

## **Novel Medications and Treatments of Acute Phase Asthma Attacks**

Asthma as a chronic airway disease manifests with recurrent reversible airway obstruction. According to the Centers for Disease Control and Prevention (CDC), 1 out of 13 individuals experiences asthma, A number of more than 25 million Americans. A percentage of 7.7% of adults and 8.4% of children. Asthma is identified as a prominent etiology for missed workdays. It is responsible for annually 1.5 million ED visits and up to 500,000 admissions each year and a mortality for over 3,300 Americans per year.

Asthma is the culprit of significant number of missing school and work days due to the disease restrictions. Asthma is an important chronic disease which imposes a huge financial pressure on medical health services. Acute attacks and referral to Emergency Department is a challenge. Many Environmental Factors influences asthma in addition to its hereditary basis. Many cross-sectional studies have confirmed increases in the incidence and prevalence of asthma over the past 2 to 3 decades. Almost 25% of annual Emergency Departments visits are related to asthma. Asthma; specially in acute setting medical management is a research attraction.

Novel therapeutic strategy results are challenging and complex. A lot of new treatment are under investigation. Traditional standard medications in the disease acute setting consist of Oxygen administration, B2 adrenergic agonists, anticholinergics and corticosteroids depends on the severity of the attack. Many research projects are designed and are published or are in process for application of novel medicine such as nebulized heparin, nebulized ketamine, nebulized lidocaine, nebulized low molecular weight heparin (LMWH), Nebulized lidocaine, leukotriene inhibitors, nebulized dexmedetomidine, nebulized ketamine, application of heliox, nebulized tacrolimus, nebulized magnesium, alprostadil IV administration, Intravenous B-type Natriuretic Peptide IV administration in acute phase management of acute asthma attack to serve a better fast improvement of the acute disease. There are significant controversies in the field of new introduced medications, suggesting for acute asthma treatment and a lot of ambivalences that should be answered. This is a long way to clarify the costs and benefits of the different under investigation drugs and the conflicts in the research results. More trials are needed to clarify a lot of questions to open more windows to the asthma acute attack treatment specially for the Emergency Departments. We hope that multiple clinical and experimental scientific trials improve our science of acute phase asthma disease management in Emergency Departments.

**Novel Medications and Treatments of Acute Phase Asthma Attacks****Guest Editor****Dr. Hassan Motamed**

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**Interests:** Acute phase asthma novel managements, Diagnostic biomarkers, Sedation and analgesia, Ketamine novel applications

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