

West Yorkshire Adult Asthma Management and Prescribing Guideline

CORE PRINCIPLES:

- All patients with asthma should be treated with an inhaled corticosteroid (ICS); using short acting bronchodilator (SABA) monotherapy is now outdated and no longer acceptable.
- Review control within a maximum of 3 months of change in therapy
- Poor asthma control - Use of reliever (including PRN doses of MART regimen) >2 times per week, poor symptom control, exacerbations. More than 6 SABA prescriptions per year should prompt urgent review
- Review inhaler technique, adherence and co-morbidity at every opportunity including prior to stepping up therapy
- Consider stepping down treatment if asthma is well controlled
- Ensure patient has an asthma action plan and that it is updated appropriately

INHALER PRINCIPLES

- Choice of inhaler is based on patient's preference and technique
- Whenever possible choose a device with low global warming potential (GWP): Low High
- Only choose inhalers that you have observed the patient using correctly
- If more than one inhaler is being prescribed, both the maintenance and reliever inhalers should be of the same type; do not mix MDIs and DPIs
- Where indicated below, the MDIs should be inhaled via a spacer device such as an AeroChamber Plus Flow-Vu, and consider the importance of choosing a device with a dose counter
- Always prescribe by brand to ensure consistent supply of device
- Inhaled corticosteroids (ICS) and long-acting bronchodilators (LABA) MUST be prescribed as a combination product to obviate the risk of patients inadvertently taking the LABA as monotherapy

West Yorkshire
Health and Care Partnership

BD: Twice Daily
OD: Once Daily
PRN: As Needed
GWP: Global Warming Potential
DPI: Dry Powder Inhaler
ICS: Inhaled Corticosteroid

MART: Maintenance and Reliever Therapy
MDI: Metered Dose Inhale
LABA: Long-acting Beta² Agonist
SABA: Short-acting Beta² Agonist
LAMA: Long-acting Muscarinic Antagonist

Asthmahub (England) App

- A digital personalised asthma action plan
- Regular users of this app improve wellness

<https://icsthub.co.uk/asthmahub/>

Asthma+Lung UK:

Inhaler Technique Videos

<https://www.asthmaandlung.org.uk/living-with/inhaler-videos>

STEP 1: INITIAL MANAGEMENT OF NEWLY DIAGNOSED ASTHMA
Start pathway here if mild, infrequent symptoms (< twice a month)

STEP 2: MANAGEMENT OF PERSISTENT ASTHMA
Start pathway here if symptoms most days or waking with asthma ≥1/week

STEP 3: ONGOING POOR CONTROL
Uncontrolled despite good adherence to low-dose ICS/LABA

STEP 4: ADD-ON THERAPIES
Uncontrolled despite good adherence to medium-dose ICS/LABA

PREFERRED REGIMEN:

Single Inhaler Therapy, using ICS/formoterol inhaler either on an as needed basis only (Anti-Inflammatory Reliever, AIR), or as Maintenance and Reliever Therapy (MART). In December 2024, only certain budesonide/formoterol inhalers were licensed for as-needed therapy in mild asthma, and only certain ICS/formoterol inhalers were licensed for medium-dose MART therapy. The use of any other ICS/formoterol inhalers would therefore be off-label, but may be used in line with NICE guidelines.

DPI
Inhale quick and deep

Anti-Inflammatory Reliever (AIR)
OPTIONS INCLUDE:

Fobumix Easyhaler 160/4.5
1 dose PRN

Up to 8 doses/day (rarely 12 doses/ day)
*Expires 4 months after opening

Fostair NEXThaler 100/6
1 dose PRN

Max 8 doses/day (off-label)
*Expires 6 months after opening

Symbicort Turbohaler 200/6
1 dose PRN

Up to 8 doses/day (rarely 12 doses/day)

OR

MDI
Inhale slow and steady

Luforbec MDI 100/6
1 dose PRN

Max 8 doses/day (off-label)
*Expires 3 months after opening

Proxor MDI 100/6
1 dose PRN

Max 8 doses/day (off-label)
*Expires 3 months after opening

Aerochamber Plus Flow-Vu spacer

Maintenance and Reliever Therapy (MART)
OPTIONS INCLUDE:

Fobumix Easyhaler 160/4.5
1 dose BD plus PRN

Up to 8 doses/day (rarely 12 doses/ day)

Fostair NEXThaler 100/6
1 dose BD plus PRN

Max 8 doses/day

Symbicort Turbohaler 200/6
1 dose BD plus PRN

Up to 8 doses/day (rarely 12 doses/day)

OR

Luforbec MDI 100/6
1 dose BD plus PRN

Max 8 doses/day

Proxor MDI 100/6
1 dose BD plus PRN

Max 8 doses/day

Maintenance and Reliever Therapy (MART)
OPTIONS INCLUDE:

Fobumix Easyhaler 160/4.5
2 doses BD plus 1 dose PRN

Up to 8 doses/day (rarely 12 doses/ day)

Fostair NEXThaler 100/6
2 doses BD plus 1 dose PRN

Max 8 doses/day (off-label)

Symbicort Turbohaler 200/6
2 doses BD plus 1 dose PRN

Up to 8 doses/day (rarely 12 doses/day)

OR

Luforbec MDI 100/6
2 doses BD plus 1 dose PRN

Max 8 doses/day (off-label)

Proxor MDI 100/6
2 doses BD plus 1 dose PRN

Max 8 doses/day (off-label)

OPTIONS INCLUDE:
An 8-12 week trial of either:

Add LAMA if already on DPI

Spiriva Respimat 2.5 micrograms
2 doses OD

Montelukast 10mg nocte

(Follow the MHRA safety advice on the risk of neuropsychiatric reactions in people taking montelukast)

OR

Switch to Triple therapy if already on MDI device:

Trimbow MDI 87/5/9
2 doses BD

Flow-Vu spacer
Plus pMDI SABA PRN

Discontinue if no benefit.

REFERRAL:

Consider trial of high-dose ICS/LABA and referral to secondary care for asthma phenotyping +/- biological therapy, but first:

1. Is the diagnosis correct?
2. Good inhaler technique?
3. Good adherence?

YES

Refer to severe asthma clinic

NO

Address adherence issues, consider differential diagnosis

OTHER INDICATIONS FOR REFERRAL:

- Diagnostic uncertainty
- Complex comorbidity
- Suspected occupational asthma
- Poor control following treatment at Step 4
- ≥2 courses of oral steroids/ year

Find out more about this guideline



ALTERNATIVE REGIMEN: Patients use separate maintenance and SABA reliever inhaler. Patient should be prescribed either all Dry Powder Inhalers (preferred) or all pMDIs.

DPI
Inhale quick and deep

DPI OPTIONS INCLUDE

Easyhaler Budesonide 200 micrograms
1 dose BD

Easyhaler Budesonide 400 micrograms
1 dose OD

Plus DPI SABA PRN

OR

MDI
Inhale slow and steady

OPTIONS INCLUDE

Kelhale 100 micrograms
1 dose BD

Plus pMDI SABA PRN

DPI OPTIONS INCLUDE

Fobumix Easyhaler 160/4.5
1 dose BD

Fostair NEXThaler 100/6
1 dose BD

Relvar Ellipta 92/22
1 dose OD

Plus DPI SABA PRN

OPTIONS INCLUDE

Luforbec MDI 100/6
1 dose BD

Proxor MDI 100/6
1 dose BD

Plus pMDI SABA PRN

DPI OPTIONS INCLUDE

Fobumix Easyhaler 160/4.5
2 doses BD

Fostair NEXThaler 100/6
2 doses BD

Relvar Ellipta 92/22
1 dose OD

Plus DPI SABA PRN

OPTIONS INCLUDE

Luforbec MDI 100/6
2 doses BD

Proxor MDI 100/6
2 doses BD

Plus pMDI SABA PRN