



CLINICAL GUIDELINE

Asthma and COPD inhaler device guides (primary and secondary care)

A guideline is intended to assist healthcare professionals in the choice of disease-specific treatments.

Clinical judgement should be exercised on the applicability of any guideline, influenced by individual patient characteristics. Clinicians should be mindful of the potential for harmful polypharmacy and increased susceptibility to adverse drug reactions in patients with multiple morbidities or frailty.

If, after discussion with the patient or carer, there are good reasons for not following a guideline, it is good practice to record these and communicate them to others involved in the care of the patient.

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Does this version include changes to clinical advice:	Yes
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Important Note:

The Intranet version of this document is the only version that is maintained. Any printed copies should therefore be viewed as 'Uncontrolled' and as such, may not necessarily contain the latest updates and amendments.

Adult asthma (18 years and over)- Inhaler device guide (primary and secondary care)

Please see NHSGG&C asthma guideline for full therapeutic guideline and formulary

Asthma management				No of doses/ inhaler (days inhaler will last)	Environmental impact
SABA	Salbutamol Easyhaler [®]	Dry powder inhaler	100 micrograms, two puffs when required	200 puffs	CO ₂ e
	Salbutamol CFC free inhaler	Aerosol (MDI)	100 micrograms, two puffs when required	200 puffs	CO ₂ e** CO ₂ e**
Regular preventer therapy- low dose ICS*	Beclometasone Easyhaler [®]	Dry powder inhaler	200 micrograms, ONE puff twice daily	200 (100 days)	CO ₂ e
	Clenil Modulite [®]	Aerosol (MDI)	200 micrograms, ONE puff twice daily	200 (100 days)	CO ₂ e
Change to low dose ICS* and LABA	Fostair [®] 100/6 Nexthaler [®]	Dry powder inhaler	ONE puff twice daily (or as MART)	120 (60 days)	CO ₂ e
	Fostair [®] 100/6	Aerosol (MDI)	ONE puff twice daily (or as MART)	120 (60 days)	CO ₂ e
Change to medium dose ICS* and LABA OR trial of LTRA (see GGC guideline)	Fostair [®] 100/6 Nexthaler [®]	Dry powder inhaler	two puffs twice daily	120 (30 days)	CO ₂ e
	Fostair [®] 100/6	Aerosol (MDI)	two puffs twice daily	120 (30 days)	CO ₂ e
	Relvar [®] 92/22 Ellipta	Dry powder inhaler	ONE puff once a day	30 (30 days)	CO ₂ e
High dose therapies (high dose ICS and LABA*)	Fostair [®] 200/6 Nexthaler	Dry powder inhaler	two puffs twice daily	120 (30 days)	CO ₂ e
	Fostair [®] 200/6	Aerosol (MDI)	two puffs twice daily	120 (30 days)	CO ₂ e
	Relvar [®] 184/22 Ellipta	Dry powder inhaler	ONE puff once a day	30 (30 days)	CO ₂ e

LAMA for asthma- consider as add-on treatment in adults on **medium to high dose** ICS with a history of exacerbations (one course of oral steroids for a severe exacerbation in the last year) or persistent airflow obstruction. Formulary choices: Spiriva Respimat[®] as add on to existing therapy or replacing ***medium dose ICS/LABA** with Trimbow[®] triple therapy inhaler (***no high dose ICS triple therapy option currently**)

* Refer to BTS/SIGN or NHSGGC asthma guideline for table of ICS categorisation by dose

Abbreviations:

SABA: short-acting beta₂ agonist

DPI: dry powder inhaler

MDI: metered dose inhaler

ICS: inhaled corticosteroid

LABA: long-acting beta₂ agonist

LAMA: long-acting muscarinic antagonist

LTRA: leukotriene receptor antagonist

MART: maintenance and reliever therapy

Clenil[®]= beclometasone dipropionate

Fostair[®] = extra-fine particle size beclometasone/formoterol

Relvar[®] = fluticasone furoate/vilanterol

Spiriva Respimat[®] = tiotropium fine mist inhaler

Trimbow[®] = beclometasone/formoterol/glycopyrronium

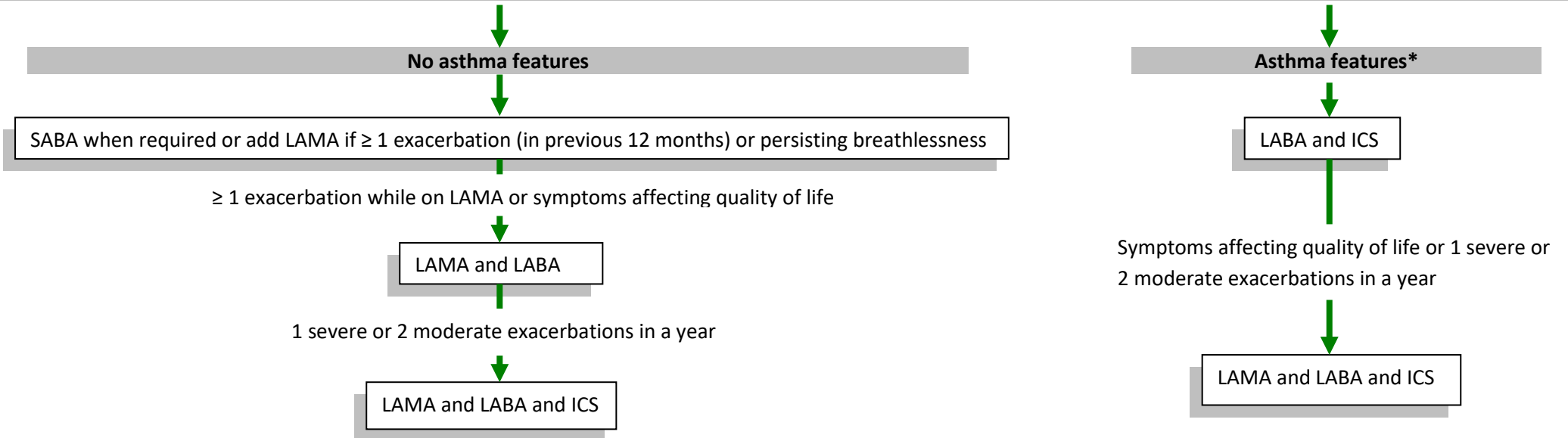
Environmental impact	
CO ₂ e	low CO ₂ emissions
CO ₂ e	high CO ₂ emissions
CO ₂ e	very high CO ₂ emissions

** (Ventolin[®] evohaler has higher CO₂ emissions than other brands of salbutamol)

COPD- Inhaler device guide (primary and secondary care)

Please see NHSGGC COPD guideline for full therapeutic guideline, MRC dyspnoea scale and COPD assessment tool (CAT)

COPD diagnosed- treatment to stop smoking, vaccines and pulmonary rehab



Preferred inhaler choices

SABA	Salbutamol Easyhaler® 100 micrograms, two doses when required (DPI) CO₂e	Salbutamol CFC free inhaler 100 micrograms, two puffs when required (MDI) CO₂e other brands CO₂e Ventolin	
LAMA	Braltus Zonda® DPI (tiotropium), 10 micrograms once a day CO₂e	Incruse Ellipta® DPI (umeclidinium) 55 micrograms, one puff once a day CO₂e	Spiriva Respimat® (tiotropium) 2.5 micrograms/dose, 2 puffs once a day CO₂e
LAMA and LABA	Anoro Ellipta® DPI (umeclidinium/vilanterol) 55/22 micrograms, one puff once daily CO₂e	Spiolto Respimat® (tiotropium and olodaterol) 2.5/2.5 micrograms/dose, 2 puffs once a day CO₂e	
LABA and ICS	Relvar Ellipta® DPI (fluticasone furoate/vilanterol) 92/22 micrograms, one puff once a day CO₂e	Fostair® (beclometasone/formoterol) 100/6 micrograms MDI and NEXThaler (DPI), two puffs twice daily CO₂e	CO₂e
ICS/LABA/LAMA	Trelegy Ellipta® DPI (fluticasone furoate/umeclidinium/vilanterol) 92/55/22 micrograms, one puff once daily CO₂e	Trimbow® MDI (beclometasone/formoterol/glycopyrronium) 87/5/9 micrograms, two puffs twice daily CO₂e	

*NICE COPD guidelines (2019) suggest asthma features include: any previous secure diagnosis of asthma or atopy, substantial variation in FEV₁ over time (at least 400mls), substantial variation in peak flow (at least 20%) or higher blood eosinophil counts (MCN advice is any previous blood eosinophil level > 0.3 x 10⁹/l)

Environmental impact	
CO ₂ e	low CO ₂ emissions
CO ₂ e	high CO ₂ emissions
CO ₂ e	very high CO ₂ emissions