

**First line ICS and first line ICS/LABA combination inhaler dosage table<sup>11</sup>**

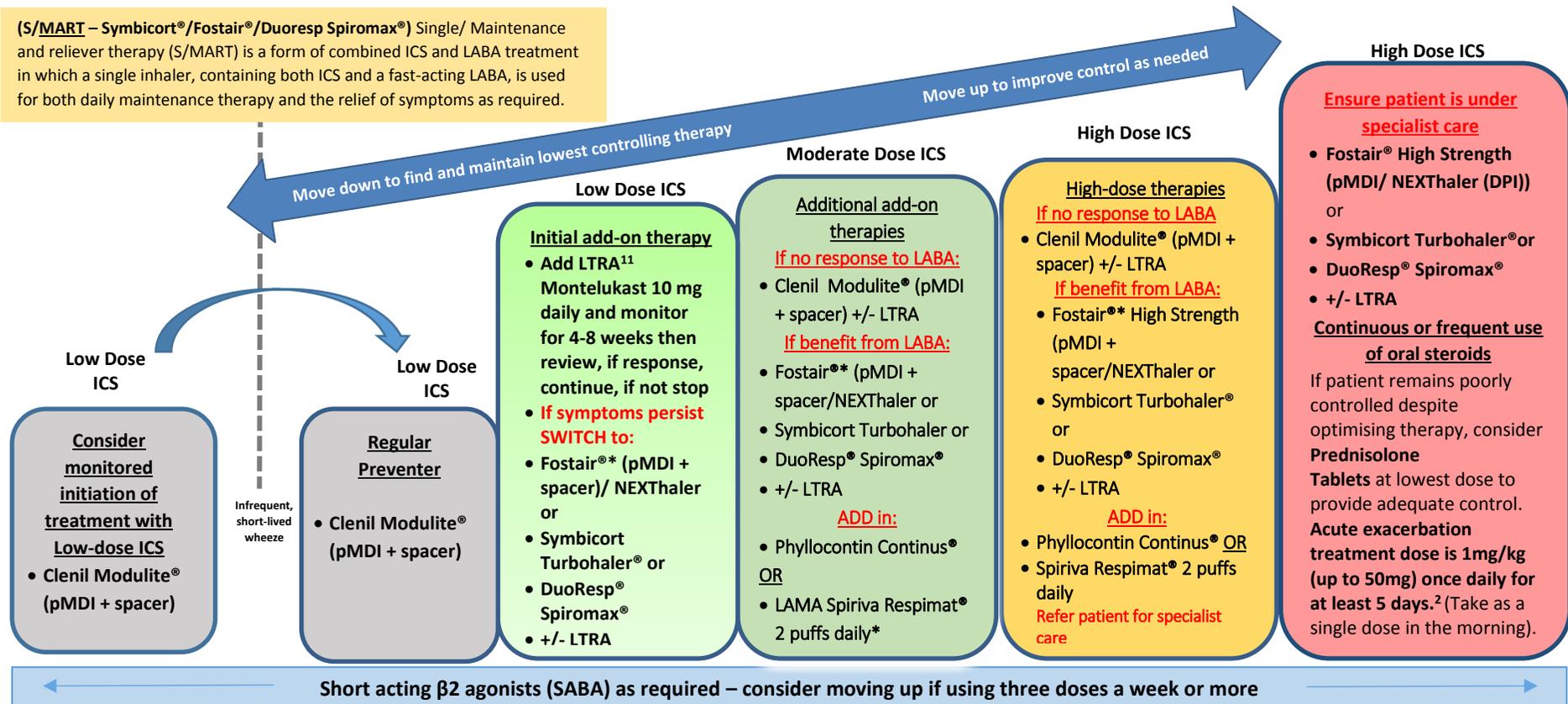
First line inhaler*	Low dose	Moderate dose	High dose
<b>Beclometasone dipropionate</b>			
<b>Standard particle CFC-free inhalers</b>	200–400 micrograms per day in 2 divided doses	600–800 micrograms per day in 2 divided doses	1,000–2,000 micrograms per day in 2 divided doses
<b>Clenil Modulite® MDI +/- spacer</b>	100 mcg strength	200 mcg strength	250 mcg strength
	1 to 2 puffs twice daily	2 puffs twice daily	2-4 puffs twice daily
<b>Beclometasone dipropionate + formoterol</b>			
<b>Extra-fine particle CFC-free inhalers<sup>2</sup></b>	100–200 micrograms per day in 2 divided doses	300–400 micrograms per day in 2 divided doses	500–800 micrograms per day in 2 divided doses
<b>Fostair® MDI +/- spacer / Fostair Nexthaler® DPI</b>	100 mcg/ 6 mcg strength		200 mcg/ 6 mcg strength
	1 puff twice daily	2 puffs twice daily	2 puffs twice daily
<b>Budesonide + formoterol</b>			
<b>Dry powder inhalers</b>	200–400 micrograms per day as a single dose or in 2 divided doses	600–800 micrograms per day as a single dose or in 2 divided doses	1,000–1,600 micrograms per day in 2 divided doses
<b>Symbicort® Turbohaler</b>	200mcg/6mcg strength		400mcg/ 12mcg strength
	1 puff twice daily	1-2 puffs twice daily	1-2 puffs twice daily
<b>DuoResp® Spiromax®</b>	160 mcg/ 4.5 mcg strength ≡ 200 mcg/6mcg		320mcg/ 9mcg strength ≡ 400 mcg/12 mcg
	1 puff twice daily	1-2 puffs twice daily	1-2 puffs twice daily

\*These first line choices are evidence based, cost effective and are currently the lowest acquisition cost; any changes will be highlighted via scriptswitch/optimize

# ICS Dose Escalation and Dose De-escalation in the Management of Chronic Asthma in Adults ≥ 17 years of age<sup>1,2,11</sup>

Asthma – Suspected	Asthma - Diagnosed
Diagnosis and assessment	<b>Evaluation:</b> <input type="checkbox"/> Assess symptoms <input type="checkbox"/> Measure lung function <input type="checkbox"/> Check inhaler technique <input type="checkbox"/> Adherence <input type="checkbox"/> Adjust dose <input type="checkbox"/> Update self-management plan (PAAP) <input type="checkbox"/> Move up and down as appropriate

(S/MART – Symbicort®/Fostair®/Duoresp Spiromax®) Single/ Maintenance and reliever therapy (S/MART) is a form of combined ICS and LABA treatment in which a single inhaler, containing both ICS and a fast-acting LABA, is used for both daily maintenance therapy and the relief of symptoms as required.



\*If control in adults remains inadequate on medium-dose ICS/LABA inhaler AND has had ≥ 1 exacerbations in the previous year, addition of Spiriva Respimat® can be considered  
 ICS=inhaled corticosteroids; LABA=long-acting beta agonists; LTRA=leukotriene receptor antagonists; LAMA=long-acting muscarinic antagonists.

High dose ICS should only be used after referring patient to specialist /secondary care

Updated October 2018