



# Overview of asthma management in children 1–5 years

## Goals of asthma management

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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 sleep, play and preschool
- to minimise exacerbations requiring urgent care and systemic corticosteroids
- to achieve and maintain healthy lung function
- to minimise adverse effects of asthma treatment
- to avoid unnecessary medication by recognising spontaneous remission of asthma if it occurs.

## Principles of asthma management

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Management of preschool asthma is based on:

- establishing and rechecking 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 carers to manage a child's 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

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Asthma treatment in children 1–5 is based on inhaled medication:

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