Figure. Stepped approach to adjusting asthma medication in adults

**Medication**

<table>
<thead>
<tr>
<th>At this step $^\S$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Re却 to respiratory physician or severe asthma clinic, if available</td>
</tr>
<tr>
<td>Monitor and adjust to maintain good control at lowest effective dose</td>
</tr>
<tr>
<td>Consider referral</td>
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<tr>
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</tr>
<tr>
<td>Consider referral</td>
</tr>
<tr>
<td>Monitor reliever use</td>
</tr>
<tr>
<td>Reassess need for preventer</td>
</tr>
</tbody>
</table>

**Add-on specialised treatments**

Higher-dose combination regular preventer (+ reliever* as needed)

Preventer options:
- Budesonide/formoterol maintenance (medium dose) and reliever† (low dose) therapy
- ICS/LABA combination (moderate–high dose) as maintenance therapy

Low-dose combination regular preventer (+ reliever* as needed)

Preventer options:
- Budesonide/formoterol (low dose) maintenance-and-reliever therapy
- ICS/LABA combination (low dose) as maintenance therapy

Low-dose regular preventer (+ SABA as needed)

ICS (low dose)

**Table. Definitions of ICS dose levels in adults**

**Table. Initial treatment choices (adults and adolescents not already using a preventer)**

**Table. Definition of levels of recent asthma symptom control in adults and adolescents (regardless of current treatment regimen)**

**Table. Risk factors for adverse asthma outcomes in adults and adolescents**

**Before considering stepping up, check symptoms are due to asthma, inhaler technique is correct, and adherence is adequate**

**Consider stepping up if good control is not achieved despite good adherence and correct inhaler technique.**

**When asthma is stable and well controlled for 2–3 months, consider stepping down (e.g. reducing inhaled corticosteroid dose, or stopping long-acting beta₂ agonist if inhaled corticosteroid dose is already low).**

**ICS** inhaled corticosteroid; **SABA** short-acting beta₂ agonist; **LABA** long-acting beta₂ agonist

* Reliever means rapid-onset beta₂ agonist and includes:
  - short-acting beta₂ agonists
  - low-dose budesonide/formoterol combination – only applies to patients using this combination in a maintenance-and-reliever regimen (steps 3 and above).
  - This combination is not classed as a reliever when used in a maintenance-only regimen.

$^\S$ At all steps: review recent symptom control and risk regularly. Manage comorbidities and individual risk factors. Manage flare-ups with extra treatment when they occur. Manage exercise-related asthma symptoms as indicated.

† Medium dose as maintenance, low dose as reliever.