STEPWISE APPROACH TO MANAGING ASTHMA

**STEP 1**

*ALL AGES*

**Preferred:** Low-dose inhaled steroid

**Alternative:** Leukotriene blocker or cromolyn

*AGE 0-4 YRS*

Consider referral (especially if diagnosis is in doubt)

*AGE 5-11 YRS*

Low-dose inhaled steroid + long-acting beta agonist or Medium-dose inhaled steroid

**STEP 2**

*AGE 12+ YRS*

**Preferred:** Medium-dose inhaled steroid + long-acting beta agonist

**Alternative:** Medium-dose inhaled steroid + leukotriene blocker

**STEP 3**

*AGE 12+ YRS*

**Preferred:** Medium-dose inhaled steroid + long-acting beta agonist

**Alternative:** Medium-dose inhaled steroid + leukotriene blocker

*AGE 5-11 YRS*

Same as 12+ yrs

*AGE 0-4 YRS*

Medium-dose inhaled steroid + referral

**STEP 4**

*AGE 12+ YRS*

**Preferred:** Medium-dose inhaled steroid + long-acting beta agonist

**STEP 5**

*AGE 12+ YRS*

High-dose inhaled steroid + long-acting beta agonist + oral steroid

— and —

Consider omaluzimab if allergies

*AGE 5-11 YRS*

**Preferred:** High-dose inhaled steroid + long-acting beta agonist

**Alternative:** High-dose inhaled steroid + leukotriene blocker + oral steroid

*AGE 0-4 YRS*

High-dose inhaled steroid + either long-acting beta agonist or leukotriene blocker

— and —

Consider omaluzimab if allergies

**STEP 6**

*AGE 12+ YRS*

High-dose inhaled steroid + long-acting beta agonist

— and —

Consider omaluzimab if allergies

*AGE 5-11 YRS*

**Preferred:** High-dose inhaled steroid + long-acting beta agonist

**Alternative:** High-dose inhaled steroid + leukotriene blocker + oral steroid

*AGE 0-4 YRS*

High-dose inhaled steroid + either long-acting beta agonist or leukotriene blocker + oral steroid

All ages Steps 4 through 6: Consult with asthma specialist

**RESCUE MEDICATION:** Short-acting beta-agonist (e.g., albuterol) as needed for symptoms. Treatment intensity depends on symptom severity. Frequent or increasing use of rescue medication may indicate inadequate control and the need to step up treatment.

**INTERMITTENT ASTHMA**

**PERSISTENT ASTHMA: DAILY MEDICATION**

*Step up* as indicated although address possible poor adherence to medication. Re-assess in 2 to 6 weeks.

*Step down* if well controlled and re-assess in 3 months. If very stable then assess control every 3 to 6 months.

All LABAs and combination agents containing LABAs have a black box warning.