ASTHMA: THE HIDDEN KILLER

Model Krissy Taylor's death underscores how lethal and deceptive this common ailment can be

BY CHRISTINE GORMAN

At first the coroner could not tell what killed Krissy Taylor, the 17-year-old model who died mysteriously in her Florida home four weeks ago. Kristy's lungs appeared to be normal. Her heart seemed fine. There was no sign of alcohol, cocaine, amphetamines or other drugs in her blood. But when the pathologist looked through a microscope at tissue samples from the teenager's body, he noted that the bronchioles, the tiniest airways in the lungs, were inflamed and scarred. These telltale signs, indicated that Taylor, like more than 6,000 other Americans each year, had died of a fairly common ailment: asthma.

All too common, experts say. Some 15 million Americans suffer from this chronic affliction of the airways that can make the simplest act of breathing laborious and can leave a person suddenly wheezing and gasping for air—especially during hot summer months. The number of Americans diagnosed with asthma has grown alarmingly in the past several years. Since 1990 alone, the number of cases has jumped 50%. Even more alarming, the death rate, which had declined steadily during most of the 1970s, has been rising sharply since 1979. No one knows for sure what is behind the increase, but a prime suspect is the greater amount of time people spend in tightly sealed, air-conditioned workplaces and homes, where they are exposed to such indoor irritants as dust mites and pet dander.

Asthma is an inflammation of the bronchial tubes that is not difficult to treat, even if doctors cannot cure it. (Most people with asthma develop it as children or teenagers, and some eventually outgrow the condition.) The key, specialists say, is to control the underlying inflammation, usually with corticosteroid drugs. What makes the disease so dangerous is that it can kill in a matter of minutes. Every now and again, for reasons that are not entirely clear, the bronchioles overreact to the presence of allergens. The walls of the airways clamp down, shutting off the supply of oxygen to the heart, the brain and the rest of the body. "It's as if there were a cork in the bronchial tube," explains Dr. William Busse of the University of Wisconsin Medical School. "Air does not move in and out."

Experts suspect that is what happened to Krissy Taylor. The attack occurred so quickly, in the middle of the night, that Taylor did not even have time to call out to her family. But while the autopsy report says how Taylor died, it does not explain why she was not diagnosed with asthma in the first place. Friends say that for at least a year before her death, she would occasionally complain of being short of breath. Taylor had seen her family physician as recently as May, but he had treated her for what he apparently believed was a severe sore throat and bronchitis, not asthma.

This is not unusual. Asthma is known to scientists as a great masquerader. According to doctors at the pediatric-care unit of University of Florida Health Sciences Center in Gainesville, 25% of the patients referred to them had been previously misdiagnosed with pneumonia or bronchitis. One reason: primary-care physicians may not suspect asthma if they do not actually hear wheezing, which is more likely to occur at night than in a doctor’s office. In many cases the symptoms are so subtle that they are dismissed as allergies.

It also seems clear that Taylor—like all too many asthma sufferers—had unwittingly made her condition worse. Although she had cut back, she was still smoking three cigarettes a day—which would have made her airways more prone to spasm. “It is virtually impossible to control asthma in the presence of active cigarette smoking,”
says Leslie Hendeles, a clinical pharmacist at the University of Florida. “Even children who are taking in secondary smoke from their parents are adversely affected.”

In addition, Taylor treated her symptoms with an over-the-counter remedy—in this case, Primatene Mist—that probably masked the severity of her condition. Despite warning labels that clearly state no one should use the inhaler unless a doctor has diagnosed asthma, Taylor depended on it to alleviate her occasional shortness of breath. Such self-treatment frustrates doctors. “Every time people use these over-the-counter remedies, they are delaying getting long-term care,” says Busse.

The proper approach, asthma specialists say, is to try to prevent attacks, not just to deal with them as they happen. In addition to corticosteroids for long-term treatment, most doctors prescribe inhalers that contain so-called beta-agonists, which work directly on the airways to stop spasms.

With hindsight, it now seems Krissy Taylor’s death could have been prevented had she, or physician, realized how sic she was. “Asthma is not a disease to be taken lightly,” notes Dr. Benjamin Burrows of the university of Arizona. If Taylor’s death helps get that message across, it may save other people’s lives, allowing some good to come out of her tragedy.

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