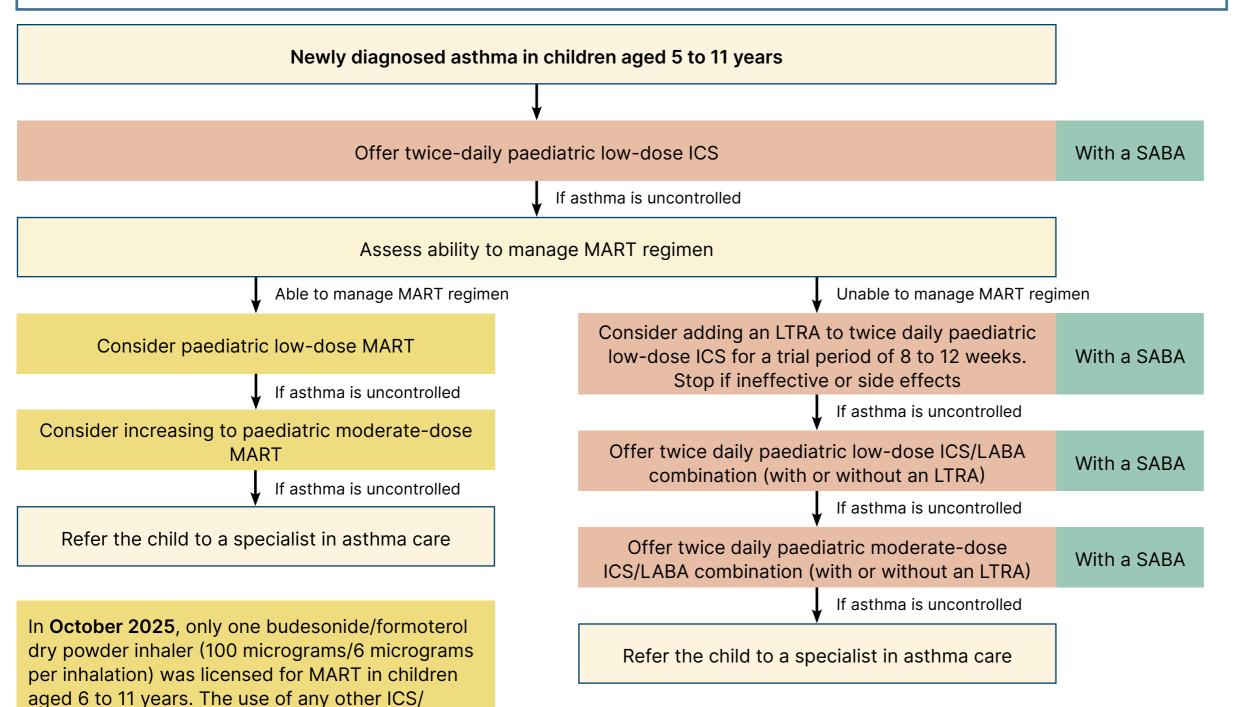
## Algorithm D: Pharmacological management of asthma in children aged 5 to 11 years BTS, NICE and SIGN guideline on asthma

Take into account and try to address the possible reasons for uncontrolled asthma before starting or adjusting medicines for asthma. For example: alternative diagnoses or comorbidities; suboptimal adherence; suboptimal inhaler technique; active or passive smoking (including e-cigarettes); psychosocial factors; seasonal factors; environmental factors (such as air pollution and indoor mould exposure)

Symptom relief

MART

Maintenance therapy



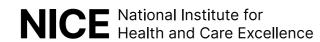
For guidance on dosages for paediatric low-dose ICS, see inhaled corticosteroid doses for the BTS, NICE and SIGN asthma guideline

Uncontrolled asthma:
Any exacerbation
requiring oral
corticosteroids or frequent
regular symptoms (such as
using reliever inhaler
3 or more days a week or
night-time waking 1 or more
times a week)

ICS, inhaled corticosteroid; LABA, long-acting beta<sub>2</sub> agonist; LTRA, leukotriene receptor antagonist; MART, maintenance and reliever therapy (using ICS/formoterol combination inhalers); SABA, short-acting beta<sub>2</sub> agonist.



would therefore be off-label.



formoterol inhalers for MART in children under 12

