# BTS/SIGN Asthma Guidelines for treatment in patients 12 and older.

### Helena Cummings

Senior Respiratory Nurse Specialist Severe Asthma Service Nurse Lead Independent Nurse Consultant/ACP Primary Care PCRS SDC Committee Chair Humber Respiratory Champions Lead



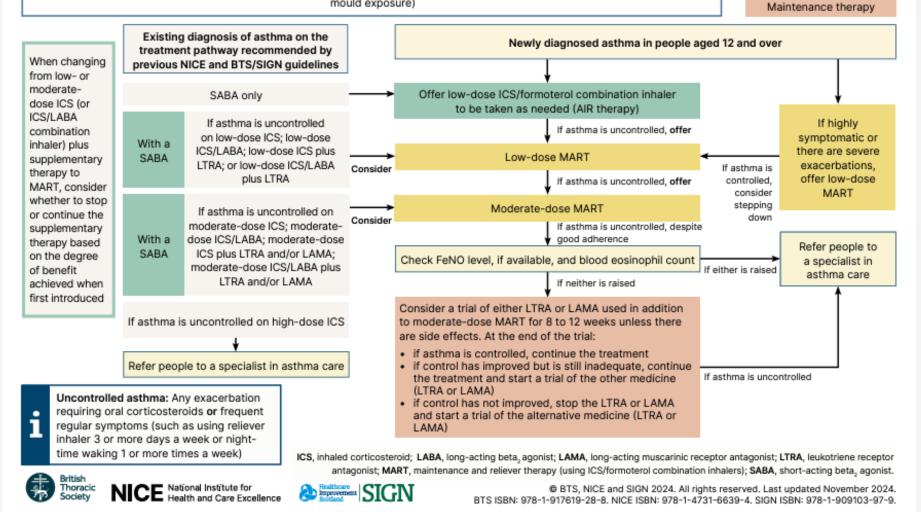
### Algorithm C: Pharmacological management of asthma in people aged 12 years and over BTS, NICE and SIGN guideline on asthma

PCRS

Symptom relief

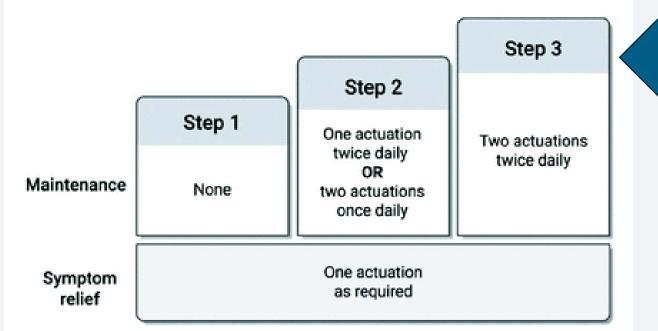
MART

Take into account and try to address the possible reasons for uncontrolled asthma before starting or adjusting medicines for asthma. For example: alternative diagnoses or comorbidities; suboptimal adherence; suboptimal inhaler technique; active or passive smoking (including e-cigarettes); psychosocial factors; seasonal factors; environmental factors (such as air pollution and indoor mould exposure)



STEP UP to achieve control and reduce risk of exacerbations

STEP DOWN after a period of prolonged control to find and maintain lowest required step



#### **BEFORE STEPPING UP**

Review inhaler technique, use, and treatable traits.

#### IF A SEVERE EXACERBATION OF ASTHMA OCCURS Review and consider stepping up.

IF ASTHMA REMAINS UNCONTROLLED AT STEP 3 Health professional to consider add-on treatment. May require referral for specialist review. A simple and effective evidence-based approach to asthma management

Anti-inflammatory reliever (AIR) therapy Treatment with a reliever inhaler that contains a combination of an inhaled corticosteroid and formoterol. When this is used in response to symptoms without regular maintenance therapy it is called as-needed AIR therapy.

n November 2024 the only product licensed for as-needed AIR therapy contained budesonide/formoterol.



## Together we are stronger



