



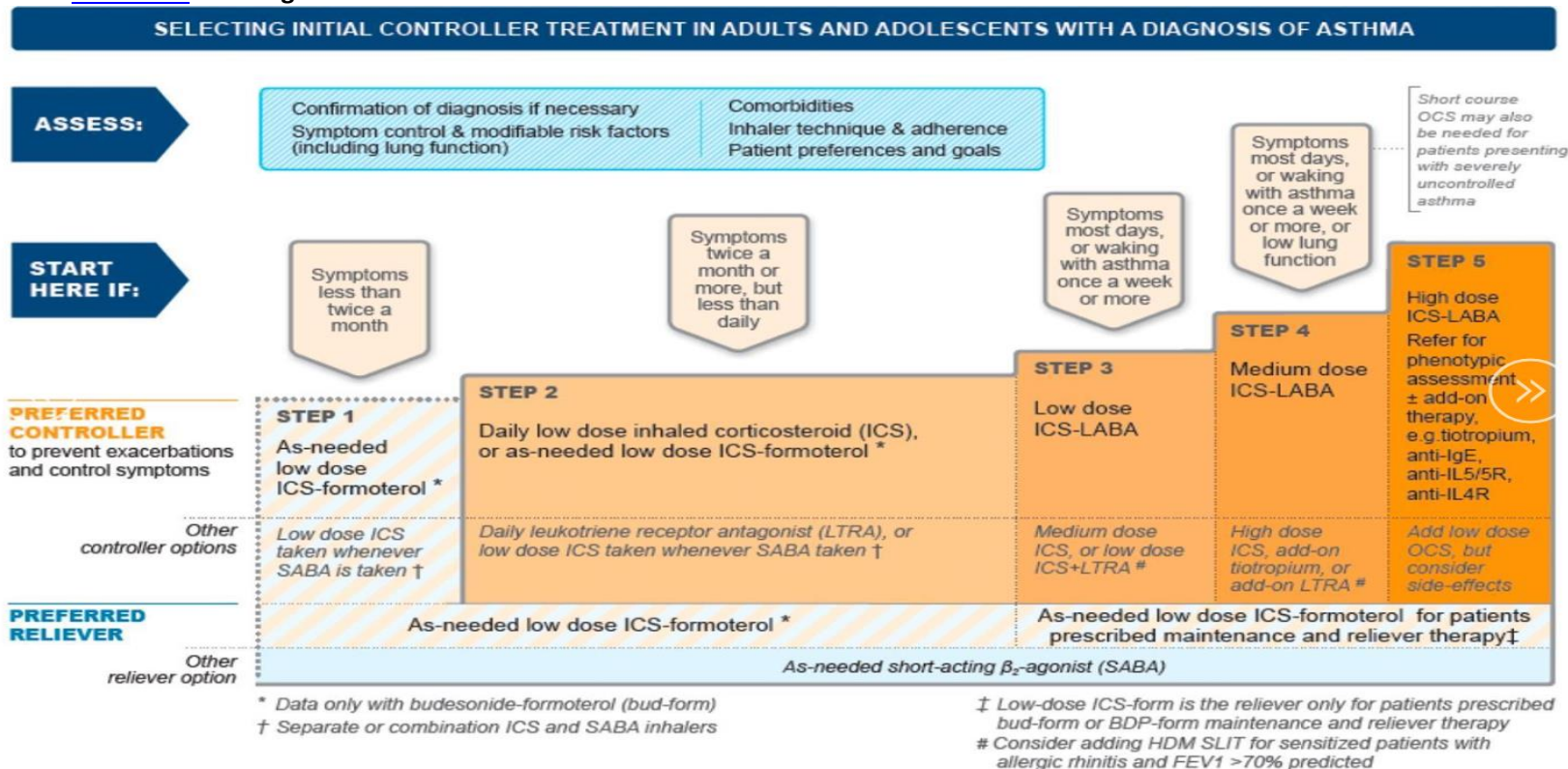


Doncaster and Bassetlaw Asthma Guideline for patients over 18 years old

DEVICE	SABA *** monotherapy NOT recommended	Low Dose ICS	Low Dose ICS/LABA	Medium Dose ICS/LABA	High Dose ICS/LABA	ICS/LABA/LAMA
DPI 	1st Line: Easyhaler® Salbutamol 100mcg One -Two inhalations PRN	1st Line: Budesonide Easyhaler® 100mcg Two inhalations BD	1st Line: Fobumix Easyhaler® 160/4.5 One inhalation BD or MART**	1st Line: Fobumix Easyhaler® 160/4.5 Two inhalations BD or MART**	1st Line: Fobumix Easyhaler® 320/9 Two inhalations BD (Consider Secondary Care referral)	Triple therapy can be used as holding therapy whilst considering referral to Secondary Care.
	2nd Line: Ventolin Accuhaler® 200micrograms One inhalation PRN	2nd Line: Pulmicort Turbohaler® 200mcg One inhalation BD	2nd Line: Symbicort Turbohaler® 200/6 One inhalation BD or MART**	2nd Line: Symbicort Turbohaler® 200/6 Two inhalations BD or MART**	2nd Line: Symbicort Turbohaler® 400/12 Two inhalations BD (Consider Secondary Care referral)	
DPI 	** Maintenance and reliever therapy (MART) - advise patient to seek advice if using 4 or more additional puffs per day in addition to regular maintenance dose (in total 8 or more puffs per day) for more than consecutive 3 days as per personalised asthma action plan PAAP- Asthma UK ; peak flow charts (Asthma UK)					Steroid Card Information Click here for high dose ICS therapy To obtain a Steroid Emergency Card click here
Extra fine particles	N/A	N/A	1st Line: Fostair NEXThaler® 100/6 One inhalation BD or MART**	1st Line: Fostair NEXThaler® 100/6 Two inhalations BD or MART**	1st Line: Fostair NEXThaler® 200/6 Two inhalations BD (Consider Secondary Care referral)	N/A
DPI Daily 	N/A	N/A	N/A	1st Line: Relvar Ellipta® 92/22 One inhalation Daily	1st Line: Relvar Ellipta® 184/22 One inhalation Daily (Consider Secondary Care referral)	1st Line: Enerzair Breezhaler® 114 mcg/46 mcg/136 mcg, One inhalation Daily (Consider Secondary Care referral)
pMDI *Extra Fine particles	1st Line: Salamol® 100 mcg (CFC-free) One-Two inhalations PRN Via spacer	1st Line: *Kelhale® 100mcg One inhalation BD via spacer	1st Line: *Luforbec® 100/6 One inhalation BD or MART** via spacer	1st Line: *Luforbec® 100/6 Two inhalations BD or MART** OR *Luforbec® 200/6 One inhalation BD (no MART) via spacer	1st line: *Luforbec® 200/6 Two inhalations BD via spacer (Consider Secondary Care referral)	1st Line: *Trimbow® 5/87/9 Two inhalations BD via spacer (Consider Secondary Care referral)
		2nd Line: *QVAR® 100mcg Autohaler/ pMDI One inhalation BD via spacer	2nd Line: *Fostair® 100/6 One inhalation BD or MART** via spacer	2nd Line: *Fostair® 100/6 Two inhalations BD or MART** OR *Fostair® 200/6 One inhalation BD (no MART) via spacer	2nd Line: *Fostair® 200/6 Two inhalations BD via spacer (Consider Secondary Care referral)	
KEY	DPI Greener device choice 	SABA ***monotherapy NOT recommended consider using PRN ICS/LABA as per GINA Guidelines			pMDI containing propellant - use via spacer to improve inhaler technique - see MPD for local formulary choices	

*** **Monotherapy SABA is NOT recommended: consider using PRN ICS/LABA as per GINA Guidelines.** There are no licensed products on the UK market for sole PRN use in asthma.
Monotherapy LAMA Spiriva Respimat 2.5mcg 2 puffs Daily prescribe new inhaler every 6 months and refill cartridge on repeat prescription.
LTRA Montelukast 10mg Daily (adult dose)
ICS/LABA/LAMA high dose triple therapy DPI and pMDI can be used as holding therapy whilst considering referral to Secondary Care.

GINA Guideline: [Click Here](#) for full guideline



Advise patients to **return any used and unused inhalers back to their local community pharmacy for safe disposal.** Inhalers should not be disposed of in domestic waste.

For inhaler technique service in Doncaster, please refer patients to community pharmacy.

All patients with a diagnosis of asthma should be issued with a **personalised asthma action plan (PAAP)** - available from [Asthma + Lung UK](#) or can be accessed via Ardens templates on System1 and Emis Web clinical systems.

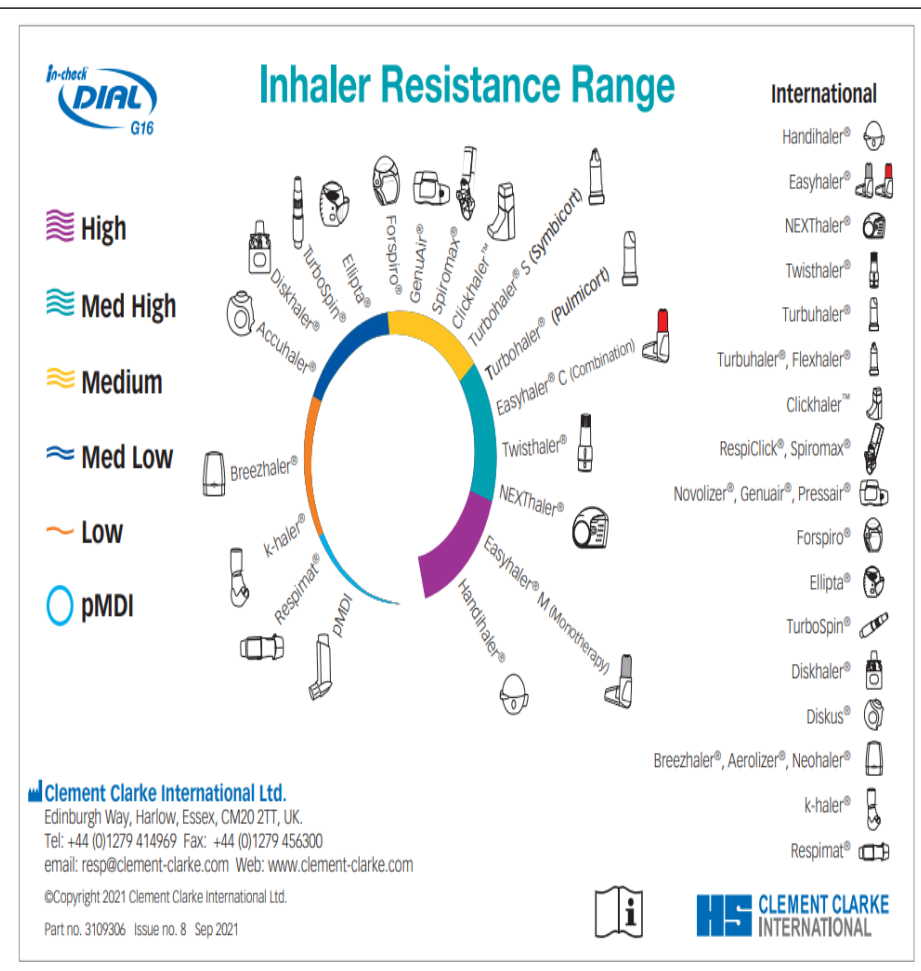
The use of ICS/Formoterol as reliever alone (without maintenance ICS/Formoterol) has a sound evidence base and is recommended by the international GINA guideline. Currently only [Symbicort® Turbohaler](#) is licensed for use as reliever therapy for adults with mild asthma.

When starting treatment, prescribers should emphasise to the patient that one of the goals of asthma management is to first achieve good control and then find the lowest preventer dose for them that will keep the asthma well controlled. **Patients on high ICS doses should receive Steroid Emergency Card** (available via Ardens templates, read code provision of Steroid Emergency Card).

For advice on greener prescribing see [Inhaler carbon footprint](#); for advice on Inhaler resistance see [here](#) and appendix 1; for advice on ICS dose equivalence see [ICS Dose Chart](#).

Appendix 1. Comparison of environmental impact data and inhaler resistance^{14,16}

Brand	Carbon impact in car miles	Inhaler resistance
Salbutamol Easyhaler 100mcg DPI (1-2 puffs)	7-13	High
Ventolin Accuhaler 200mcg DPI (1puff)	13	Med Low
Salamol CFC-free 100 mcg pMDI (1-2 puffs)	35	pMDI
Budesonide Easyhaler 100mcg DPI (2puffs BD)	17	High
Fobumix Easyhaler 160/4.5mcg (2puffs BD) (MART)	11	High
Fobumix Easyhaler 320/9mcg (2puffs BD)	22	High
Pulmicort Turbohaler 200mcg (2puffs BD)	18	Med High
Symbicort Turbohaler 100/6 (2puffs BD) (MART)	25	Med High
Symbicort Turbohaler 200/6 (2puffs BD) (MART)	35	Med High
Symbicort Turbohaler 400/12 (1puff BD)	23	Med High
Fostair 100/6 NEXThaler (2puffs BD) (MART)	39	Med High
Fostair 100/6 pMDI (2puffs BD) (MART)	495	Low
Fostair 200/6 NEXThaler (2puffs BD)	39	Med High
Fostair 200/6 pMDI	622	Low
Relvar Ellipta 92/22mcg, 184/22mcg (1puff OD)	34	Med Low
Kelhale 50mcg pMDI (2puffs BD)	458	pMDI
Kelhale 100mcg pMDI (2puffs BD)	229	pMDI
Qvar 50mcg, 100mcg (2puffs BD)	268	pMDI
Luforbec 100/6 pMDI (2puffs BD) (MART)	472	pMDI
Trimbow 5/87/9 pMDI (2puffs BD)	624	pMDI
Enerzair breezhaler 114/46/136 (1puff OD)	17	Low



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