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National Patient Advocacy and Medical Professional Associations: Freedom to Breathe Act Won't Help Patients

Groups Say Congress Should Issue Vouchers to Assist with Transition from Epinephrine Inhalers, Monitor Patient Safety

Washington, DC, Oct. 28, 2011 — New legislation from U.S. Senator Pat Roberts (R-KS) and an amendment by Senator Jim DeMint (R-SC) seek to allow epinephrine inhalers that contain chlorofluorocarbon (CFC) propellants to stay on the market, rather than being removed as agreed to in an international treaty ratified by all U.N.-recognized nations. Allergy & Asthma Network Mothers of Asthmatics (AANMA) and a group of patient advocacy and medical professional organizations wrote the senators today to explain that this exception would benefit only the drugs' manufacturer, not patients with asthma.

"These well-intentioned measures not only don't solve the problem, they totally negate the significant financial and personal sacrifices millions of us have already made with our transitioned prescription medications," said AANMA President Nancy Sander. "If the senators really want to help families, they should issue vouchers through physicians. For example, patients who turn in their over-the-counter epinephrine inhalers to medical care providers could receive a free voucher for each new medication prescribed."

On Dec. 31, 2011, after nearly 20 years' warning, Primatene Mist®, which is inhaled epinephrine, and its generic copies made by Armstrong Pharmaceuticals will no longer be sold in the United States because they contain CFC propellants and do not meet criteria for an essential use exemption from U.S. and international treaties signed by Congress to eliminate ozone-depleting CFCs.

Primatene Mist was developed over 50 years ago and is no longer recommended for use by patients with asthma. The National Institutes of Health (NIH) developed National Guidelines for the Diagnosis and Management of Asthma two decades ago and has updated them three times since as a result of new evidence-based science concerning the disease of asthma. Neither NIH asthma guidelines nor the Global Initiative for Asthma (GINA) guidelines recommend epinephrine inhalers for the treatment of asthma.

Two inhalations of epinephrine provide breathing relief for approximately 15-30 minutes

along with serious side effects, whereas two inhalations of prescription bronchodilators, recommended medication by NIH for asthma, last 3-6 hours with less unwanted cardiac stimulation. Primatene Mist is not a cheaper alternative — over the long term, it is more money for far less relief and worse side effects. Knowledge of the disease of asthma has drastically changed the way it is treated, and not surprisingly, 1950s treatments are no longer considered safe or up to current alternative treatment standards.

"Many patients who use OTC epinephrine exclusively often don't know what they are missing until they experience how life could be with the right asthma action plan," said Sander. "AANMA stands ready to help OTC epinephrine patients and families find better treatment options and outcomes as they make this transition."

About AANMA

Allergy & Asthma Network Mothers of Asthmatics (AANMA) is the leading national nonprofit organization dedicated to ending needless death and suffering due to asthma, allergies and related conditions. AANMA specializes in sharing family-friendly, medically accurate information through its award-winning publications *Allergy & Asthma Today* magazine and *The MA Report* newsletter, its website at www.aanma.org and numerous community outreach programs. Follow AANMA on Facebook at www.facebook.com/AANMA and Twitter at www.twitter.com/AANMA.