TREATMENT OF ADULT ASTHMA

REMEMBER!
- LOWEST DOSE TO CONTROL SYMPTOMS
- CHECK TECHNIQUE & CONCORDANCE THROUGHOUT

**ASTHMA**
Treatment according to symptoms:

1: Salbutamol MDI 100 micrograms
   One to two inhalations when required
   Using a rescue bronchodilator more than 3 times a week

2: Add in QVAR (extra-fine beclomethasone BDP)
   According to patient’s needs but in the range of:
   100 micrograms twice daily up to a maximum of 400 micrograms a day
   (equiv to 800 micrograms standard BDP)

**STILL SYMPTOMATIC**
Check: Inhaler technique and compliance

3: Combination therapy either:
   - Maintenance And Reliever Therapy
   - Leukotriene antagonist eg montelukast 10 mg nocte

   **Symbicort 100/6 → 200/6 once or twice daily plus as required up to 12 inhalations/day**
   **Fostair 100/6 twice daily plus as required up to 8 inhalations/day**

   Twice daily fixed dosing may be suitable for some patients but is associated with a greater exacerbation rate

**STILL SYMPTOMATIC OR FREQUENT EXACERBATIONS**

4: Add in: Trial of other individual treatments for one month and assess patient benefit – withdraw if no response.
   Perform therapeutic trials with:
   - Tiotropium Respimat
   - Theophylline

5: In exacerbations oral prednisolone (if repeated > twice a year see below)

6: Referral for review including biological treatment in patients with repeated exacerbations, eosinophils >0.3 and IgE (30-1500)

Approved By: Hull and East Riding Prescribing Committee 25 July 2018  Review Date: July 2020