SIGN 158 | British guideline on the management of asthma

<table>
<thead>
<tr>
<th>Asthma - suspected</th>
<th>Paediatric asthma - diagnosed</th>
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</thead>
<tbody>
<tr>
<td>Diagnosis and Assessment</td>
<td>Evaluation: assess symptoms, measure lung function, check inhaler technique and adherence, adjust dose, update self-management plan, move up and down as appropriate</td>
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</tbody>
</table>

- **Infrequent, short-lived wheeze**
  - Consider monitored initiation of treatment with very low- to low-dose ICS

- **Regular preventer**
  - Very low- (paediatric) dose ICS
  - Plus
  - Children ≥5 - add inhaled LABA or LTRA
  - Children <5 - add LTRA

- **Initial add-on therapy**
  - Very low- (paediatric) dose ICS
  - Plus
  - Children ≥5 - adding LTRA or LABA

- **Additional controller therapies**
  - Consider:
    - Increasing ICS to low dose
    - or
    - Children ≥5 - adding LTRA or LABA

- If no response to LABA, consider stopping LABA

- **Specialist therapies**
  - Refer patient for specialist care

**Short acting β₂-agonists as required** – consider moving up if using three doses a week or more

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