



WHAT ARE MY OPTIONS REGARDING THE COMBINATION OF INHALED CORTICOSTEROIDS AND OF A LONG-TERM ACTION BRONCHODILATOR USE TO IMPROVE ASTHMA CONTROL?



Symbicort^{MD}



Advair^{MD}



Advair Diskus^{MD}



Zenhale^{MD}

A Four-Step Decision Aid

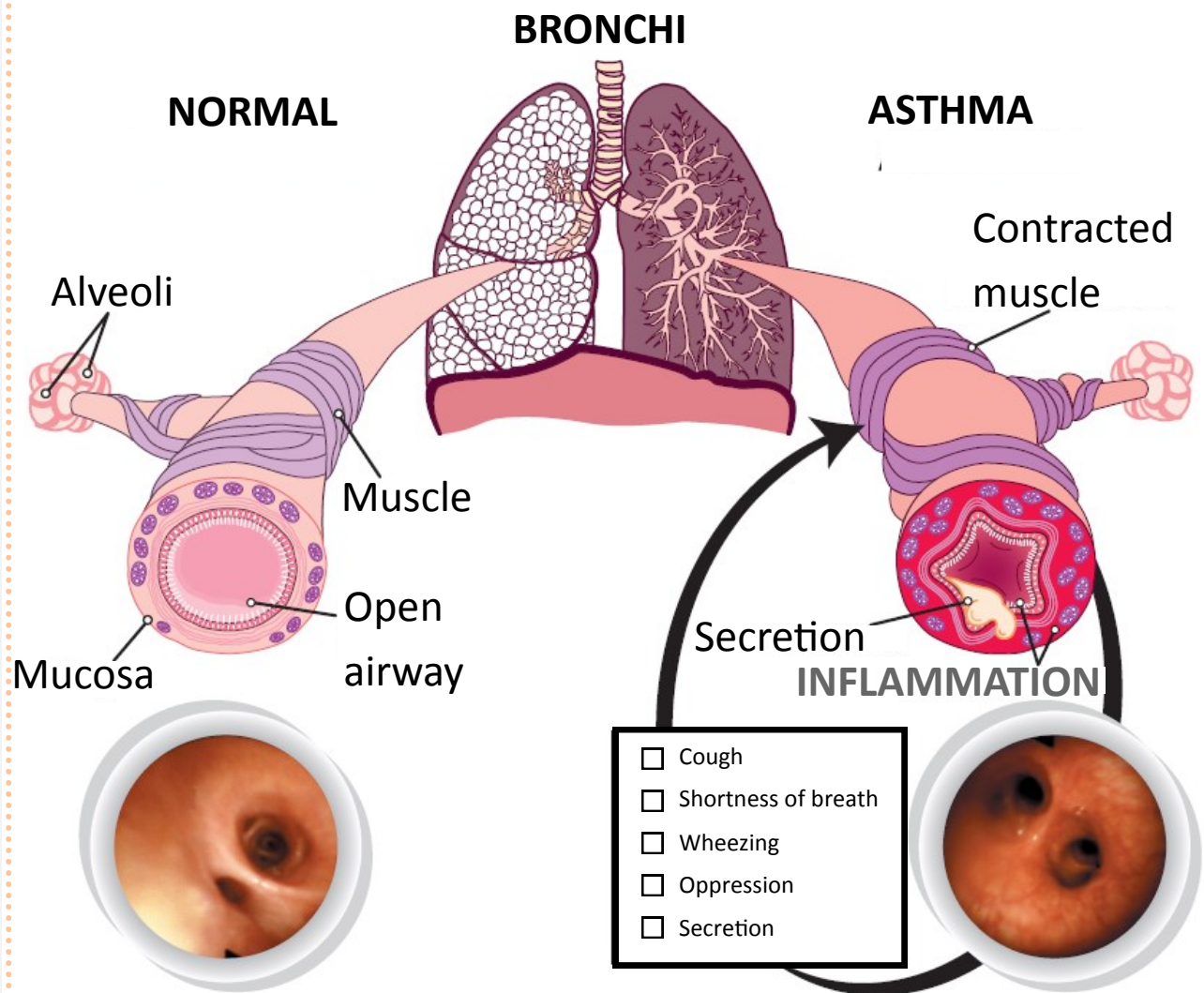
This decision aid is for me if:

- ◆ I am an adult aged between 18 to 65;
- ◆ I received a moderate or severe asthma diagnosis from my doctor;
- ◆ Asthma is not controlled by taking a medication that acts only on the inflammation of my bronchi;
- ◆ My doctor has recommended the regular intake of one of the inhalers shown above to treat asthma.

STEP 1: CLARIFY THE DECISION THAT I HAVE TO MAKE

What is asthma?

It is a chronic inflammatory disease that affects my bronchi.



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Asthma cannot be cured. However, some measures can be implemented in order to prevent changes in the structure of my bronchi and so that I can reach the main criteria in asthma control^[1] which are:

- ◆ Have symptoms less than 4 days/week;
- ◆ Have symptoms less than 1 night/week;
- ◆ Do normal physical activities;
- ◆ Use my rescue medicine less than 4 doses/week.

What is the content of my inhaler?

The inhaler contains **two maintenance medications**. These medications are used to control asthma in the long term.

The first medication:

- ◆ **Reduces the inflammation of my bronchi;**
- ◆ Starts working **12 to 48 hours** after the beginning of treatment;
- ◆ Has a **slow and gradual effect**.

The second medication:

- ◆ **Open the bronchi** and reduces bronchial reactivity;
- ◆ Has an effect that lasts 12 hours;
- ◆ Starts working after 1 to 3 minutes (Symbicort^{MD} or Zenhale^{MD}), or after 10 to 20 minutes (Advair^{MD}).

- ◆ **To be effective**, the inhaler must be taken regularly, **every day**, even in the absence of symptoms.

What are my choices^[1]?

- ◆ Use the inhaler;
- ◆ Not to use the inhaler & discuss with my healthcare provider the other measures that could be implemented to treat the inflammation of my bronchi and improve the control of asthma.

STEP 2: COMPARE AND WEIGH THE PROS AND CONS

The pros.

Are there any benefits in using the inhaler?

When compared with taking a medication that only reduces the inflammation of the bronchi, the inhaler containing two maintenance medications...



Improves:

- ◆ Quality of life*
- ◆ Lung function* (degree of bronchi opening)



Decreases:

- ◆ Asthma symptoms*
- ◆ Use of rescue medicine*
- ◆ Episodes of asthma control deterioration, characterized by an increase in symptoms and may require cortisone tablets intake*

...in patients with mild, moderate, and severe asthma, uncontrolled by taking a medication that acts only on the inflammation of my bronchi^[2].

* Moderate-quality evidence^[2]

The cons.

Are there any risks associated with using this inhaler?

When compared with taking a placebo medication (dummy medication), the inhaler containing two maintenance medications...

Increases the likelihood to see appearing:

- ◆ Thrush (white patches in the mouth caused by a fungus)
- ◆ Hoarse voice (husky)
- ◆ Sore throat*
- ◆ Shaking*
- ◆ Tachycardia* (increased heart beat)
- ◆ Palpitations (abnormal agitation of the heart)
- ◆ Nervousness

...in patients with asthma^[3].

* If it appears, this effect disappears after taking a few doses.

How can I reduce the possibility that these effects appear?

- ◆ I use a spacing chamber if my inhaler is a metered-dose inhaler.
- ◆ With the help of my health care provider, I make sure that my inhalation technique is adequate.
- ◆ I rinse my mouth with water after inhaling my medicine.

Some myths are associated with the use of this inhaler.

These are the facts.

The use of this inhaler:

- ◆ Is not fattening^[2];

- ◆ Does not lose its effectiveness in the long term^[5];

- ◆ Is not addictive^[6];

- ◆ Does not cure asthma, but helps control asthma^[2]. Currently, no measure succeeds in curing asthma.

CAUTION

I must always have on hand a rescue medication to treat my acute asthma symptoms.

**If my rescue medication becomes less effective,
I have to consult my doctor.**

Weigh the pros and cons.

What is most important to me?

To find out, I indicate the importance I give to each of the following statements, by filling in the corresponding circle.

1 means "it is very unimportant to me";

2 means "it is rather important to me";

3 means "it is very important to me".

a. Avoid nervousness or shakiness.



b. Avoid having palpitations or tachycardia.



c. Reduce the use of rescue medication.



d. Maintain or improve my lung function.



e. Improve my quality of life.



f. Avoid having a hoarse voice.



g. Prevent the emergence of thrush.



h. Avoid having to take cortisone tablets.



i. Reduce asthma symptoms.



j. Other:

At this point, which decision seems to be the most satisfying for me?

To find out, I write here below how many times, on the previous page, I filled:

♦ A yellow arrow:  ___ time;

♦ A blue arrow: ___  ___ time;

♦ An orange arrow:  ___ time.

I check the box that applies:

If the number of yellow arrows is the highest...

...I will take the inhaler.

If the number of blue arrows is the highest...

...I will not take the inhaler.

♦ In all other situations...

...I am unsure.

STEP 3: WHAT DO I NEED TO MAKE A DECISION?

I check the box that applies to my answer.

	Yes	No
<u>S</u>ure of myself		
Do I feel sure about the best choice for me?	<input type="checkbox"/>	<input type="checkbox"/>
<u>U</u>nderstand information		
Do I know the benefits and risks of each option?	<input type="checkbox"/>	<input type="checkbox"/>
<u>R</u>isk-benefit ratio		
Am I clear about which benefits and risks matter most to me?	<input type="checkbox"/>	<input type="checkbox"/>
<u>E</u>ncouragement		
Do I have enough support to make my choice?	<input type="checkbox"/>	<input type="checkbox"/>

The SURE test© 2008 O'Connor & Légaré^[7]

STEP 4: PLANNING THE NEXT STEPS ACCORDING TO MY NEEDS

I check the box that applies to my answer.

To improve asthma control...

♦ I do not know if I will take the inhaler. I am unsure.

♦ I write why here below.

♦ I will take the inhaler.

♦ I will not take the inhaler.

TO CONCLUDE, HERE IS A SUMMARY OF MEASURES THAT IMPROVE ASTHMA CONTROL

To improve asthma control, I have to:



Medication

- ◆ Adequately take my medication against asthma;



Cold Influenza

- ◆ Wash my hands regularly to avoid contracting microorganisms responsible for respiratory infections (e.g. common cold) or influenza;
- ◆ Get a vaccination against influenza each year;



Allergens

- ◆ Avoid being in the presence of substances to which I am allergic (allergens);



Tobacco

- ◆ Stop smoking;
- ◆ Avoid being exposed to tobacco smoke;



Follow-up

- ◆ Have a regular monitoring of asthma by my health care provider;
- ◆ Having my inhalation technique checked by my health care provider;



Action plan

- ◆ Assess asthma control on a regular basis;
- ◆ Follow my action plan recommendations when asthma worsens.

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References

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© 2014, 2021. Planned update of the tool in 2026.

The format is based on the *Ottawa Personal Decision Guide* © O'Connor, Stacey, Jacobsen, 2004 and on the *International Patient Decision Aid Standards*, 2005.

The information presented in this tool are not intended to replace advices or prescriptions from a health care provider, but rather to improve the communication between the latter and the patient and to help decision-making based on evidence and values.

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