



WHAT ARE MY OPTIONS REGARDING INHALED CORTICOSTEROIDS USE TO IMPROVE ASTHMA CONTROL?



Qvar^{MD}



Alvesco^{MD}



Pulmicort^{MD}



Flovent^{MD}



Flovent Diskus^{MD}



Asmanex^{MD}



Arnuity Ellipta^{MD}

A Four-Step Decision Aid

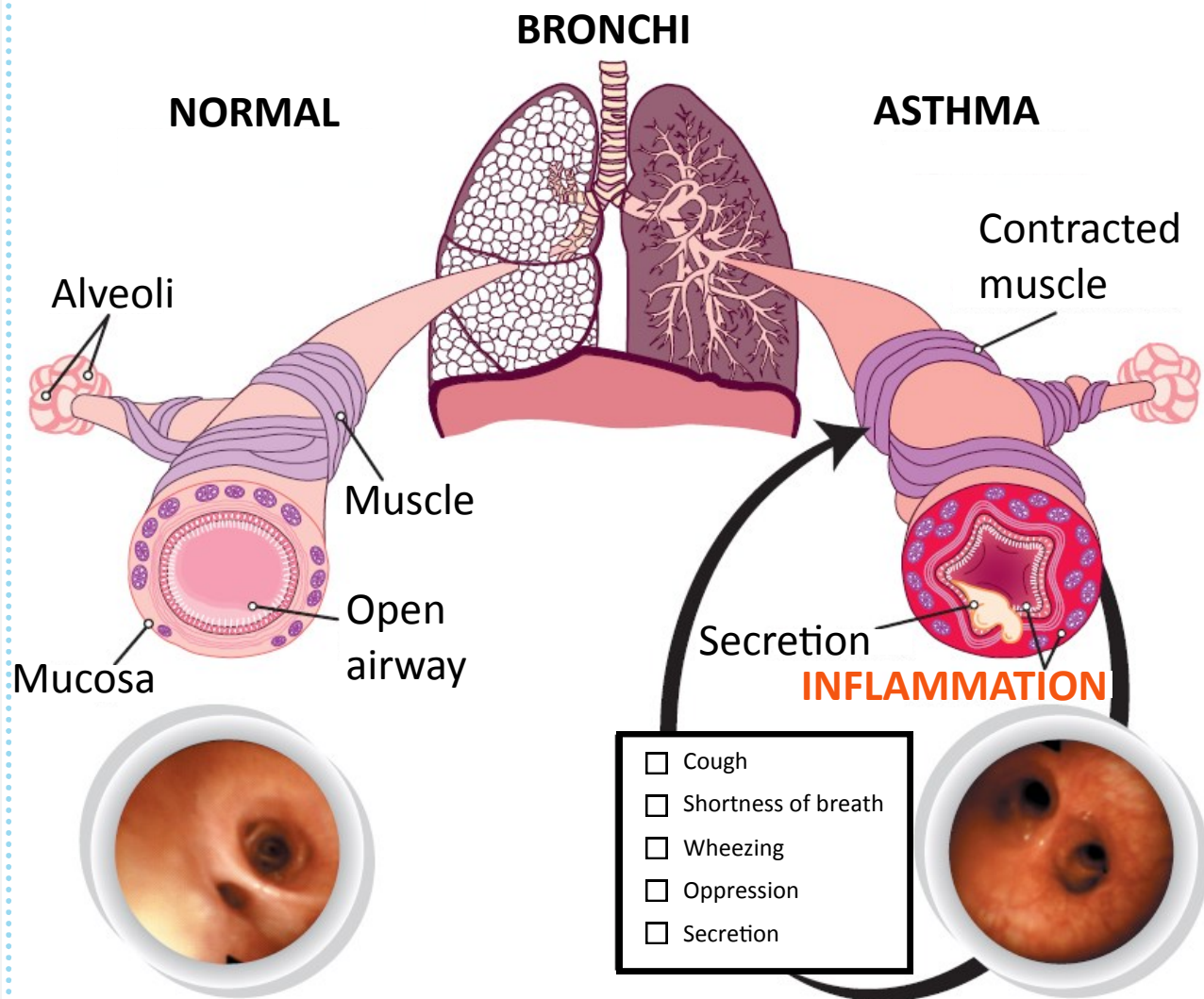
This decision aid is for me if:

- ♦ I am an adult aged between 18 to 65;
- ♦ I received a mild, moderate, or severe asthma diagnosis from my doctor;
- ♦ Asthma is not controlled if I only take my rescue medicine (Aiomir^{MD}, Ventolin^{MD}, Bricanyl^{MD}, etc.);
- ♦ 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.



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?

This inhaler contains a **maintenance medication** used for long-term control of asthma.

- ◆ This maintenance medication is used to **reduce the inflammation** of my bronchi.
- ◆ This maintenance medication starts working **12 to 48 hours** after the beginning of treatment.
- ◆ This maintenance medication has a **slow and gradual effect**.
- ◆ **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 placebo medication (dummy medication), the inhaler containing a maintenance medication...



Improves:

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



Decreases:

- ◆ Asthma symptoms†
- ◆ Use of rescue medicine†
- ◆ Hospitalizations or emergency medical visits†
- ◆ 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^[2].


*High-quality evidence^[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 a maintenance medication...




Increases the likelihood to see appearing:

- ◆ Thrush (white patches in the mouth caused by a fungus)
- ◆ Hoarse voice (husky)
- ◆ Sore throat*

... in patients with mild, moderate, and severe asthma^[2,3,4].

* 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.

Weigh the pros and cons.

What is most important to me?

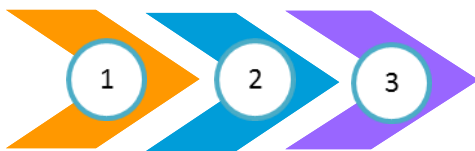
To find out, I indicate the importance I give to each of the following statements, by filling in the corresponding circle.

1 means "it is very unimportant to me";

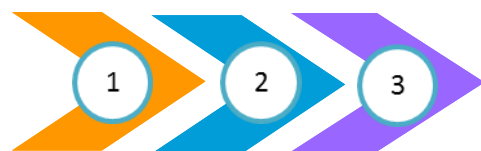
2 means "it is rather important to me";

3 means "it is very important to me".

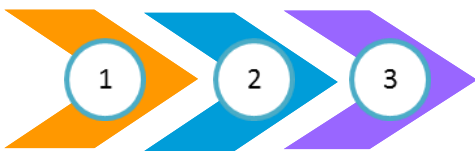
a. Not being hospitalized.



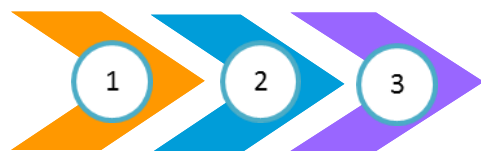
b. Reduce asthma symptoms.



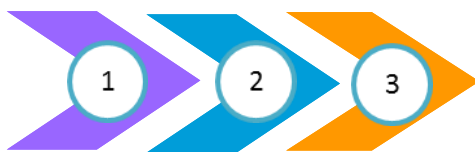
c. Reduce the use of rescue medication.



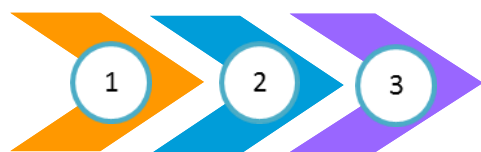
d. Avoid having to take cortisone tablets.



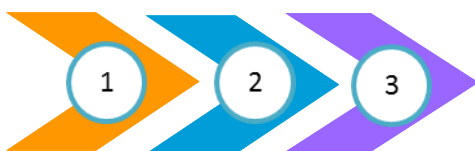
e. Prevent the emergence of thrush.



f. Maintain or improve my lung function.



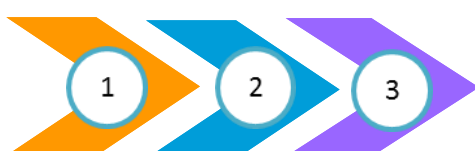
g. Improve my life quality.



h. Avoid having a hoarse voice.



i. Avoid emergency medical visit.



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 purple arrow:  ___ time;

♦ An orange arrow:  ___ time;

♦ A blue arrow:  ___ time.

I check the box that applies:

If the number of purple arrows is the highest...
...I will take the inhaler.

If the number of orange 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

- [1] Lougheed MD, Lemiere C, Ducharme FM, Liciskai C, Dell SD, Rowe BH, FitzGerald M, Leigh R, Watson W, Boulet LP. Canadian Thoracic Society 2012 guideline update: Diagnosis and management of asthma in preschoolers, children and adults. *Can.Respir.J.* 2012 Mar;19(2):127-64.
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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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Whatever the choice made by the patient, neither the authors nor the Laval University, nor AllerGen NCE Inc. do not win or lose anything financially.