High probability of asthma

Code as: suspected asthma

Initiation of treatment

Assess response objectively (lung function/validated symptom score)

Good response

Asthma

Adjust maintenance dose
Provide self-management advice
Arrange on-going review

Intermediate probability of asthma

Test for airway obstruction
spirometry + bronchodilator reversibility

Poor response

Low probability of asthma

Other diagnosis unlikely

Structured clinical assessment (from history and examination of previous medical records)

Look for:

- recurrent episodes of symptoms
- symptom variability
- absence of symptoms of alternative diagnosis

Test for airway obstruction
spirometry + bronchodilator reversibility

Options for investigations are:

Test for variability:
- reversibility
- PEF charting
- challenge tests

Test for eosinophilic inflammation or atopy:
- FeNO
- blood eosinophils,
- skin-prick test, IgE

Suspected asthma:
Watchful waiting (if asymptomatic)
or Commence treatment and assess response objectively

Good response

Poor response

Other diagnosis unlikely

Investigate/treat for other more likely diagnosis

Other diagnosis confirmed

Presentation with respiratory symptoms: wheeze, cough, breathlessness, chest tightness

In children under 5 years and others unable to undertake spirometry in whom there is a high or intermediate probability of asthma, the options are monitored initiation of treatment or watchful waiting according to the assessed probability of asthma.