

**Corticosteroids for the treatment of chronic asthma in adults and children aged 12 years and over -**

**Appraisal Consultation Document**

Comments from Southampton Health Technology Assessments Centre (SHTAC) and the Peninsula Technology Assessment Group (PenTAG)

15<sup>th</sup> May 2006

Paragraph 2.8. Sentence beginning 'Most exacerbations can be treated with high doses of inhaled SABAs'. We have amended our assessment report to make a distinction between mild and severe exacerbations as follows: "Minor exacerbations may be treated by the individual using high doses of inhaled SABAs or an increased dose of ICS, although sometimes a short course of systemic corticosteroids or other treatments are also needed.<sup>1</sup> More severe exacerbations, although less common, can potentially be life-threatening, and may require hospitalisation, treatment and monitoring until symptoms have stabilised". We suggest the ACD is amended accordingly.

Section 4.1 Clinical effectiveness. Need to emphasise that the systematic review only included RCTs which compared inhaled corticosteroids using the same inhaler device in each trial arm. Suggest this goes at the end of 4.1.2

Paragraph 4.1.4. Sentence on dose ratios "For one comparison of HFA-beclometasone dipropionate the equivalent ratio to HFA-fluticasone propionate was assumed to be 1:1 rather than 1:2". This is the first time that dose ratios are mentioned in the ACD. Without any preceding information on the ratios that are generally accepted in clinical practice and by clinical guidelines this sentence doesn't really mean anything. Suggest adding in some text earlier on explaining about dose equivalence between the different ICS.

Paragraph 4.1.8 Suggest adding 'head to head' to first sentence: " Three RCTs compared the two available combination inhalers *head to head* in their dry powder form...."

Paragraph 4.1.11 Final part of final sentence is incorrect "...and that the two combination inhalers currently on the market were equally effective". As reported in the assessment report, results were mixed, with the fluticasone/salmeterol combination statistically superior on some outcomes, and the budesonide and formoterol combination statistically superior on other outcomes.