



Guideline topic: Pharmacological management of asthma  
Evidence table 4.19: Allergic Bronchopulmonary Aspergillosis

Author	Year	Study type	Quality rating	Population	Out comes measured	Effect size	Confidence intervals / p values	Comments
Stevens <sup>1</sup>	2000	Randomised, double-blind, placebo controlled study.  Phase 1 = 16/52 blind Itraconazole 200 mg po bd vs placebo - steroid reduction  Phase 2 = 16/52 open label  Itraconazole 200 mg /day  for maintenance and safety	+	55 adult asthmatics with strictly defined ABPA (increased IgE, aspergillus specific IgE, skin prick +ve to aspergillus, precipitating IgG aspergillus and pulmonary infiltrates),  FEV <sub>1</sub> /FVC <0.7  Prednisolone > 10mg/day	Phase 1  1) No. of overall "responders"  2) No. able to reduced oral prednisolone by >50%  Phase 2  1) No. of responders changing from placebo to low dose open intraconazole  2) No. of patients relapsing on low dose itraconazole	13/28 vs 5/27 17/22 vs 14/25  8/20  nil	p = 0.04	This study examined effect of itraconazole in a group of highly selected asthmatics with strictly defined ABPA. A response to therapy was defined as a 50% reduction in oral prednisolone, a 25% decrease in serum IgE, 25% increase in exercise tolerance, an improvement in pulmonary function tests and an improvement or absence of radiological pulmonary infiltrates.  Itraconazole therapy facilitated a 50% reduction in prednisolone

								dose in a significantly higher no. of patients than placebo - at both high (during the blind) and low (during the open phase) dose. No replases were seen when the dose of Itraconazole was reduced by half. The incidence of side effects was similar in the placebo and the active groups.
Salez <sup>2</sup>	1999	Retrospective cohort	+	ICS + oral steroids - 14 patients	Exacerbations, oral steroids, dose on oral steroids. FEV, VC	200 0.93 22mg 6.5mg 12 7 1.43 1.79 2.81 3.15	P< 0.01	Consistent with itraconazole having an effect but scale difficult to judge.

1. Stevens DA, Schwartz HJ, Lee JY, Moskovitz BL, Jerome DC, Catanzaro A, et al. A randomized trial of itraconazole in allergic bronchopulmonary aspergillosis. N Engl J Med 2000;342(11):756-62.
2. Salez F, Bricet A, Desurmont S, Grosbois JM, Wallaert B, Tonnel AB. Effects of itraconazole therapy in allergic bronchopulmonary aspergillosis. Chest 1999;116(6):1665-8.