ISSN: 2161-105X

Open Access

Global Prevalence of Asthma and COPD Perspective

Haruhito Sugiyama*

Division of Pulmonary, Kyoto University, Japan

Introduction

Chronic obstructive pulmonary disease (COPD) is a serious chronic disease that affects a large percentage of the elderly population who are exposed to cigarette smoke and other contaminants in the air. Other than smoking, exposure to irritating particles and gases has been identified as another risk factor for obstructive airway disease. Other risk variables, including as exposure to airborne contaminants from domestic fuel combustion, occupation, and ambient sources, must be evaluated in a global context [1]. It may be influenced by the specific spirometry procedure requested, especially if equipment calibration is not performed on a regular basis. Excluding postbronchodilator spirometry gives an estimate for obstructive lung illness in general, which overestimates the prevalence of COPD, especially in areas where other obstructive disorders, such as asthma, are common.

Asthma and chronic obstructive pulmonary disease (COPD) are critical public health issues that cause significant morbidity and mortality around the world. COPD is characterised by persistent respiratory symptoms and chronic inflammation of the airways, whereas asthma is defined by chronic airway inflammation. Asthma alone accounted for 6.2 percent of the global prevalence, while COPD alone accounted for 4.9 percent. According to a recent metaanalysis, the global prevalence of COPD according to the GOLD standard is 12.2 percent. This discrepancy could be attributable to different diagnostic criteria or the inclusion of a high-risk population [2]. Asthma is one of the most frequent major noncommunicable diseases, with serious consequences for one's quality of life. Viral and bacterial infections, such as bronchiolitis, laryngotracheobronchitis, and tracheitis, are among the most prevalent causes of acute wheezing and cough in children. Fever or other indications of infection are frequently present in these cases. Wheezing is normally self-limiting, but in some illnesses, such as extended bacterial bronchitis, it can become chronic [3].

Description

The health of vulnerable populations such as children and the elderly is particularly vulnerable to air pollution. Children are the most vulnerable since they inhale more air per pound of body weight than adults. Globally, rapid urbanisation and industrialisation have increased air pollution and, as a result, population exposures. Fuel combustion from automobiles, construction and agricultural operations, power plants, and industries are the primary sources of outdoor pollution around the world. To make matters worse, it is now widely acknowledged that global warming will exacerbate the negative effects of outdoor air pollution on human health [4].

An overall assessment of the patient's medical history, physical

*Address for Correspondence: Haruhito Sugiyama, Division of Pulmonary, Kyoto University, Japan, E-mail: HSugiyama@yahoomail.com

Copyright: © 2022 Sugiyama H. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Received: 07 February, 2022, Manuscript No. jprm-22-65379; **Editor assigned:** 10 February, 2022, PreQC No. P-65379; **Reviewed:** 19 February, 2022, QC No. Q-65379; **Revised:** 25 February, 2022, Manuscript No. R-65379; **Published:** 03 March, 2022, DOI: 10.37421/2161-105X.2022.12.599

examination, and usually a measure of lung function, as well as a test of reaction to an inhaled bronchodilator, are all used to diagnose asthma. In other cases, indicators such as exhaled nitric oxide have recently been included. These trends should motivate governments, international organisations, medical societies, health systems, health-care providers, and community members to continue to push for clean air, tobacco-free settings, and healthcare access. It's time to shift the focus from preventing respiratory disease to promoting respiratory health, just as it is with cardiovascular health. There are no globally acknowledged guidelines for synthesising information from these numerous sources, which means that asthma diagnosis differs between clinicians, regions, countries, and time, and there are risks [5].

Conclusion

As a result of urbanization, air pollution, and environmental tobacco smoke, the global prevalence of asthma in children is rising. Asthma prevalence varies greatly across India, ranging from as low as 2.4% to as high as 29.9%. COPD and asthma were the leading causes of chronic respiratory disease-related deaths worldwide, but interstitial lung disease and pulmonary sarcoidosis were the second and third leading causes of death in the high-income, Latin America and the Caribbean, and central Europe, Eastern Europe, and Central Asia super regions, respectively. Although the frequency and health burden of chronic respiratory illnesses have increased in absolute terms. Increased availability of asthma controllers across the country could help reduce the number of severe asthma episodes that end up in emergency rooms and necessitate hospitalisation in this country. Inhaled steroids are extremely prevalent among these medications. Asthma is a treatable condition, but early detection, particularly in children, is difficult. Early detection and rapid management of cases can be aided by school-based surveillance using simple approved techniques.

Conflict of Interest

The authors declare that there is no conflict of interest associated with this manuscript.

References

- Ho, Terence, Ruth P. Cusack, Nagendra Chaudhary and Om P. Kurmi, et al. "Underand over-diagnosis of COPD: a global perspective." *Breathe* 15 (2019): 24-35.
- Hosseini, Mostafa, Amir Almasi-Hashiani, Mahdi Sepidarkish and Saman Maroufizadeh. "Global prevalence of asthma-COPD overlap (ACO) in the general population: A systematic review and meta-analysis." *Respir Res* 20 (2019): 1-10.
- Stern, Jessica, Jennifer Pier and Augusto A. Litonjua. "Asthma epidemiology and risk factors." Semin Immunopathol 42 (2020): 5-15.
- 4. Serebrisky, Denise and Andrew Wiznia. "Pediatric asthma: A global epidemic." Ann Glob Health 85 (2019).
- Labaki, Wassim W. and MeiLan K. Han. "Chronic respiratory diseases: A global view." Lancet Respir Med 8 (2020): 531-533.

How to cite this article: Sugiyama, Haruhito. "Global Prevalence of Asthma and COPD Perspective." J Pulm Respir Med 12 (2022): 599.