

Glycopyrronium bromide monotherapy controls acute asthma

'... Nebulized glycopyrrolate [glycopyrronium bromide] is a clinically effective bronchodilator in the acutely ill asthmatic.' Patients with an acute exacerbation of asthma randomly received 3 doses of glycopyrronium bromide 2mg (n = 23) or orciprenaline [metaproterenol] 15mg (23), administered 2-hourly over 20-30 min *via* a facemask and nebuliser in a double-blind fashion. The study was not completed by 5 and 6 orciprenaline and glycopyrronium bromide recipients, respectively.

There were no significant between-group differences in the percentage of change in FEV₁ or in any other measured respiratory parameters. Orciprenaline recipients experienced tremor (5), palpitations (2), nausea (1) and paraesthesia (1), whereas 1 glycopyrronium bromide recipient experienced tremor. HR increased after each dose in orciprenaline recipients with the increase being significant after the third dose compared with glycopyrronium bromide recipients. '**... The concept that anticholinergic agents should not be used as sole therapy for status asthmaticus cannot be supported**'.

Gilman MJ, Meyer L, Carter J, Slovis C. Comparison of aerosolized glycopyrrolate and metaproterenol in acute asthma. *Chest* 98: 1095-1098, Nov 1990