Asthma Medication

Asthma is a chronic and complex disease that affects the airways of the lungs making it hard to breathe. We have not yet found a cure for asthma, but it can be managed and controlled. Taking medicine as prescribed by your doctor, avoiding asthma triggers, and monitoring peak flows with the use of an Asthma Action Plan will help you keep your asthma under control.

Asthma Has 2 Parts

Asthma has two parts, tightening of the muscles around the airways (bronchospasm) and inflammation and airway swelling. When you are exposed to an asthma trigger, the bands of muscle around the airways begin to tighten causing the airways to become narrowed. The inflammation in the airways, present all the time, makes the airways “twitchy,” and more prone to narrowing in response to asthma triggers.

Using Asthma Medicines

There are two types of medicines used to treat asthma; Quick Relief Medicines (Bronchodilators) and Long-Term Control medicines (Anti-inflammatories).

**Bronchodilator Medicines** are used to open the airways. These medicines are called “rescue or quick relief medicines” due to their rapid relief of asthma symptoms. Rescue medicines should not be used daily. Daily use is a sign that your asthma is not under control.

**Anti-Inflammatory Medicines** are used to decrease inflammation in the airways. These medicines are called “controllers.” They do not relieve symptoms right away like the rescue medicines. They work over a period of weeks to prevent symptoms. These medicines should be used every day as prescribed even when symptoms are not present.
Using Asthma Medicines (cont.)

**Oral Corticosteroids Medicines** are pills that are taken by mouth (oral) or in liquid form injected into a vein (intravenous) following a serious asthma attack. They are also used as a long-term treatment (daily use) for difficult to control asthma. These medicines are very effective in reducing inflammation, tissue growth, and repair.

**Other Medicines – Biologics**

**Biologic Medicines** are injections used as an add-on treatment for uncontrolled severe asthma in a very small percentage of people. They work differently from standard asthma medicines. Biologics block and target cells that cause inflammation in the lungs.

**Omalizumab (Xolair)** is used to treat moderate to persistent allergic asthma in patients 6 years or older not controlled by corticosteroids. Xolair is an injection given by a healthcare provider in a healthcare setting every 2-4 weeks.

**Benralizumab (Fasenra)** is used with other medicines for the maintenance treatment of asthma in people 12 years and older whose asthma is not well-controlled with their current asthma medicine.

**Mepolizumab (Nucala)** is an add-on maintenance medicine for people 12 years and older with severe eosinophilic asthma (a subset of asthma caused by increased cells in the blood associated with severe asthma). Nucala can prevent severe asthma attacks and reduce the use of oral steroids.

**Reslizumab (Cinqair)** is used along with other asthma medicines for the maintenance treatment of asthma in people 18 years and older whose asthma is not well-controlled with their current asthma medicines.

**Sources**

1. Allergy and Asthma Network
2. Cinqair.com
3. Fasenra.com
4. Nucala.com
5. Xolair.com

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