

# Asthma medicines

You can control your asthma well by managing the factors that trigger it and by using asthma medicines correctly. Most asthma medicines are inhaled (breathed) into the lungs, but sometimes tablets, syrups or injections have to be used. The three main types of asthma medicines are called relievers, preventers and symptom controllers.

## Relievers

Relievers open airways quickly by relaxing the muscles around the airways. Reliever inhaler devices are normally blue or grey colours.

Relievers include: *Airomir*, *Asmol*, *Bricanyl* and *Ventolin* inhalers

Relievers:

- help relieve asthma symptoms within a few minutes. Their effect can last for 4-6 hours.
- should be used only “as needed” for quick relief
- may be used before exercise, to prevent exercise-induced asthma
- are available from a pharmacist without a prescription.

Some people may feel a little shaky and notice a fast heart beat for a short time after using a reliever inhaler. Ask a doctor or pharmacist for advice.

## Preventers

Asthma makes the lining of your airways inflamed (red and swollen). Preventers reduce this inflammation and reduce the amount of mucus in airways. They also make airways less sensitive to asthma triggers. They can prevent asthma symptoms and lung damage if used every day.

Preventers include:

- Corticosteroids (e.g. *Alvesco*, *Flixotide*, *Pulmicort* and *Qvar* inhalers)
- Cromones (e.g. *Intal* and *Tilade* inhalers)
- Leukotriene receptor antagonists (e.g. *Singulair* tablets).

Preventers:

- must be used or taken every day, even when you don't have any symptoms

- may take several weeks to improve symptoms
- will not relieve an asthma attack once it has started.

Some people need to use preventers for only a few weeks or months of the year, but other people need to use preventers all year round. If you do not get asthma symptoms and rarely use your reliever, ask your doctor to review your asthma medicines. Preventers should not be stopped unless advised by a doctor.

## Symptom controllers

Symptom controllers relax muscles around the airways. Their effect lasts about 12 hours. They are used for people with asthma who are already using a corticosteroid preventer and still have symptoms. Symptom controllers must be used every day with a corticosteroid preventer.

Symptom controllers include: *Foradile*, *Oxis* and *Serevent* inhalers.

## Combination inhalers

Combination inhalers contain a corticosteroid preventer and a symptom controller in the same inhaler device. To prevent asthma symptoms, a combination inhaler must be used every day, even when you don't have any symptoms.

Combination inhalers include: *Seretide* and *Symbicort* inhalers.

Some people can use the *Symbicort* combination inhaler as both a preventer and as a fast-acting reliever. Do not use *Symbicort* as a reliever unless advised by your doctor.

## Other medicines

- Ipratropium (e.g. *Atrovent* inhaler) – can relax muscles around the airways and may help some people.
- Prednisolone and prednisone (e.g. *Panafcortelone*, *Solone*, *Sone* tablets and *Predmix*, *Redipred* liquids) – oral corticosteroids that may be used to treat more severe asthma.
- *Xolair* injection – may prevent or relieve the symptoms of allergic asthma in some people.

## Inhalation devices

### Inhalers (puffers)

Inhalers deliver medicine directly into the lungs. There are two main types of inhalers:

1. Aerosol inhalers (e.g. Metered Dose Inhalers and Autohalers)
2. Dry powder inhalers (e.g. Turbuhalers and Accuhalers).

You can get good asthma control if you use your inhalers correctly.

Ask a pharmacist, doctor or asthma educator to demonstrate the correct way (technique) to use your inhaler.

There are How-To Videos on the National Asthma Council website ([www.nationalasthma.org.au](http://www.nationalasthma.org.au)).

### Spacers

A spacer is a chamber (like a tube) that fits onto a Metered Dose Inhaler (MDI) to help get more medicine into your lungs. Spacers can also reduce side effects from inhaled medicines (e.g. oral thrush). The medicine is sprayed into the spacer at one end and breathed

into the lungs from the other end. There is a variety of spacers available including children's spacers, large volume spacers, compact spacers and disposable spacers. It is best to use an MDI with a spacer.

### Nebulisers

A nebuliser is a pump that sprays liquid asthma medicine as a fine mist. The mist is then inhaled through a facemask or mouthpiece. For most people, a puffer and spacer are easier to use than a nebuliser, and just as effective.

### Self care

- Avoid or manage triggers that make your asthma worse.
- Use inhalers and spacers correctly. Check your technique.
- Always carry a reliever inhaler with you.
- Ask your doctor to help you write an Asthma Action Plan. Use this plan when your asthma symptoms start to get worse.
- Check your asthma inhalers are not empty.
- Check that your medicine has not expired.
- Rinse your mouth with water, gargle and spit out after using preventer inhalers. This reduces the risk of side effects like oral thrush and hoarse voice.
- Clean inhaler devices often. Follow the product information for cleaning instructions.

- Wash your spacer before first use and then once a month with warm water and kitchen detergent. Leave it to air dry without rinsing or wiping. This cleaning method reduces static charge on the spacer. Wipe detergent off the mouth piece before use.
- Wear a bracelet or necklace (e.g. a *MedicAlert* bracelet) that says you have asthma.

### Important

The aim of asthma treatment is to prevent symptoms. You should use your preventer or combination inhaler every day. Use your reliever only when needed. Always read and follow instructions carefully.

See a doctor or follow your Asthma Action Plan if you:

- need to use a reliever more than two days a week
- have daytime asthma symptoms more than two days a week
- use the whole reliever inhaler in less than a month.
- have asthma symptoms during the night
- find physical activity hard because of asthma
- notice your peak flow readings getting worse
- have an asthma attack.

## For more information

### **Asthma Australia**

Phone: 1800 645 130

Website: [www.asthmaaustralia.org.au](http://www.asthmaaustralia.org.au)

### **National Asthma Council Australia**

Phone: 1800 032 495

Website: [www.nationalasthma.org.au](http://www.nationalasthma.org.au)

### **MedicAlert Foundation**

Phone: 1800 88 22 22

Website: [www.medicalert.org.au](http://www.medicalert.org.au)

### **Healthdirect Australia**

Phone: 1800 022 222

Website: [www.healthdirect.org.au](http://www.healthdirect.org.au)

### **NPS MedicineWise**

#### **Medicines Line**

Phone: 1300 MEDICINE (1300 633 424)

Website: [www.nps.org.au](http://www.nps.org.au)

### **Consumer Medicine Information (CMI)**

Your pharmacist can advise on CMI leaflets.

### **The Poisons Information Centre**

In case of poisoning phone 13 11 26 from anywhere in Australia.

***Pharmacists are medicines experts.  
Ask a pharmacist for advice when  
choosing a medicine.***

## Related Fact Cards

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» *Smoking*

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