

Cardioselective beta blockers do not produce adverse respiratory effects in chronic obstructive pulmonary disease

Clinical question	Should I prescribe cardioselective beta blockers for patients with chronic obstructive pulmonary disease (COPD)?
Bottom line	In patients with COPD, cardioselective beta blockers, given as a single dose or for longer duration, produce no change in FEV ₁ or respiratory symptoms compared to placebo, and do not affect the FEV ₁ treatment response to beta 2 agonists.
Caveat	The mean duration of the “long term” studies included in the meta-analysis was only 3.7 weeks (range 2 days to 12 weeks). Most of the studies were small.
Context	Beta blocker therapy has a proven mortality benefit in patients with hypertension, heart failure and coronary heart disease. Traditionally these drugs have been considered contraindicated in patients with COPD.
Cochrane Systematic Review	Salpeter S et al. Cardioselective beta-blockers for chronic obstructive pulmonary disease. Cochrane Reviews, 2006, Issue 4. This review contains 20 studies with 278 patients
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