

## Antipsychotic drugs and pneumonia in the elderly

[Trifirò G et al. \*Ann Intern Med.\* 2010 Apr 6;152\(7\):418-25. W139-40.](#)

In this population-based nested case-control study, the risk for community-acquired pneumonia was evaluated in elderly patients ( $\geq 65$ ) receiving new onset antipsychotic medication. 256 patients were identified and compared with 1686 controls. Use of typical (butyrophenones, phenothiazines) or atypical antipsychotic drugs in community-dwelling elderly persons is associated with the development of pneumonia (OR 1.76, 2.71 respectively). This increased risk is for fatal or nonfatal pneumonia, is dose-dependent, is higher with antipsychotic drugs with higher H1-histaminergic receptor affinity and is greatest soon after the beginning of treatment. Only atypical antipsychotic drugs were associated with an increase in the risk of fatal pneumonia.

## Doctors in denial

[Paterniti DA et al. \*Arch Intern Med.\* 2010 Feb 22;170\(4\):381-8.](#)

This study explored methods used by physicians to deny prescription requests of patients asking for antidepressants as well as the subsequent satisfaction reported by the patients. Most denials (63%) utilized one or more methods of evoking the patient perspective. These included: offering an alternative diagnosis, referral to a mental health professional and exploring the context of the request. Such methods were associated with greater patient satisfaction. This was as opposed to 31% of denials which involved ordering diagnostic tests or prescribing a sleeping aid. 6% of requests were rejected outright. This study stresses the importance of physician

education as well as points the way to better methods of communication.

## Endurance training and improved arterial stiffness in COPD

[Vivodtzev I et al. \*Chest.\* 2010 Mar;137\(3\):585-92. Epub 2009 Oct 31.](#)

Arterial stiffness predicts cardiovascular mortality and is elevated in COPD. In this case-control study in COPD patients, the authors investigate whether exercise training reduces arterial stiffness. Seventeen matched COPD patients were included, 10 underwent 4 weeks of endurance training while 7 did not. Carotid radial pulse wave velocity (PWV, a measure of arterial stiffness), pulmonary function, blood pressure, biomarkers, walking distance, muscle function and aerobic capacity were assessed before and after training. PWV was reduced after training and correlated with improved walk distance, muscle endurance, systolic BP, fasting glucose and changes in maximal heart rate and oxygen consumption.

## I'm allergic to my neighbours

[Quinn K et al. \*J Asthma.\* 2010 Apr;47\(3\):281-9.](#)

Stress is known to play a part in numerous physical illnesses. A good example for the role of stress in chronic disease is asthma, which disproportionately affects nonwhite, urban and low socioeconomic status populations. To test the effects of social stressors on severity of asthma and respiratory problems, the parents of 319 children were interviewed as to various stressors in their neighbourhoods. Negative perceptions of the neighbourhood were associated with poor "parent general health" and with worse exercise intolerance and con-

trollability of the disease among the children. Thus, further support is given to the importance of stressors, and more specifically, social environment, in asthma.

## Home-based pulmonary rehabilitation in COPD

[Vieira DS et al. \*Curr Opin Pulm Med.\* 2010 Mar;16\(2\):134-43.](#)

Home-based pulmonary rehabilitation for COPD may be an alternative to hospital-based programs. This is a systematic review of randomized studies of home-based rehabilitation for COPD. Twelve studies were considered relevant, eight compared home-based rehabilitation to standard care, 3 to hospital-based programs and one to both. Home-based programs demonstrate an improvement in quality of life and in exercise capacity compared to standard care. This improvement is similar to that seen with hospital-based programs. Thus home-based rehabilitation may be a viable treatment option in COPD patients.

## Genetically tailoring asthma treatment

[Bleecker ER et al. \*Am J Respir Crit Care Med.\* 2010 Apr 1;181\(7\):676-87. Epub 2009 Nov 12.](#)

Pharmacogenetics deals with genetic variations in the response to drugs. Long acting beta-agonists play a pivotal role in the treatment of asthma. But is their effect similar in all asthma patients? In this trial, the effect of beta-agonists were compared between patients who were arginine homozygous at the beta(2)-adrenergic (Arg/Arg) receptors and controls, along a period of 16 weeks, with all patients receiving steroid therapy. Both lung function responses and clinical parameters were found to be similar among the Arg/Arg group and controls, suggesting no pharmacogenetic effect for beta-agonists.