- 1. Liu HC, Chen HL, Chen CM (2014) House Dust Mite Allergy and Associated Allergen-Specific Immunotherapy in Allergic Asthma. Immunome Res 11:085.
- 2. Cantani A (2014) Children with Chronic Asthma Have a Significant Sensitization to Multiple Aeroallergens: A Prospective Study in 74 Children. Interdiscip J Microinflammation
- 3. Sabbah I, Arifhodzic N, Al-Ahmad MS, Al-Enizi A, Al-Haddad A, et al.(2014) Influence of Air Quality Conditions on Asthmatic Patient Visits in Kuwait. J Allergy Ther 5:197.
- 4. Mincarini M, Rogkakou A, Balbi F, Passalacqua G (2014) Allergen Specific Immunotherapy in Asthma. J Allergy Ther 5:190.
- MacRedmond R E, Singhera GK, Wadsworth SJ, Attridge S, Bahzad M, et al. (2014) Fluticasone Induces Epithelial Injury and Alters Barrier Function in Normal Subjects. J Steroids Hormon Sci 5:134.
- 6. Brooks SM (2014) Irritant-Induced Asthma and Reactive Airways Dysfunction Syndrome (RADS). J Allergy Ther 5:174.
- 7. Bantz SK, Zhu Z, Zheng T (2014) The Atopic March: Progression from Atopic Dermatitis to Allergic Rhinitis and Asthma. J Clin Cell Immunol 5:202.
- 8. Bossé Y, Lee-Gosselin A, Boulet LP, King GG (2013) Airway Hyperresponsiveness in Asthma: A Better Understanding Yet to Yield Clinical Benefit. J Allergy Ther 4:150.
- 9. Avdalovic M, Weiss E, Sylvia C, Quesenberry S, Tyler N, et al. (2013) Airway Vascularity is not Associated with Airway Hyper-responsiveness in a Non-human Primate Model of Asthma. J Allergy Ther 4:149.
- 10. Ozdogan S, Hsia D, Elisan I, Johnson C, Hardy K (2014) A Comparison of Impulse Oscillometry to Spirometry in the Evaluation of Exercise Induced Bronchoconstriction in Children with Asthma. J Pulm Respir Med 4: 180.
- 11. Ishiura Y, Fujimura M, Kasahara K (2014) Eosinophilic Bronchial Disorders Presenting Chronic Cough; Atopic Cough, Cough Variant Asthma and Non-Asthmatic Eosinophilic Bronchitis. J Genet Syndr Gene Ther 5:217.
- 12. Hasanloei MAV, Athari SS (2014) Proper Care of Allergic Asthma before Hospitalization. J Allergy Ther 5:161.
- 13. Yap JMG, Ching MW, Cabanilla CQ, Ramos JDA (2014) Multiple House Dust Mite Allergen-Sensitization Profiles in Children with Allergic Asthma. J Allergy Ther 5:179.
- 14. Kannan Y, Wilson MS (2012) TEC and MAPK Kinase Signalling Pathways in T helper (TH) cell Development, TH2 Differentiation and Allergic Asthma. J Clin Cell Immunol S12:011.
- 15. Prado CM, Righetti RF, da Silva Pigati PA, Possa SS, dos Santos ASA, et al. (2014) New Pharmacological Targets for Asthma Drug Development. J Allergy Ther 5:170.
- 16. Ernst G, Auteri S, Caro F, Colodenco D, Fernandez M, et al. (2014) Significant Increase of IL-8 Sputum Levels in Treatment Resistant Severe Asthma Compared with Difficult to Treat Severe Asthma Patients. J Genet Syndr Gene Ther 5:218.

- 17. Armengot M, Garin L, Peiro T, Milara J, Cortijo J (2014) Eosinophils and Airway Inflammation. J Genet Syndr Gene Ther 5:220.
- 18. Hasanloei MAV, Athari SS (2014) Proper Care of Allergic Asthma before Hospitalization. J Allergy Ther 5:161.
- 19. Horner AA (2014) Innate Immune Regulation of the Allergic March: Using House Dust to Validate the Hygiene Hypothesis. J Clin Cell Immunol 5:194.
- 20. Leung TF, Tang MF, Sy HY, Wong GWK (2013) Novel Asthma Therapeutics: Insights from Whole-Genome Studies. J Pharmacogenom Pharmacoproteomics 4:115.
- 21. Asija A, DeLorenzo L, Aronow WS (2013) Bronchial Thermoplasty in Severe Asthma. J Aller Ther 4:e107.
- 22. Kamimura M, Mouri A, Takayama K, Mizutani T, Hamamoto Y, et al. (2013) Transdermal Application of Steroid to Cervical Trachea for the Cough in Patients with Bronchial Asthma and Cough Variant Asthma-A Pilot Study.
- 23. Alsamarai AM, Alobaidi AHA, Alwan AM, Abdulaziz ZH, Dawood ZM (2011) Systemic Adverse Reaction to Specific Immunotherapy.
- 24. Svensson A, Almqvist N, Chandy AG, Nordström I, Eriksson K (2010) Exposure to Human Herpes Virus Type 6 Protects Against Allergic Asthma in Mice
- 25. Master Z, Ries NM, Caulfield T (2011) Balancing Efficiency and the Protection of Research Participants: Canadian Allergy/Asthma Researchersâ€[™] Perspectives on the Ethics Review of Multi-Site Health Research.
- 26. Muawia S, Zidan M, Daabis R, Wagdy M (2011) Association of CD40 Genotyping and its Protein Expression with Airway Inflammatory Diseases
- 27. Wu AC, Davis R, Tantisira K, Dutta-Linn MM, Hemmes M (2011) Acceptance of Asthma Pharmacogenetic Study by Children and Adults
- 28. RiviÃ[°] re GJ, Yeh CM, Reynolds CV, Brookman L, Kaiser G (2011) Bioequivalence of a Novel Omalizumab Solution for Injection Compared with the Standard Lyophilized Powder Formulation.
- 29. Rhyner C, Zeller S, Johansson C, Scheynius A, Crameri R (2011) The Ige-Binding Self-Antigens Tubulin-α and HLA-DR-α are Overexpressed in Lesional Skin of Atopic Eczema Patients.
- 30. Lewkowich IP (2011) IL-17A in Asthma A Question of Severity.