



Overview of asthma management in children 6–11 years

Goals of asthma management

Overall goals for the Australian population:

- to minimise asthma deaths
- to minimise ED visits for asthma
- to minimise the burden of disease due to asthma.

Overall goals for individual patients:

- to minimise symptoms and disruption to exercise, sleep, and daily activities
- to minimise exacerbations requiring urgent care and systemic corticosteroids
- to achieve and maintain healthy lung function
- to minimise adverse effects of asthma treatment
- to achieve the patient's goals for their health.

Principles of asthma management

Management of asthma in children 6–11 years is based on:

- confirming the **diagnosis** as necessary
- **assessing symptom control and risk factors** repeatedly over time
- **choosing treatment** suitable for the child's pattern of symptoms, history of exacerbations and risk factors
- providing information, skills and tools for **parents and children to manage asthma**, including:
 - training in correct inhaler technique
 - information and support to maximise adherence to prescribed medicines
 - an individualised written asthma action plan
 - information about avoiding triggers, where appropriate
- reviewing and **adjusting treatment** periodically
- managing **exacerbations** when they occur
- managing comorbid conditions that affect asthma or contribute to respiratory symptoms, such as **allergic rhinitis**
- providing advice about **trigger exposure, healthy eating, physical activity, healthy weight** and **immunisation**.

Inhaled medicines: bronchodilators and anti-inflammatory agents

Asthma treatment in children 6–11 years is based on inhaled medication:

- rapid-acting bronchodilators to manage symptoms (all children)
- ICS to reduce airway inflammation and prevent exacerbations (when indicated).