Correspondence

Comparison of oral prednisolone and intramuscular depot triamcinolone in patients with severe chronic asthma

Sir,—In a well designed study Dr R F Willey and others (May 1984;39:340–4) found that asthma was better controlled with triamcinolone than with prednisolone, although the dose of triamcinolone (if we allow for its slightly greater potency) was equivalent to less than half that of prednisolone. They speculate that triamcinolone may have better bioavailability or superior intrinsic pharmacological properties. But their finding of less adrenal suppression with triamcinolone than with prednisolone is against this. Perhaps the explanation for their apparently paradoxical findings lies not in differences between the two steroids but in differences between the way the drugs were given. Maybe in some cases of severe chronic asthma corticosteroid is more effective when given as intermittent high doses than when given as daily small doses. This may be the case in fibrosing alveolitis.¹ The position is complicated by the fact that triamcinolone acetonide has a sustained action due to its “depot” effect, as well as a possible initial “bolus” effect. The relevance of intermittent high dosage might be explored by a comparison of the effect of equivalent daily doses of the two steroids, and perhaps by a comparison of daily triamcinolone with intermittent prednisolone. Until studies along these lines have been done I feel that we should remain very cautious in our use of triamcinolone, on the grounds not only that side effects are troublesome in the short term and uncertain in the long term, but also that superior efficacy as compared with prednisolone is not proved.

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¹ Keogh BA, Bernardo J, Hunninghake GW, *et al.* Effect of intermittent high dose parenteral corticosteroids on the alveolitis of idiopathic pulmonary fibrosis. *Am Rev Respir Dis* 1983;127:18–22.

Book notice

Chronic obstructive bronchopathies: the Link between Theory and Practice. Edited by P Freour and WW Holland, (Pp 198; £19.50, \$37.) Kimpton Medical Publications. 1984.

This brief monograph aims to combine the views of French—and English—speaking clinicians and epidemiologists on the causes and prevention of “chronic non-specific respiratory disease,” an omnibus term intended to include chronic bronchitis, emphysema, and asthma (and possibly also pneumonia and ear, nose, and throat infections). The most detailed and useful information is in the two central chapters reviewing epidemiological studies of

the development of respiratory disease in children and adults, although some readers may be surprised that more emphasis is not given to asthma and by the concluding statement that “respiratory disease in childhood is largely related to infection.” Surrounding these chapters are four chapters on research and three chapters on approaches to prevention of these diseases. Some of these chapters are very diffuse. The bibliographies are usually fairly extensive but contain few references later than 1981, suggesting that there may have been delays in publication. The most recent reference quoted on long term oxygen treatment was published in 1978. The overall result is an uneven book; this unevenness results from differences in approach among both the Anglo-Saxon and the French authors, rather than from contrast between these two medical cultures.—NBP

Notices

Postgraduate course on lung pathology

A course on lung pathology will be held under the auspices of the University of London and the British Postgraduate Medical Federation at the Cardiothoracic Institute, Brompton Hospital, from 4 to 7 February 1985. This course is for pathologists and for chest physicians, radiologists, and other non-pathologists, consisting of four days of lectures, microscopy workshops, and demonstrations. The course fee will be £185 (inclusive of coffee, lunch, and tea). Application forms are available from the Dean's Office, Cardiothoracic Institute, Brompton Hospital, Fulham Road SW3 6HP (01-352 8121 ext 4187).

Respiratory medicine: pharmacology and therapeutics

A four and a half day course of lectures and demonstrations on current aspects of respiratory pharmacology and treatment will be held from 25 February to 1 March 1985 at the Royal Postgraduate Medical School, Hammersmith Hospital, London, W12 0HS. Topics include asthma—mechanisms and treatment; protease—antiprotease balance in chronic obstructive lung disease; treatment of alveolitis, cystic fibrosis, and opportunistic infections; antibiotics; cancer chemotherapy. The course organisers are Drs PJ Barnes and NB Pride. Course fee (including catering) £160. Application forms and further details may be obtained from School Office (SSC), Royal Postgraduate Medical School, Hammersmith Hospital, London W12 0HS (01-743 2030 ext 351).