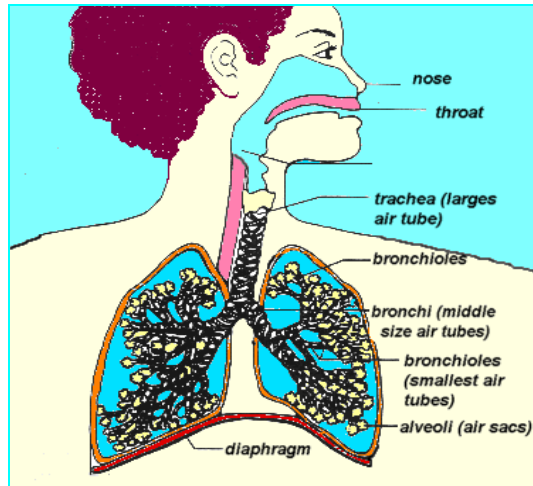


BRONCHIAL ASTHMA



Bronchial asthma is a chronic inflammatory disorder characterized by increased responsiveness of the trachea and bronchi to various stimuli.

ETIOLOGY:

It is characterized by inflammation of the bronchi with eosinophils, mast cells, and T lymphocytes with associated plasma exudation, edema, smooth muscle hypertrophy, mucus plugging and epithelial damage. The increased airway hyperactivity to inhaled stimuli due to chronic airway inflammation and this inflammation initiated by a variety of stimuli e.g. inhaled allergens, viral infections and low molecular weight chemicals. This is especially common in the so-called allergic or (extrinsic asthma) which occurs in atopic individuals who have increased serum IgE levels and positive skin test to inhaled allergen.

In other groups of patients no cause can be identified while the chronic inflammation and hyperactivity is present, so-called (intrinsic asthma).

Precipitating factors include exposure to environmental exposure to allergens e.g. pollens, house dust mite. Etc, cold water, exercise, viral infections.etc.

Symptoms:

Wheezing, difficult breathing, cough and sputum production which may worsen at night

Drugs that are used for the treatment of acute asthmatic attack include:

*Short acting beta₂ agonists

*Ipratropium bromide

*Non inhaled corticosteroids

** Drugs that are used for the treatment of chronic asthma include:

*Long acting beta₂ agonists and corticosteroids and mast cell stabilizers like cromolyn sodium.

*Short acting beta₂ agonists and Ipratropium they relax the smooth muscles of the bronchi.

