



Clinical Champion Update

Date: 2/22/21

Subject: Asthma

Below are the relevant highlights from the 2020 Asthma Updates from the NHLBI.

Intermittent Inhaled Corticosteroids

- **In children ages 0-4 years with recurrent wheezing, a short (7-10 day) course of daily inhaled corticosteroids along with an as-needed short-acting bronchodilator (e.g., albuterol sulfate) is recommended at the start of a respiratory tract infection.**
- **In people ages 4 years and older with mild to moderate persistent asthma who use inhaled corticosteroids daily, increasing the regular inhaled corticosteroid dose for short periods is NOT recommended when symptoms increase or peak flow decreases.**
- **For people ages 4 and older with moderate to severe persistent asthma, the preferred treatment is a single inhaler that contains an inhaled corticosteroid and the bronchodilator formoterol. This should be used as both a daily asthma controller and quick-relief therapy.**
- **People ages 12 and older with mild asthma may benefit from inhaled corticosteroids with a short-acting bronchodilator for quick relief. Treatment may include inhaled corticosteroids daily or as needed when asthma gets worse.**

Long-Acting Muscarinic Antagonists (LAMA)

If inhaled corticosteroids alone do not control asthma, a health care provider may add a long-acting bronchodilator such as a long-acting beta2-agonist (LABA) or a LAMA.

- **For children under 12 and most people 12 or older with asthma that is not controlled by an inhaled corticosteroid alone, adding a LABA rather than a LAMA to an inhaled corticosteroid is preferred.**

- For people 12 years old and older, if a LABA cannot be used, a LAMA may be used with inhaled corticosteroid treatment instead of continuing the inhaled corticosteroid alone.
- For people 12 years old and older whose asthma is not controlled with an inhaled corticosteroid plus a LABA, adding a LAMA is recommended.

Indoor Allergen Reduction

- For people with asthma who are sensitive to indoor substances (such as house dust mites), using multiple strategies to reduce the allergen is recommended (such as using pillow and mattress covers that prevent dust mites from going through them along with high efficiency particulate air (HEPA) filtration vacuum cleaners). Using only one strategy often does not improve asthma outcomes.
- Integrated pest management is recommended for those who are allergic and exposed to cockroaches, mice or rats. (editorial comment- these include glue traps, Applying boric acid to entry points, sealing gaps with caulk to prevent entry, plastic containers for cereal boxes, etc. JF)
- These strategies are not recommended for people who are not allergic to indoor substances.

Immunotherapy

Immunotherapy is an asthma management strategy in which people with allergies are exposed to low doses of an allergen.

- Allergy shots, known as subcutaneous immunotherapy, are recommended for people who have allergic asthma and whose symptoms worsen after exposure to certain allergens.
- Sublingual immunotherapy, which involves placing drops or tablets containing allergens under the tongue, is not recommended for the treatment of allergic asthma.

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