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Effect of type and dosage of newly prescribed inhaled corticosteroids on obstructive lung disease and pneumonia hospitalisations in older individuals with asthma, COPD or both: a retrospective study of health administrative data

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This study suggested a less favourable safety-effectiveness profile for fluticasone compared to budesonide and other ICS in elderly individuals with asthma, COPD or both. Higher ICS dose was not associated with improved effectiveness in these populations. <https://bit.ly/3iNdjkQ>

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To the Editor:

The safety and risk-benefit profiles associated with different types and dosages of inhaled corticosteroids (ICS) in older individuals with asthma and COPD remain unknown [1, 2]. Limited evidence suggests that adults with asthma prescribed medium or high ICS doses are at risk of clinically important systemic side-effects that do not plateau with higher doses as efficacy outcomes do [3]. Older patients with COPD have been shown to have increased risk of pneumonia with both budesonide and fluticasone [4]; however, the risk seems greater with the latter [2, 4–6].