

receiving formoterol 24 µg twice daily than in those receiving 12 µg twice daily, or placebo.² Actually, this statement should have been based on the review by Mann *et al*,³ that assessed data from three prospective, randomised, placebo-controlled and double-blind studies of formoterol at different dosages submitted to the US Food and Drug Administration. The authors concluded that more patients treated regularly with formoterol 24 µg twice daily had serious asthma exacerbations than did patients who had been treated with formoterol 12 µg twice daily, or placebo (4.5% vs 2.0%, vs 0.4%, respectively). In any case, evidence from controlled studies suggests that the use of long-acting β-agonists added to inhaled corticosteroids is safe and effective for the treatment of asthma.

Gustavo J Rodrigo,¹ Jose A Castro-Rodriguez²

¹Emergency Department, Hospital Central de las Fuerzas Armadas, Montevideo, Uruguay

²School of Medicine, Pontificia Universidad Catolica de Chile, Las Condes, Santiago, Chile

Correspondence to Dr Gustavo J Rodrigo, Emergency Department, Hospital Central de las Fuerzas Armadas, Uruguay, Av. 8 de Octubre 3020, Montevideo 11300, Uruguay; gurodrig@adinet.com.uy

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Safety of long-acting β-agonists in asthma

The study by Wolfe *et al*¹ certainly does not support our claim that serious asthma exacerbations are more frequent in patients