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CLINICAL EVALUATION OF THE HEIGHT (GROWTH) WITH APPLICATION OF INHALING GLUCOCORTICOIDS WITH ASTHMATIC CHILDREN

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INTRODUCTION: Therapy of the asthma of children, the management and prevention are based on global strategy for management and prevention NHLBI/ WHO.

DISEASE CONTROL: Anti-inflammatory agents and particularly inhaling corticosteroids are certainly the most efficient long-term preventive medications.

The following is expected from the asthma treatment: good health in correlation with lung functional capacity, rare symptoms, rare re-laps, lung functions near to normal functions of the lung, with daily variations under 20%, optimal growth and development, normal psycho-social development, more days in kindergarten and school, and of course, very important, no side effects of the treatment.

In this study we have analysed possible side effects of inhaling corticosteroids on the growth of asthmatic children. Growth dynamics from age of 3 years follows one specific form, percentile curves.

In this study we have presented the height of 50 children being treated with inhaling corticosteroids, fluticason propionat (Flixotide, Glaxo.S.K) continuously during 3 years, depending on symptoms of asthma and age, in doses from 100 to 500 mcg of fluticason propionata. Height was evaluated for children between age of 6 and 10 years.

The results showed that test groups of children had growth concentrated between percentile lines p 50 and p 95.

In conclusion it may be said that we have not found any retardation in development nor growth dysfunction. Therefore, the long-term treatment with inhaling corticosteroids does not have side effects on growth and the height of the asthmatic children, what makes it the medicament of the preference.

