



Red/ green colour code denotes sustainability - however attention must be paid to suitability and needs of individuals in this age group. See notes below.

Consider trial of montelukast at night at any stage. See pathway on next page [Guidelines | British Thoracic Society | Better lung health for all \(brit-thoracic.org.uk\)](#)

Short acting beta agonists (SABA)

As required – consider moving up if using three doses a week or more

Salbutamol Easyhaler®	100 mcg/puff 2 puffs PRN Max 8 puffs daily	
Bricanyl Turbohaler® (terbutaline)	500mcg/puff 1 puff PRN. Max 4 puffs daily	
Ventolin 200 Accuhaler® (salbutamol)	200mcg/ puff 1 puff PRN	
Salamol® (salbutamol) MDI	100mcg/puff 2 puffs PRN Max 8 puffs daily	
Salamol (salbutamol) Easi-breathe® MDI	100mcg/puff 1-2 puffs PRN Max 8 puffs daily	

Inhaled corticosteroid (ICS) devices

Budesonide Easyhaler®	low	medium	
	100 2 puffs bd	200 2 puffs Bd	
Pulmicort Turbohaler® (budesonide)	low	medium	
	100 2 puffs bd	200 2 puffs Bd	
Clenil Modulite® (beclomethasone)	low	medium	
	100 2 puffs bd	200 2 puffs bd	


Choice of device

The child and their carers should be instructed carefully on the use of the inhaler. It is important to check that the inhaler is being used correctly as poor inhalation technique may be mistaken for a lack of response to the drug. Video and patient leaflets for inhaler technique can be found [here](#). Other helpful resources are [Right Breathe](#) and the [NICE patient decision aid](#) and the manufacturers







Many children of this age will manage **dry powder inhalers (DPIs)**. DPIs are easier to carry around and have a lower carbon footprint. They need less co-ordination however a deep, forceful inhalation is required.

For children unable to manage a DPI a **metered dose inhaler (MDI)** may be considered. These should be used with a spacer. The AeroChamber Plus Flow-Vu Anti-Static® range are the spacers of choice locally.

S/MART licensed inhaled corticosteroid + long acting beta agonist devices

Symbicort Turbohaler® (budesonide/ formoterol) SMART action plan	low	medium	
	100/6 2 puffs bd or 200/6 1 puff bd	200/6 2 puffs bd or 400/12 1 puff bd	

Standard inhaled corticosteroid + long acting beta agonist devices

Atecura Breezehaler® (mometasone/ Indacaterol)	low	medium	
	62.5/125 1 cap inhaled od	127.5/125 1 cap Inhaled od	
Fixkoh Airmaster® (fluticasone/ salmeterol)	low	medium	
	50/100 1 puff bd	50/250 1 puff bd	
Seretide Accuhaler® (fluticasone/ salmeterol)	low	medium	
	100/50 1 puff bd	250/50 1 puff bd	
Symbicort Turbohaler® (budesonide/ formoterol)	low	medium	
	100/6 2 puffs bd or 200/6 1 puff bd	200/6 2 puffs bd or 400/12 1 puff bd	
Combisal® (fluticasone/ salmeterol)	low	medium	
	25/50 2 puffs bd	25/125 2 puffs bd	
Seretide Evohaler® (fluticasone/ salmeterol) MDI	low	medium	
	50/25 2 puffs bd	125/25 2 puffs bd	

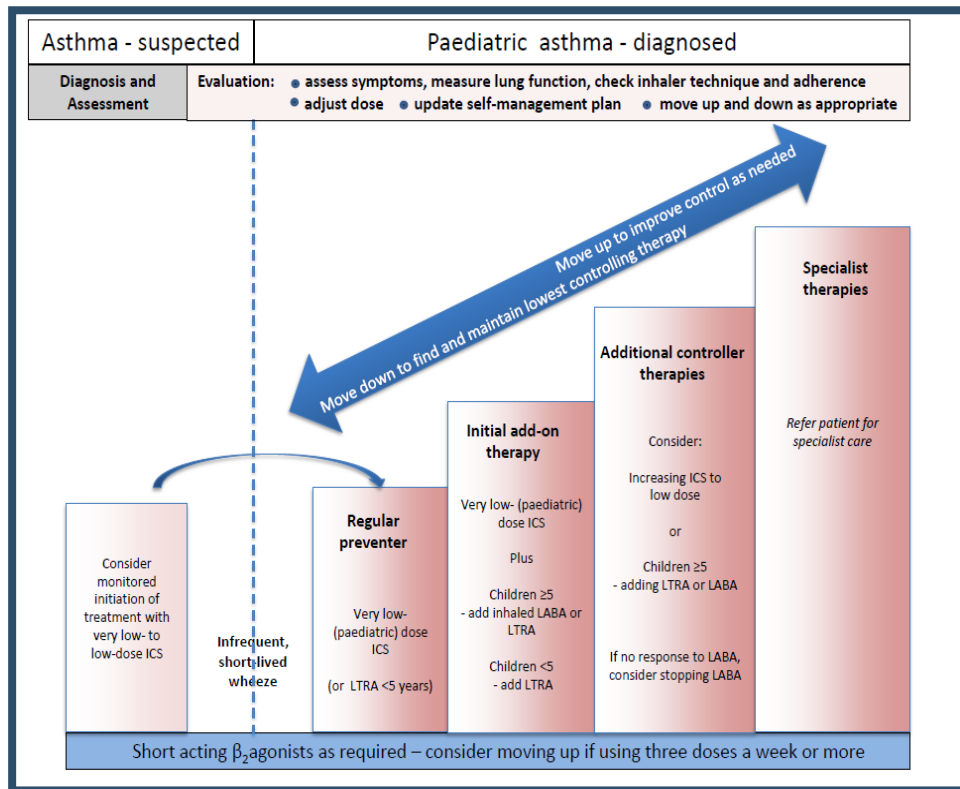
Prescribe inhalers by brand only

Inhalers are listed in alphabetical order (not preference). Decide on the best device with the patient

Empty, part used or unused inhalers and cartridges should be returned to pharmacies for safe disposal

Please refer to treatment pathway for paediatric asthma

[Guidelines | British Thoracic Society | Better lung health for all \(brit-thoracic.org.uk\)](#)



References:

- [Inhaled corticosteroids | Prescribing information | Asthma | CKS | NICE](#)
- [Respiratory system, drug delivery | Treatment summaries | BNFC | NICE](#)
- [Overview | Inhaler devices for routine treatment of chronic asthma in older children \(aged 5–15 years\) | Guidance | NICE](#)
- Inhaler device images from [RightBreathe](#)