



ADULT ASTHMA ACTION PLAN

(age 16 years and older using ciclesonide)

Name: _____

Date: _____

This asthma action plan shows me **how** and **when** to increase the dose of my asthma medications.



In an average **week**, I should only need my **BLUE RELIEVER INHALER** **twice at most**.

If I usually need more than this, I will tell my healthcare provider.

It could be a sign that my asthma medications need to be adjusted.

If I feel well, I will take:

But if my symptoms worsen, I will take:

I will urgently see a healthcare provider if:

CONTROLLER **RELIEVER**



- Your red/brown controller contains 120 doses. This should last 2 months. **After 120 doses, sprays will still come out, but they will not contain a full dose.** It is best to refill your prescription at least every 2 months so that you are not accidentally using an empty inhaler.

- The best way to make sure you are getting a full dose of your inhalers, especially your controller, is to use a spacer.



CONTROLLER **RELIEVER**



...until I feel better (up to 2 weeks).

For example, I might be in the yellow zone if:

- I need my blue reliever more than usual, OR
- I catch a cold, OR
- I am exposed to something that tends to trigger my asthma, like forest fire smoke

You should refill your red/brown controller at the pharmacy now, since you are using more doses of it. A rule of thumb is that increasing your red-brown controller for 1 week uses up 1 month of the doses inside.

- I need my blue inhaler more than every 4 hours, OR
- After 2 weeks I don't feel like my "normal self", OR
- I start to have difficulty sleeping because of my asthma, OR
- After 48 hours my symptoms are worse instead of better

I will urgently call 9-1-1 for an ambulance if:

- My blue reliever inhaler doesn't help, OR
- I am too breathless to speak, OR
- I am constantly short of breath

This means I am having an asthma attack. I will take puffs from my blue reliever as much as I need to until help arrives.



Healthcare Provider Signature: _____ Patient Signature: _____

Healthcare providers: share this plan with the entire healthcare team (e.g. family physician, community pharmacy, etc.)

Asthma Action Plans for other medications, such as budesonide, fluticasone, and mometasone are freely available at rxfiles.ca/tools.

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– ciclesonide

MY INFORMATION

Name: _____ Doctor: _____

Health card number: _____

Who is this action plan for?

This plan is for adults and adolescents on one the following controllers:¹

- ☐ ciclesonide at a **very low dose** (100mcg inhaler taken as 1 puff once daily)
- ☐ ciclesonide at a **low dose** (200mcg inhaler taken as 1 puff once daily)

These doses can control around half of people with asthma.⁴

What else can I do to help my asthma?

- I can stay up to date on my vaccinations.
→ Some vaccinations that are especially important for my lungs include COVID-19 vaccines, influenza vaccines, and pneumococcal vaccines.
- I can make sure I take my red/brown controller inhaler twice a day.
→ I will tell my healthcare provider if I often forget to take my red/brown controller.
- I can identify and avoid things that seem to trigger my asthma.

CIRCLE MY TRIGGERS



- I can exercise regularly to keep my lungs strong.
→ If exercise makes my asthma worse, I should tell my healthcare provider. I may need my asthma medications adjusted.
- If I smoke, I can quit smoking to protect my lungs from damage.
→ When I am ready to quit smoking, I will let my healthcare provider know. They can help me make a plan.
- I can ask my pharmacist to double-check that my inhaler technique is perfect.
→ Some people find certain inhalers easier to use than others. For example, there are inhalers that do not need a spacer and inhalers that have a dose counter. I will talk to my healthcare provider if I want to ask about a different inhaler device.
→ Inhaler technique: <https://www.lungsask.ca/lung-diseases/inhalers/inhaler-videos>

Who is this action plan NOT for?

- **NOT** for people needing an asthma controller medication in addition to ciclesonide (e.g. a long-acting beta agonist such as salmeterol or formoterol, or combination product).
- **NOT** for kids under the age of 16.^{2,4}
- **NOT** for people on **high doses** of ciclesonide (e.g. 400mcg once daily).^{1,3}
- **NOT** for people requiring **2 puffs** of ciclesonide per day.

What are some signs I may need my asthma medications adjusted?⁴



- I usually need to use my blue reliever inhaler more than twice a week.



- I have asthma symptoms overnight.
- I have difficulty exercising because of my asthma symptoms.



- I have to miss work or school because of my asthma.
- I have trouble using my inhalers or often forget to take them.



- I have to use my asthma action plan a few times a year.

REFERENCES:

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2. Jackson DJ, Bacharier LB, Mauger DT, Boehmer S, Beigelman A, Chmiel JF, Fitzpatrick AM, Gaffin JM, Morgan WJ, Peters SP, Phipatanakul W. Quintupling inhaled glucocorticoids to prevent childhood asthma exacerbations. *New England Journal of Medicine*. 2018 Mar 8;378(10):891-901.
3. McKeever T, Mortimer K, Wilson A, Walker S, Brightling C, Skeggs A, Pavord I, Price D, Duley L, Thomas M, Bradshaw L. Quadrupling inhaled glucocorticoid dose to abort asthma exacerbations. *New England Journal of Medicine*. 2018 Mar 8;378(10):902-10.
4. Yang CL, Hicks EA, Mitchell P, Reisman J, Podgers D, Hayward KM, Waite M, Ramsey CD. Canadian Thoracic Society 2021 Guideline update: Diagnosis and management of asthma in preschoolers, children and adults. *Canadian Journal of Respiratory, Critical Care, and Sleep Medicine*. 2021 Jun 30;1-4.