

Female baby boomers with asthma? You may need help

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Women over the age of 65 face numerous barriers to good health: an increased risk for obesity, greater struggles against poverty and higher rates of asthma with worse health outcomes. An article published in the August issue of *Annals of Allergy, Asthma and Immunology*, the scientific publication of the American College of Allergy, Asthma and Immunology (ACAAI), outlines the challenges faced by older women in treating asthma, and offers practical solutions to improve their care.

"Allergists want older women to understand that getting their asthma under control can help them control a range of other adverse health conditions," said allergist Alan Baptist, MD, MPH, lead study author and ACAAI member. "Recent studies have shown that older women with multiple health problems admit that asthma takes a backseat to other conditions. We want them, with the help of their allergists, to view controlling their asthma as a priority."

The article points out that the asthma rate is no greater in older women than in other segments of the population, but that the amount of illness and death is much higher. The asthma death rate among women older than 65 is nearly four times higher than in other groups.

"There is no doubt that women over 65 suffer from asthma much more than men over 65" said allergist James Sublett, MD, ACAAI presidentelect. "We hope that women with asthma will be encouraged by their primary care doctor to work with an allergist. Allergists are experts at creating personalized action plans to help patients identify triggers, and



offer solutions for coping with asthma."

Some factors affecting the health of older women with asthma include:

Menopause and Hormone Replacement Therapy (HRT) - The risk for women of developing asthma is not affected by menopause, but, in women with preexisting asthma, menopause tends to increase the number of their attacks. Some studies have shown that postmenopausal women receiving HRT had an increased risk of asthma. At the same time, in women with preexisting asthma, HRT is often associated with improved respiratory symptoms and decreased asthma attacks. Older women with asthma need to consider the potential risks and benefits of HRT.

Risk of adverse effects of inhalers – Because postmenopausal women treated for asthma with inhalers (also known as inhaled corticosteroids) have significantly lower bone mineral density, they are at additional risk for osteoporosis. Other effects of inhalers, such as glaucoma, cataracts and adrenal suppression, are also more common in older women and should be evaluated. Incorrect inhaler use is common among elderly patients, but an asthma educator can teach more than 90 percent of older adults how to properly use one. Because inhalers are the best treatment for asthma, ask your allergist about working with an asthma educator.

Depression – More <u>severe asthma</u> can cause a greater risk and severity of depression. Women over 65 have been shown to have rates of depression ranging from 15 percent to 35 percent. As treatment of depression among asthma patients shows improved asthma outcomes, women should discuss screening and treatment for depression with their physicians.

Perception of Breathlessness – An important tool for preventing the



progression of an asthma attack is early intervention and treatment. Since some baby boomers have a diminished awareness of how well or poorly they are breathing, and seem to have a harder time overcoming their perception of breathlessness, self-monitoring with a peak flow meter is strongly recommended during an asthma attack.

Additional conditions affecting older women and their management of <u>asthma</u> include being obese or overweight; caregiving roles a woman might have that hamper self-care; and limited income or poverty which can limitability to follow recommended therapies.

Provided by American College of Allergy, Asthma, and Immunology

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