## 2021 Asthma Management Continuum Preschoolers, Children and Adults

Severe Asthma \*\*\*

≥12 vrs: Add LTRA and/or tiotropium

### Regularly Reassess

- Control
- · Risk of exacerbation
- Spirometry or PEF
- Inhaler technique
- Adherence
- **Triggers**
- Comorbidities

6-11 yrs: Add LABA or LTRA

≥12 yrs: Add LABA

1-11 yrs: Increase ICS

# Adjust Therapy to Achieve Control and Prevent Future Risk Inhaled Corticosteroid (ICS)

Second-Line: Leukotriene Receptor Antagonist (LTRA)

≥ 12 vrs: ≤ 250 mcg/day § 6-11 yrs: ≤ 200 mcg/day § 1-5 yrs: < 200 mcg/day §

251 - 500 mcg/day § 201 - 400 mcg/day § 200 - 250 mcg/day §

**High Dose** 

> 500 mcg/day § > 400 mcg/day + § Refer

### SABA or bud/form\* as needed

# **Environmental Control, Education and Written Action Plan**

# **Confirm Diagnosis**

- § HFA Fluticasone propionate or equivalent
- + Not approved for use in Canada

In adults, 18 years of age and over with moderate to severe asthma assessed in specialist centres

<sup>\*</sup> Or an alternative ICS/form preparation if another is approved for use as a reliever in the future. Bud/form is approved as a reliever for ≥12 years of age and should only be used as a reliever in individuals using it as monotherapy or in conjunction with bud/form maintenance therapy

For severe asthma refer to CTS 2017 Recognition and management of Severe Asthma Position Statement