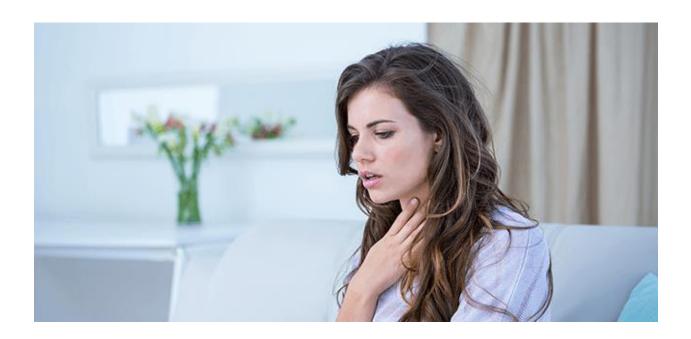
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EFFECTIVENESS OF RMT IN FEMALE ASTHMA PATIENTS



Asthma is an issue that affects individuals, both men and women, all over the world. And while you might not initially think about it, it turns out that gender plays a pretty big role in prognosis and treatment options. That's because men and women respond differently to asthma. Female asthma patients have lower baseline inspiratory muscle strength when compared to males, higher levels of perceived dyspnea and higher bronchodilator consumption.

In order to determine the best course of action for asthma patients, studies regarding various methods have been conducted. The one being explored in today's post looks at inspiratory muscle training (IMT) tested on female patients as a means to improve dyspnea and reduce gender differences in patients with asthma.

Key Findings

- Women with asthma have lower respiratory strength, more severe perceived dyspnea and higher bronchodilator consumption.
- After 20 weeks of RMT, the gender differences in respiratory muscle strength, dyspnea scores and bronchodilator use disappeared.

Patient Impact

RMT effectively improves respiratory strength, dyspnea and bronchodilator consumption in female asthma patients.

Study Methods

Maximal inspiratory mouth pressure (PImax) was measured in male and female asthma patients. Female patients underwent IMT with increasing resistance until their inspiratory muscle strength had reached that of male counterparts. Perception of dyspnea (POD) and bronchodilator use were recorded throughout the duration of the study.

Study Results

At the end of 20 weeks of IMT, PImax – and thus, the muscle strength of all female asthma patients – was equal to that of male counterparts. At that point in time, the differences in POD and bronchodilator consumption disappeared. IMT significantly improves the inspiratory muscle strength measured by PImax. Increasing the inspiratory muscle strength of women with asthma reduces the higher severity of asthma in women to the severity level of male patients, with equal perception of dyspnea and bronchodilator use.

References

Weiner P, et al. Influence Of Gender And Inspiratory Muscle Training On The Perception Of Dyspnea In Patients With Asthma.Chest. 2002;122(1):197-201.