

Awareness and use of Antipyretic analgesics and the provision of information in asthmatic patients

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Abstract

Background : Asthmatic patients should be aware of their daily use of antipyretic analgesics, which inhibit cyclooxygenase-1 enzyme, because of the aspirin-induced asthma (AIA) risk. A survey study was performed to determine the basic knowledge about antipyretic analgesics and the risk of AIA, and the use of antipyretic analgesics among asthmatic patients.

Methods : Sixty-six interviews were carried out by a pharmacist between March and May 2004 at St Luke's International Hospital. The characteristics of subjects were investigated from their medical records. Verbal informed consent was obtained from all subjects.

Results : Of the 66 subjects who participated, 13 (20%) had a history of AIA. Of the 13 subjects with a history of AIA, 12 (92%) recognized the risk of AIA. Of the 53 subjects with no history of AIA, 24 (45%) recognized the risk of AIA. Subjects with a history of AIA were more aware of the AIA risk and antipyretic analgesics, including the commercial names of aspirin or NSAIDs, and were more careful about taking antipyretic analgesics than those with no history of AIA. These results did not correlate with age, sex or severity.

Conclusions : Patients with no history of AIA used antipyretic analgesics without knowing the risk of AIA. More education and the provision of information about AIA and antipyretic analgesics are needed, so we created information documents that showed which over-the-counter antipyretic analgesics should not be taken and those that can be taken with relative safety by asthmatic patients.

Key words: asthma, aspirin-induced asthma (AIA), antipyretic analgesics, non-steroidal anti-inflammatory drugs (NSAIDs), acetaminophen