

## **ASTHMA AND WINTER WEATHER: FACTS AND TIPS**

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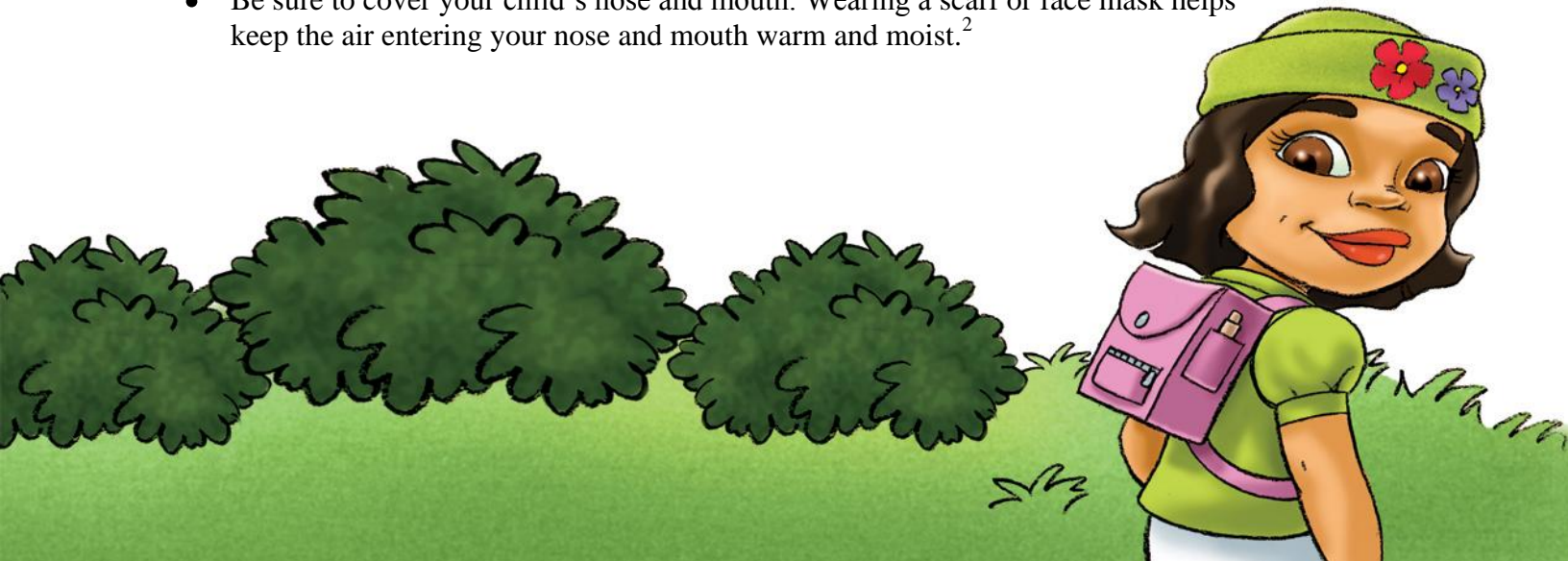
Asthma is one of the most common chronic illnesses in children, affecting nearly one out of every 10 children.<sup>1</sup> The winter season can be especially challenging for these children, who may experience an increase in symptoms due to the changing weather.

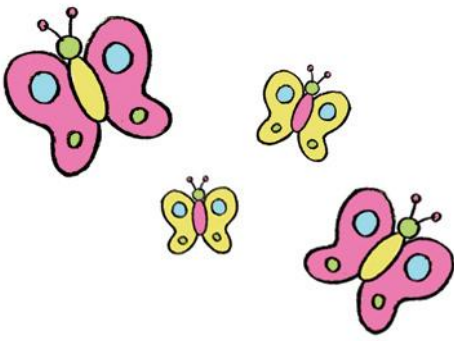
### **Triggers of Asthma in Winter Weather**

- Changes in temperature, an increase or drop, can trigger asthma attacks, as well as sudden changes in the weather.<sup>2</sup>
- Exposure to cold, dry air is a common asthma trigger and can quickly cause severe symptoms.<sup>2</sup>
  - Cold air causes the airways to constrict, increasing the likelihood of asthma symptoms such as wheezing and shortness of breath.<sup>3</sup>
  - When the air is cold, as in the wintertime, the nose has a more difficult time warming the air, or we tend to breathe through our mouths if we have a cold. The inhalation of cool dry air can lead to the production of a chemical that can cause constriction of the bronchial tubes.<sup>3</sup>
- Respiratory infections like a cold or the flu are more likely during the colder weather and also may contribute to an increase in asthma exacerbations, sometimes making it hard to breathe for those with asthma.<sup>4</sup>
- Windy weather can stir up pollen and mold in the air, leading to increased symptoms for those with asthma.<sup>2</sup>
  - One study showed that during thunderstorms, the daily number of emergency department visits for asthma increased by 15 percent. The study concluded that due to the wind, the number of fungal spores in the air almost doubled, which caused this increase.<sup>2</sup>
- A light rain might wash out pollen, but wet weather actually encourages the growth of mold spores and increases mold concentration, which is another asthma trigger.<sup>2</sup>
- Cold weather also drives people indoors, and exposure to indoor triggers can increase symptoms.

### **Tips for Breathing Easier During Severe Weather Changes**

- Be sure to cover your child's nose and mouth. Wearing a scarf or face mask helps keep the air entering your nose and mouth warm and moist.<sup>2</sup>





- Watch the forecast for a change in weather that might affect your child's asthma, as well as a change in pollen and mold counts. Limit your child's outdoor activities when temperatures are severely low or on peak trigger days.<sup>2</sup>
- Children should not mow the lawn or rake leaves, and should be kept away from freshly cut grass and leaf piles during the colder weather.<sup>2</sup>
- Even though asthma cannot be cured, it can be managed. Work with your physician to properly manage asthma. Your asthma specialist can provide you with an effective management plan for your asthma, so your child can enjoy being outside in the colder season.
- To help manage your child's asthma, ask your physician about ASMANEX<sup>®</sup> TWISTHALER<sup>®</sup> (mometasone furoate inhalation powder), the first and only once-daily inhaled corticosteroid inhaler approved for children as young as age 4, indicated for the maintenance treatment of asthma as a preventive therapy in patients 4 years of age and older. ASMANEX is not indicated for the relief of sudden asthma symptoms or in children less than 4 years of age.
  - According to updated guidelines from the National Asthma Education and Prevention Program, inhaled corticosteroids are a recommended treatment when initiating long-term control therapy in children with persistent asthma.<sup>5</sup>

### **About ASMANEX<sup>6</sup>**

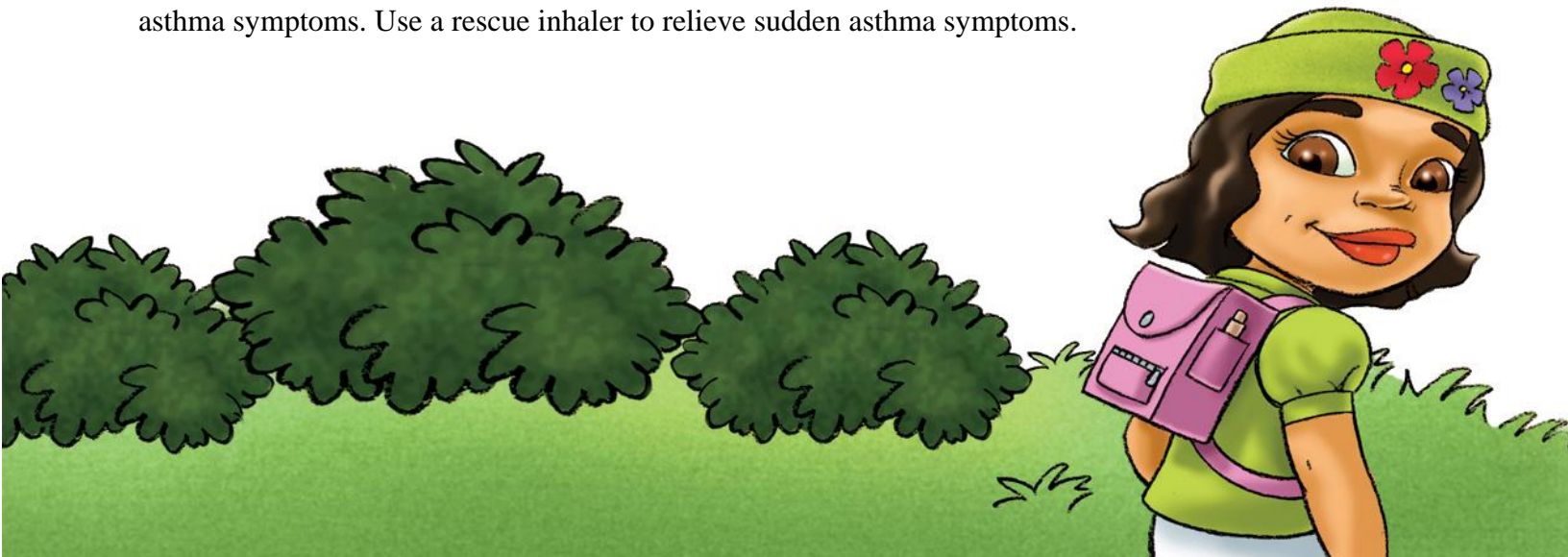
ASMANEX TWISTHALER is approved for the maintenance treatment of asthma in patients 4 years of age and older. ASMANEX TWISTHALER will not relieve sudden asthma symptoms and is not for children under the age of 4.

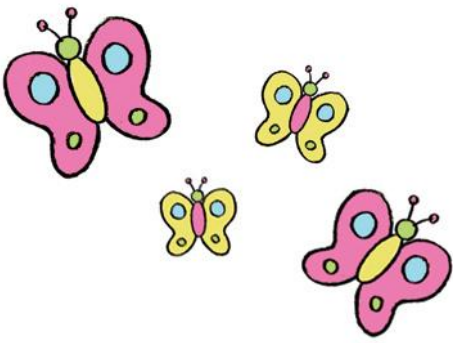
ASMANEX has not been demonstrated to be effective in treating asthma symptoms caused by specific asthma triggers.

ASMANEX TWISTHALER is available in 2 dose strengths, 110 mcg for children 4 to 11 years old, and 220 mcg for patients 12 and older.

### **Important Safety Information<sup>6</sup>**

ASMANEX TWISTHALER is not a rescue inhaler and should not be used to treat sudden asthma symptoms. Use a rescue inhaler to relieve sudden asthma symptoms.





ASMANEX should not be used to treat acute asthma episodes (including status asthmaticus) where extra measures are required.

ASMANEX is not for patients who have a hypersensitivity (including allergic reactions) to mometasone or any of the ingredients in ASMANEX. There have been cases of hypersensitivity, allergic reactions, facial swelling, hives, and throat tightness reported.

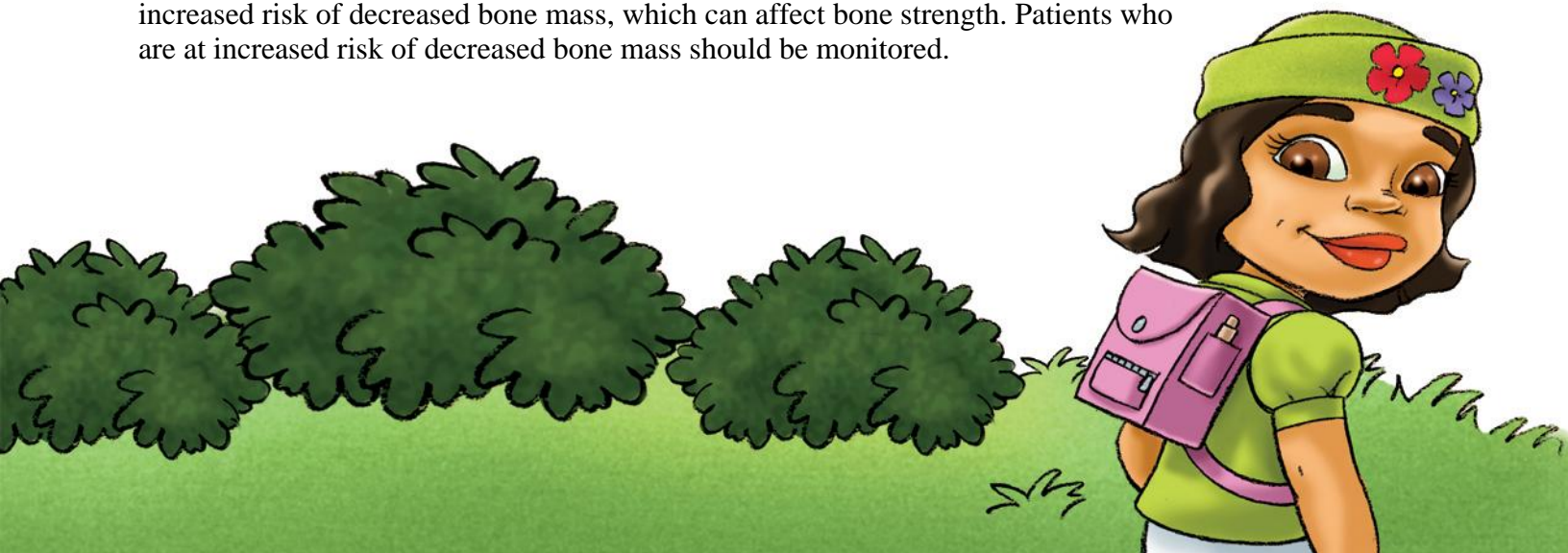
Patients who use inhaled steroid medicines for asthma may develop a fungal infection of the mouth and throat. Rinse your mouth after using ASMANEX.

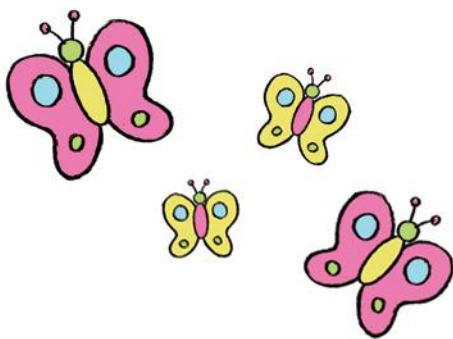
It is possible that hypercorticism (an excess level of steroids in your body) or adrenal insufficiency (your adrenal gland cannot produce enough steroids) may appear in a small number of patients, particularly when ASMANEX is administered at higher than recommended doses over prolonged periods of time. If such effects occur, consult your health care provider as the dosage of ASMANEX should be reduced slowly.

If you or your child took steroids by mouth and are having them decreased or are being switched to ASMANEX, you should be followed closely by your health care provider and the oral steroids should be reduced slowly. Deaths due to adrenal insufficiency have occurred during and after switching from oral steroids to inhaled steroids. Tell your health care provider right away about any symptoms such as feeling tired or exhausted, weakness, nausea, vomiting, or symptoms of low blood pressure (such as dizziness or faintness). If you or your child is under stress, such as with surgery, after surgery, or trauma, you may need steroids by mouth again.

Avoid coming in contact with measles, chicken pox virus, tuberculosis, or any other infections before or while using ASMANEX. Contact your health care provider immediately if you or your child has been exposed.

Patients who use inhaled steroids, including ASMANEX, for a long time may have an increased risk of decreased bone mass, which can affect bone strength. Patients who are at increased risk of decreased bone mass should be monitored.





Inhaled steroids, including ASMANEX, may cause a reduction in growth velocity when administered to pediatric patients. The long-term effect on final adult height is unknown. Health care providers should closely follow the growth of children and adolescents taking corticosteroids by any route, and reduce each patient's dose to the lowest dose that effectively controls his/her symptoms.

ASMANEX may increase the risk of some eye problems such as cataracts, glaucoma, and increased intraocular pressure. Patients with a change in vision or a history of eye problems should be monitored by their health care provider.

Use ASMANEX as directed by your health care provider, since its ability to work in your lungs depends on regular use. Maximum benefit may take 1 to 2 weeks or longer. If your asthma symptoms do not improve, or get worse, contact your health care provider.

The most common side effects with ASMANEX in patients 4-11 years old include fever, allergic rhinitis, abdominal pain, vomiting, urinary tract infection, and bruise.

The most common side effects with ASMANEX in patients  $\geq 12$  years old include headache, allergic rhinitis, sore throat, and upper respiratory infection.

Please see accompanying additional important product information.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit [www.fda.gov/medwatch](http://www.fda.gov/medwatch), or call 1-800-FDA-1088.

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<sup>1</sup>“Summary Health Statistics for U.S. Children: National Health Interview Survey, 2006.” National Center for Health Statistics. Vital Health Stat 10 (234). 2007. [http://www.cdc.gov/nchs/data/series/sr\\_10/sr10\\_234.pdf](http://www.cdc.gov/nchs/data/series/sr_10/sr10_234.pdf)

<sup>2</sup>“Can the Weather Affect My Child's Asthma?” KidsHealth®, June 2007. [http://kidshealth.org/parent/medical/asthma/weather\\_asthma.html](http://kidshealth.org/parent/medical/asthma/weather_asthma.html)

<sup>3</sup>“Winter's Cold Can Exacerbate Asthma.” Duke University Medicine News, 2008. <http://www.dukehealth.org/HealthLibrary/News/9463>

<sup>4</sup>“Childhood Asthma Overview.” American Lung Association, April 2008.

[http://www.lungusa.org/site/c.dvLUK900E/b.22782/k.8D9C/Childhood\\_Asthma\\_Overview.htm](http://www.lungusa.org/site/c.dvLUK900E/b.22782/k.8D9C/Childhood_Asthma_Overview.htm)

<sup>5</sup>“National Asthma Education and Prevention Program Expert Panel Report 3: Guidelines for the Diagnosis and Management of Asthma.” National Institutes of Health. National Heart, Lung, and Blood Institute, 2007. <http://www.nhlbi.nih.gov/guidelines/asthma/asthgdln.pdf>

<sup>6</sup>Asmanex® Twisthaler® [package insert]. Kenilworth, NJ: Schering Corporation; 2008.

