

Understanding Asthma Medications

Your Asthma Control Plan is Just for You

With the right asthma control plan, most people with asthma can lead normal, active lives. The asthma control plan your doctor prescribed is just for you. Some people with asthma may have to take medicine every day. Other people with asthma may only need to take medicine as needed.

Two Types of Medicine

There are two types of asthma medications—long-term control medicine to **prevent** asthma attacks, and quick-relief medicine to use **during** an asthma attack and when you have asthma symptoms.

Long-term Control Medicine to Prevent Asthma

Some people with asthma will need to take medicine every day to prevent asthma attacks from starting. These may be: anti-inflammatory medicines, methylxanthines (theophylline), and long-acting beta₂-agonists. It's important to take your medicines just as your doctor tells you to, even if you are not feeling symptoms.

- **Anti-inflammatory medicines** are used to prevent asthma attacks. They prevent and reduce swelling of the airways and buildup of mucus, so breathing is easier.

Some common anti-inflammatory medicines are:

- cromolyn sodium - sold under the name INTAL®
- nedocromil sodium – sold under the name TILADE®
- leukotriene modifiers - sold under the names ACCOLATE®, SINGULAIR® and ZYFLO®
- and inhaled corticosteroids – sold under the names AEROBID®, AZMACORT®, BECLOVENT®, FLOVENT®, VANCERIL®, PULMICORT TURBUHALER®, and PULMICORT RESPULSES®.

All of these medications must be taken regularly (not just during an asthma episode) for them to work well and prevent asthma episodes. Your doctor will tell you how often you need to take anti-inflammatory medicine.

NOTE: Anti-inflammatories are not intended to be used to provide rapid relief of symptoms. These drugs are long-acting agents that cannot relieve symptoms once they have begun.

- **Methylxanthine (theophylline)** is used to prevent asthma attacks. It helps to keep the airways relaxed and open, so breathing is easier. Some common brand names for theophylline are THEOLAIR and THEODUR®. Your doctor will tell you how often you need to take theophylline.

- **Long-acting beta₂-agonists** are sometimes used to keep daily asthma symptoms under control (especially at night) and prevent asthma episodes. They relax the muscles surrounding your airways, allowing them to open more fully so you can breathe more freely. Some common brand names for long-acting beta₂-agonists are SEREVENT® and FORADIL®. Your doctor will tell you how often you need to take long-acting beta₂-agonists.

NOTE: Long-acting bronchodilators should never be used to treat sudden symptoms. They cannot act fast enough to provide relief.

• Quick-relief Medicine to Use During an Asthma Episode

Short-acting beta₂-agonists are most often used during an asthma episode. Your doctor will tell you when and how to use beta₂-agonists. They quickly relax the muscles of the airways to make breathing easier. Short-acting beta₂-agonists are usually inhaled and can start working in 5 to 15 minutes. Common names for short-acting beta₂-agonists are:

- Albuterol (sold under the names PROVENTIL® and VENTOLIN®)
- Metaproterenol (sold under the names METAPREL® and ALUPENT®)
- Terbutaline (sold under the names BRICANYL® and BRETHAIRE®)
- Pirbuterol (sold under the name MAXAIR™ AUTOHALER™)

NOTE: If you find that you are using a short-acting drug more than 2 or 3 times per week, this may be a sign that your asthma is not under control. You should talk with your doctor about better long-term asthma control techniques.

- **Anticholinergic drugs**, such as ATROVENT®, may be an alternative if you cannot tolerate inhaled short-acting beta₂-agonists. These drugs work by expanding your air passages and may also decrease mucus gland secretions, making it easier to breathe.

- **Oral corticosteroids**, such as Prednisone, are tablets or liquids that are swallowed (NOT inhaled) and they may be used during severe asthma attacks. Some people think that the corticosteroids used to treat asthma are the same steroids that weight lifters and other athletes use to build muscles. This is not true. The steroids used to treat asthma are completely different from the ones used to build muscle. Your doctor will tell you when and how you need to use corticosteroids.

• Over-the-Counter Medications

NOTE: Over-the-counter asthma medications do not contain the same ingredients as prescribed asthma medications. They have many more side effects, and may actually worsen your asthma symptoms. Tell your doctor if you use non-prescribed asthma medications for breathing trouble.

Taking Asthma Medications

It is important to remember which medicines to take daily, to **prevent** asthma attacks, and which to take **during** asthma attacks, when you have asthma symptoms. Your doctor will provide you with an asthma control plan that is right for you. Be sure to ask your doctor or asthma counselor any questions you have about your medications.

Some other medicines may interact with your asthma medicine, so always talk to your doctor before you take any medicines that your doctor has not prescribed. Each medicine you take may have side effects. Report any side effects to your doctor.

Asthma medicines should be taken as ordered by your doctor. Some people are afraid that they will become addicted to their asthma medicines. This is not true. Others are concerned that if medicine is taken all the time, it will no longer work. This is rare and it can be managed. Talk to your doctor if you think this is happening.