

All Wales Paediatric Asthma Management and Prescribing Guideline

CORE PRINCIPLES

- Review peak flow, inhaler technique, triggers, vaping, smoking and secondhand smoke exposure at each review.
- Where possible, enrol patient on the AsthmaHub for Parents app
- Review digital control record on patient's app at each review.
- Update digital asthma action plan and medication on patient's app at each review.
- Document your health care interaction on patient's app at each review.

TREATMENT AND INHALER PRINCIPLES

- Use Paediatric low, moderate and high dose Inhaled Corticosteroids (ICS) in children under 12 years
- Use Adult low, moderate and high dose ICS in children aged 12 years and over.
- All MDIs should be used with a spacer [Aerochamber Plus series recommended]. Mouthpiece spacers are more efficient than mask spacers. Children >3 years should be able to use a mouthpiece spacer even when unwell.
- Consider Dry Powder Inhalers (DPI) in children 6 years and over, and trial DPI as first line in children 12 years and over.
- For children already on metered dose inhalers (MDI), consider "switch from six" from MDI to DPI according to patient preference. Ensure adequate technique training. Review response to any change of therapy within 3 months.
- Prescribe by brand to ensure consistent device.
- ICS and LABA must always be in combination inhaler.
- Prescribe SABA MDI and spacer for emergency use to all children.

Grŵp Strategaeth Meddyginiaethau Cymru Gyfan
All Wales Medicines Strategy Group



Y Grŵp Gwellthredu
a'r Iechyd Anadl
Respiratory Health
Implementation Group



GIG
CYMRU
NHS
WALES



Find out more about this guideline
icst.info/the-all-wales-paediatric-asthma-management-and-prescribing-guideline

Designed by The Institute of Clinical Science & Technology

NHS WALES GREEN AGENDA

NHS Wales has set a target to reduce the proportion of high global warming potential inhalers from more than 70% to less than 20%, by 2025.

Low global warming potential

High global warming potential

METERED DOSE INHALERS (MDI) HAVE A HIGHER CARBON FOOTPRINT THAN DRY POWDER INHALERS (DPI)

STEP 1: NEW ASTHMA DIAGNOSIS

Following a positive treatment trial
(see paediatric asthma diagnosis guideline)

Commence
Paediatric low dose ICS
plus PRN SABA

ICS OPTIONS INCLUDE: SABA OPTIONS INCLUDE:

Clenil modulite 100mcg
1 dose BD via spacer

Salamol 100mcg
via spacer

Mask spacer age <3 yrs
Mouthpiece spacer age >3yrs
Recommend Aerochamber Plus series

STEP 2: PERSISTENT SYMPTOMS

Trial of montelukast
(as add on therapy)

4mg nocte

As granules aged < 2 years
As chewable tablet aged > 2 years



Discontinue if no benefit after 6 weeks

STEP 3

Referral to
secondary
care
asthma
services

Age
Under 4yrs



Change to
Paediatric moderate dose ICS
plus PRN SABA

ICS OPTIONS INCLUDE:
Clenil modulite 100 mcg
2 doses BD via spacer

Age 4yrs
and over



Change to
Paediatric moderate dose ICS
plus PRN SABA

ICS OPTIONS INCLUDE:
Clenil modulite 100 mcg
2 doses BD via spacer

STEP 4

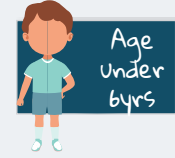
Referral to specialist
clinics or tertiary
asthma services
for reassessment

Change to
Paediatric moderate dose ICS/LABA
plus PRN SABA

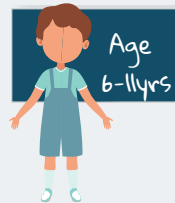
ICS/LABA OPTIONS INCLUDE:
Seretide 50/25 Evohaler
2 doses BD via spacer

STEP 5

Referral to
specialist clinics
or tertiary
asthma services
for reassessment



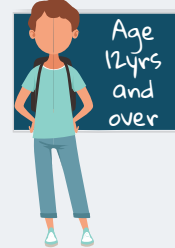
MDI



DPI



MDI



DPI



MDI

Commence
Paediatric low dose ICS
plus PRN SABA

Consider DPI in children aged >6 years with appropriate training

ICS OPTIONS INCLUDE:

Budesonide 100mcg Turbohaler (Pulmicort)
1 dose BD

SABA OPTIONS INCLUDE:

Terbutaline 500mcg Turbohaler
pm

ICS OPTIONS INCLUDE:

Clenil modulite 100mcg
1 dose BD via spacer

SABA OPTIONS INCLUDE:

Salamol 100mcg via spacer PRN
Salbutamol easy-breathe 100mcg PRN

Trial of montelukast
(as add on therapy)
5mg nocte



Discontinue if no benefit after 6 weeks

Change to
Paediatric low dose ICS/LABA
plus PRN SABA

Consider DPI in children aged >6 years with appropriate training

ICS/LABA OPTIONS INCLUDE:

Symbicort 100/6 Turbohaler
1 dose BD



ICS/LABA OPTIONS INCLUDE:

Seretide 50/25
2 doses OD-BD via spacer



Referral to
secondary
care
asthma
services for
reassessment

Change to
Paediatric moderate dose ICS/LABA
plus PRN SABA

Consider DPI in children aged >6 years with appropriate training

ICS/LABA OPTIONS INCLUDE:

Symbicort 100/6 Turbohaler 2 doses BD



Seretide 100 Accuhaler 1 dose BD



ICS/LABA OPTIONS INCLUDE:

Flutiform 50/5
2 doses BD via spacer



Seretide 50/25
2 doses BD via spacer



Referral to
specialist clinics
or tertiary
asthma services
for reassessment

Commence
Adult low dose ICS
plus PRN SABA

Trial DPI as first line in children aged >12 years with appropriate training

ICS OPTIONS INCLUDE:

Budesonide 100mcg Turbohaler (Pulmicort)
1-2 doses BD

SABA OPTIONS INCLUDE:

Terbutaline turbohaler 500mcg pm

Budesonide 100mcg Easyhaler
1-2 doses BD

Salbutamol easyhaler 100mcg pm

ICS OPTIONS INCLUDE:

Clenil modulite 100mcg
1-2 doses BD via spacer

SABA OPTIONS INCLUDE:

Salamol 100mcg via spacer PRN
Salbutamol easy-breathe 100mcg PRN

Trial of montelukast
(as add on therapy)
Age 12-14 yrs: 5mg nocte
Age 15-17 yrs: 10mg nocte



Discontinue if no benefit after 6 weeks

Change to
Adult low dose ICS/LABA
plus PRN SABA

1. Fixed dose plus PRN SABA OR
2. MART regime plus emergency SABA

Trial DPI as first line in children aged >12 years with appropriate training

FIXED DOSE ICS/LABA
OPTIONS INCLUDE:

Symbicort 100/6 Turbohaler
2 doses BD



Relvar Elipta 92/22
1 dose OD



MART REGIME
OPTIONS INCLUDE:

Symbicort 100/6 Turbohaler
1 dose BD plus additional doses as needed (max 8 doses/24 hrs)



ICS/LABA OPTIONS INCLUDE:

Flutiform 50/5
2 doses BD via spacer



Seretide 50/25
2 dose BD via spacer



Referral to
secondary
care
asthma
services for
reassessment

Change to
Adult moderate dose ICS/LABA
plus PRN SABA

1. Fixed dose plus PRN SABA OR
2. MART regime plus emergency SABA

Trial DPI as first line in children aged >12 years with appropriate training

FIXED DOSE ICS/LABA
OPTIONS INCLUDE:

Symbicort 200/6 Turbohaler
2 doses BD



Relvar Elipta 184/22
1 dose OD



MART REGIME
OPTIONS INCLUDE:

Symbicort 200/6 Turbohaler
1-2 doses BD plus additional doses as needed (max 8 doses/24 hrs)



FIXED DOSE ICS/LABA OPTIONS INCLUDE:

Flutiform 125/5
2 doses BD via spacer



Seretide 125/25
2 doses BD via spacer



Referral to
specialist clinics
or tertiary
asthma services
for reassessment



DPI: Dry Powder Inhaler
ICS: Inhaled Corticosteroid
LABA: Long-acting Beta₂ Agonist
LAMA: Long Acting Muscarinic Antagonist
MART: Maintenance and Reliever Therapy
MDI: Metered Dose Inhaler
PRN: Pro re nata 'as needed'
SABA: Short-acting Beta₂ Agonist
OD: Once daily
BD: Twice a day



ICS categorisation
(beclomethasone dipropionate equivalent)

-Paediatric low dose
200mcg/day
-Paediatric moderate dose
200-400mcg/ day
-Paediatric high dose
>400 mcg/day

-Adult low dose
400mcg/day
-Adult moderate dose
400-800mcg/ day
-Adult high dose
>800 mcg/day

ICS dosing categories used here from NICE (NG80)

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