Special Challenges in Treatment and Self-Management for Older Women with Asthma

Alan P. Baptist MD, MPH, FAAAAI
University of Michigan
Director, University of Michigan Asthma Program
Chair, AAAAI Asthma & Allergic Diseases in the Elderly

Take home points:

• #1: While prevalence is no different, asthma death rates and hospitalizations are highest among older women compared to any other demographic

• #2: Acknowledging comorbidities, and how they can affect asthma management, can improve outcomes

• #3: Consider screening and appropriate treatment or referral for depression, given its high prevalence and association with uncontrolled asthma

• #4: Inquire about care-giving roles, and assess the effect on mental health/stress. Provide resources/referrals as appropriate

• #5: Assess the financial abilities of older women with asthma to comply with recommended therapies

• #6: Give older women with asthma a peak flow meter to combat the decreased perception of breathlessness

• #7: Menopause is associated with a worsening of asthma symptoms. HRT can improve these symptoms, but is also associated with new-onset asthma

• #8: There is an increased risk of osteoporosis and fracture for older women using an inhaled corticosteroid. Eye effects and adrenal suppression may also occur