

Asthma Aide Memoir – MART (Maintenance and Reliever Therapy) Regimens for Adults aged 18 and over

Licensed inhalers: Fostair®/ Symbicort® (known as SMART regimen)/ DuoResp Spiromax®/ Fobumix® ***Always Prescribe Inhalers by BRAND***

What? Maintenance and reliever therapy is combined ICS and LABA treatment in which a single inhaler, containing both ICS and a fast-acting LABA
Who? For patients who suit a single inhaler for both daily maintenance therapy and the relief of symptoms as required
When? Ideally start for patients with uncontrolled asthma aged 18 and over on a **Low dose ICS** with a Personalised Asthma Action Plan (PAAP) who are able to self-manage and are compliant with their own treatment– see Frimley CCG Primary Care Medicines Management of Asthma in Adults & NICE Guideline [NG 80] Feb 20

Regimen	Fostair MDI or Nexthaler (MART)	Symbicort Turbohaler (SMART)	DuoResp Spiromax (MART)	Fobumix Easyhaler (MART)
Device/Active Ingredients	Metered Dose Inhaler (MDI) or Dry Powder Inhaler (DPI) (Nexthaler) Beclometasone/formoterol 100/6 Note: extra-fine particle size (more potent than standard particle CFC-free inhalers) MDI to be used via a spacer	Dry Powder Inhaler (DPI) Budesonide/formoterol 100/6 Budesonide/formoterol 200/6	Dry Powder Inhaler (DPI) Budesonide/formoterol 160/4.5 only (equivalent to 200/6 Symbicort Turbohaler)	DPI Budesonide/formoterol 80/4.5 or Budesonide/formoterol 160/4.5
Licensed Age	18 years and over	12 years and over	18 years and over	18 years and over
Maintenance dose	1 puff twice a day (Only one licensed dose)	100/6 strength – 2 puffs daily or 1 puff bd Can increase to 200/6 strength – 2 puffs daily For some patients 2 puffs twice daily may be appropriate	2 puffs daily or 1 puff bd Increased if necessary, to 2 puffs twice a day for some patients	2 puffs daily or 1 puff bd Maintenance dose of 2 inhalations twice daily may be appropriate
As required dose	1 additional puff as needed. If symptoms persist an additional puff can be taken.	1 puff as required, if symptoms persist an additional puff can be taken. No more than 6 puffs on any single occasion	1 puff as required, if symptoms persist an additional puff can be taken. No more than 6 puffs on any single occasion.	1–2 puffs to relieve symptoms as needed No more than 6 puffs on any single occasion.
Maximum number of puffs in 24 hours	8 puffs in 24 hours	Normally 8 puffs in 24 hours. <i>Total daily dose of up to 12 puffs for a limited period</i>	Normally 8 puffs in 24 hours <i>Total daily dose of up to 12 puffs for a limited period</i>	Normally 8 puffs in 24 hours <i>Total daily dose of up to 12 puffs for a limited period</i>
Costs per 24 hours	All similar in cost– patient being able to use device appropriately is the most important factor			

- The total maintenance dose of ICS should not be decreased
- Patients taking regular (once a day or more), rescue doses of their combination inhaler should have their treatment reviewed
- The use of a separate short acting beta 2 agonist reliever inhaler (SABA) should not be required **BUT** patients **MUST** be advised to have their MART inhaler **available for rescue use** and have additional supply available. If patients require SABA the suitability of that patient for MART regimen should be reviewed
- Patient should be given a personal MART action plan which outlines how and when to increase the dose and what to do if symptoms do not improve
- **Careful education of patients about the specific issues around this management strategy is required – Plan and Review response in 6-8 weeks**

Prescribing Tips:

- Check strength of inhaler licensed for MART regimen
- Make dosage clear stating MART regimen within the instructions – option in Emis dose pop up
- Include maximum number of puffs per 24 hours
- Add patient text – *refer to MART action plan as per discussion with respiratory nurse specialist*
- Consult the relevant SPC - <https://www.medicines.org.uk/emc/> if further detail needed

Coding - Add

Single inhaler maintenance and reliever therapy started

Supply

Be mindful that the Emis pop up may be inaccurate if MART regimen being used