I acquired blisters on nearly all my toes, but I felt that something wild had been awakened in me. Having bandaged each toe, I repeated the experiment the next day. And I haven't looked back, except with gratitude to the author of that book.

No matter what distances and on what terrain (I do not mind regular bitumen, dirt road or gravel at all), I have not suffered another injury (excluding the occasional piece of glass or a fish hook at the beach), and I am very careful not to venture onto grass because of the real potential of hidden syringes and needles.

More than 20 years later, I will not go back to wearing shoes while running; I am convinced that we are born barefoot for a reason and that any type of shoe isolates the foot from (uneven) ground surfaces while forcing the wearer to land on the heel, which transmits far more force to the joints and connected structures than is prudent.

Forefoot strike is what man is born to use, and anyone can adapt to barefoot running and derive great benefit.

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Inhaler blues?

Patients frequently refer to inhalers by colour rather than by trade or generic names.[1] Indeed, many physicians use colour-coded wall charts to help both them and their patients identify inhalers.

Although there is no formal agreement between pharmaceutical companies, both brand and generic drug manufacturers traditionally provide rapid-acting β-agonist bronchodilators (for rescue or reliever therapy) in blue, and inhaled corticosteroid (ICS) inhalers (controller) in shades of orange, brown or red.

One of the major improvements in asthma therapy is the move from symptom relief and overuse of the blue rescue inhalers to regular use of anti-inflammatory controller ICS combination inhalers.

However, inconsistency in the colour of inhalers can create a lot of confusion.[2,3]

Guidelines are based on striving for control, and physicians are encouraged to assess control during all patient visits. Physicians commonly determine a patient's use of a rescue bronchodilator by asking, "How often have you used your blue inhaler in the past week?"[4] During telephone conversations, physicians or other health care providers, for worsening symptoms, may tell a patient to "increase significantly their blue inhaler."[1]

Why would Health Canada recently approve Zenhale, a new combination inhaler, in the colour blue? Surely this is a risk management issue for patients and physicians and may lead to serious consequences of overdose during exacerbation?

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Letters to the editor

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