

Metered dose inhaler

- Small and convenient to carry
- Good co-ordination essential for optimum medication delivery
- Requires shaking before every puff, one puff at a time
- Always rinse, gargle and spit after taking any preventer medication

Dry powder inhaler

- Small and convenient to carry
- Always breathe out away from device to keep dry
- Requires good inspiratory breath
- Does not require co-ordination
- Has a dose counter
- Always rinse, gargle and spit after taking any preventer medication

Metered dose inhaler with a spacer

- Easy to use
- Greatly increases medication to lungs giving better asthma control
- Reduces side effects
- Requires cleaning weekly to reduce static charge and maintain cleanliness
- MDI requires shaking before every puff. One puff at a time to 6 total breaths
- Always rinse, gargle and spit after taking any preventer medication



For further information please contact your local asthma society

Emergency

- **Take immediate action.**
- **If you are alone Dial 111 immediately and ask for an ambulance.**
- **Give 6 puffs of blue inhaler (one puff at a time) through a spacer/mask every 6 minutes until seen by emergency services.**
- **If two people present, 1st person dial 111 for ambulance and 2nd person administer medication.**



Asthma Medications

A guide to asthma medications

asthma

NEW ZEALAND

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Short acting Reliever Inhalers

- Respigen
- Salamol
- Ventolin
- Bricanyl
- Salair

- Atrovent
- Duolin

Preventer Inhalers

- Qvar
- Flixotide
- Beclazone
- Pulmicort
- Budenocort
- Floair

All Corticosteroids

- Tilade
- Vicrom

Non – Steroidal

Combinations

Seretide, Vannair, Symbicort, Rexair, BREO

What They Do?

- Relax the muscles around the narrowed airways
- Relieves symptoms of asthma. E.g. cough, wheeze, shortness of breath or chest tightness
- Works within 5 minutes and lasts for 4-6 hours
- If well; short acting reliever should not be used more than 2 times a week

- These are also short-acting relievers but take longer to act than blue relievers. They can take up to 30 minutes to have an effect, and can keep the airways open up to 4-6 hours

- Work on the inside of the airways reducing hypersensitivity, swelling, mucus and helping to prevent long term damage
- Take time to work, so results may not be noticed for a couple of weeks
- Preventers need to be taken every day; morning and night even when well

- These preventers are mostly used for mild asthma and for children

- Symptom controllers help to relax the muscles around the airways for up to 12 hours. They are taken every day, morning and night, and are always prescribed in conjunction with corticosteroid preventers. Symptom controllers may actually make asthma worse if they are used alone. **They should never be used without preventer therapy**

- Contains both a preventer and long acting reliever

Uses and Side Effects

- May be used before activity to prevent exercise-induced asthma
- Used for asthma emergency treatment
- May be used for a cold on doctors advice
- Side effects may include: tremors, headache, hyperactivity, and a rapid heartbeat

- More commonly used in other lung conditions
- Fairly free of side effects but may leave a bitter taste and dryness in the mouth

- Possible side effects may include oral thrush, hoarse voice and sore throat
- Reduce these problems by using a spacer with your puffer. Always rinse, gargle and spit after taking medication

- May also be taken prior to activity to prevent exercise-induced asthma
- Possible side effects may include an unpleasant taste and a cough after inhalation.
- Reduce these problems by using a spacer with you puffer then rinse, gargle and spit after taking medication

Symptom controllers may be prescribed for people who experience:

- Symptoms despite treatment with regular inhaled corticosteroids
- Night time symptoms
- Exercise-induced asthma
- Possible side effects include tremors, a rapid heartbeat and headaches

- Use every morning and night even when well, except BREO which is once daily only. Always rinse, gargle and spit after taking medication