METHACHOLINE or IRRITANT INHALATION CHALLENGE

Why Did My Physician Order This Test?
Your doctor is concerned that some of your symptoms may indicate that you might have asthma or hyper-responsive airways. This test may help confirm or disprove this theory. This test is also occasionally done in a patient with known asthma to determine the degree of severity of the asthma and identify triggers.

What Happens During a Challenge?
You will inhale increasing concentrations of a particular agent (i.e. methacholine, specific irritant, etc.) After each dose, you will be asked to perform a breathing test (spirometry).

After the inhalation portion, you will need to be observed in the office (time varies on agent used and if symptomatic) and repeat your spirometry.

Are There Any Long-term Effects from a Challenge Test?
The test may make you wheeze, feel chest tightness or shortness of breath. You may be given medication(s), which will rapidly relieve the symptoms. There are no known long-term side effects.

Scheduling Your Test:
Tell the medical staff if you:
- Have a history of hives, swelling of the upper airway, or both
- Are pregnant (or chance of being pregnant), breastfeeding
- Have a heart condition (heart attack/stroke in last 3 months, uncontrolled blood pressure)
- Have certain types of blood vessel problems (i.e. aortic or cerebral aneurysm)
- Have had an upper respiratory infection or an immunization in the last 4 weeks

Preparing for Your Test:  **Please read carefully & call our office if you have questions.**
- Try to avoid exposure to known allergens for 24 hours before testing.
- You may need to stop certain medications prior to the test (see chart below for details).
- Continue inhaled steroids at the SAME DOSE.
  Examples: Aerospan, Alvesco, ArmonAir, Arnuity Ellipta, Asmanex, Flovent, Pulmicort, QVAR
- Continue reflux medications such as cimetidine (Tagamet), esomeprazole (Nexium), famotidine (Pepcid), lansoprazole (Prevacid), omeprazole (Prilosec), or ranitidine (Zantac).

On the Day of the Challenge:
- Wear comfortable clothing.
- Do not wear lipstick, perfume, or cologne.
- NO smoking, nicotine products, coffee, cola, caffeinated beverages, or chocolate.
- Do not exercise at least 6 hrs prior to your test.
- Avoid large meals within 2 hours before the test.
## WHEN TO STOP MEDICATION BEFORE TEST

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<th>WHEN TO STOP</th>
<th>NAME OF MEDICATION</th>
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| **72 hrs**   | Nasal spray and/or eye drop antihistamines  
|              | • Azelastine (Astelin, Astepro, Dymista)  
|              | • Olopatadine (Pataday, Patanase, Patanol)  
|              | Oral antihistamines (can be in cold/flu/sleep medications)  
|              | • Acrivastine (Semprex-D)  
|              | • Brompheniramine (in combination products)  
|              | • Carboxinamine (Dimetapp, Palgic, Rondec)  
|              | • Cetirizine (Zyrtec, Wal-Zyr, Allertec)  
|              | • Chlorpheniramine (Chlor-Trimetron, Triaminic)  
|              | • Clemastine (Tavist)  
|              | • Desloratadine (Clarinex)  
|              | • Diphenhydramine (Benadryl, Nyquil, may end in -PM)  
|              | • Fexofenadine (Allegra, Allerfex)  
|              | • Hydroxyzine (Atarax, Vistaril)  
|              | • Levocetirizine (Xyzal)  
|              | • Loratadine (Alavert, Allerclear, Claritin)  
| **48 hrs**   | Long-acting bronchodilators  
|              | • Formoterol (Foradil, Symbicort, Dulera, Bevespi)  
|              | • Arformoterol (Brovana)  
|              | • Olodaterol (Striverdi, Stiolto)  
|              | • Salmeterol (Serevent, Advair, Airduo)  
|              | • Vilanterol (Breo, Anoro)  
|              | • Nedocromil (Tilade)  
|              | • Aclidinium (Tudorza)  
|              | • Glycopyrrolate (Bevespi, Seebri)  
|              | • Ipratropium (Atrovent, Duoneb, Combivent)  
|              | • Tiotropium (Spiriva, Stiolto)  
|              | • Umeclidinium (Incruse, Anoro)  
|              | • Oral theophylline (Theo-Dur, Theolair, Theo-24, Uniphyll, etc.)  
|              | • Decongestants: Phenylephrine, Pseudoephedrine (Sudafed)  
| **24 hrs**   | Leukotriene inhibitors  
|              | • Montelukast (Singulair)  
|              | • Zarfirlukast (Accolate)  
|              | • Zileuton (Zyflo)  
| **8 hrs**    | Cromolyn sodium (Intal)  
|              | Quick-acting rescue inhalers  
|              | • Albuterol (Proair, Proventil, Ventolin)  
|              | • Levalbuterol (Xopenex)  

If you have any questions, including which medications to stop taking, please call our office.

www.nwasthma.com

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