



FOUNDATION FOR
HEALTHY COMMUNITIES

NH Asthma Management Guidelines

Assess:

- ▲ **Symptoms**—intermittent or continuous cough, wheeze, shortness of breath, other
- ▲ **Medications**—quick relief and long-term controllers
- ▲ Disruption to daily activities
- ▲ **Sleep Patterns**—nocturnal awakening, other
- ▲ **Triggers**—upper respiratory infections including sinusitis, allergens and irritants, exercise, other
- ▲ Baseline spirometry

Classify Severity:

	Symptoms	Nighttime Symptoms	Lung Function
Step 1 <i>Mild Intermittent</i>	Symptoms ≤2 times a week Asymptomatic and normal PEF between exacerbations Exacerbations brief (from a few hours to a few days); intensity may vary	≤2 times a month	FEV ₁ or PEF ≥80% predicted PEF variability < 20%
Step 2 <i>Mild Persistent</i>	Symptoms >2 times a week but <1 time a day Exacerbations may affect activity	>2 times a month	FEV ₁ or PEF ≥80% predicted PEF variability 20–30%
Step 3 <i>Moderate Persistent</i>	Daily Symptoms Daily use of inhaled short-acting beta ₂ -agonist Exacerbations affect activity Exacerbations ≥2 times a week; may last days	>1 time a week	FEV ₁ or PEF >60%–<80% predicted PEF variability >30%
Step 4 <i>Severe Persistent</i>	Continual Symptoms Limited physical activity Frequent Exacerbations	Frequent	FEV ₁ or PEF ≤60% predicted PEF variability >30%

These Guidelines represent a collaborative effort between Aetna US Healthcare, Anthem Blue Cross Blue Shield, CIGNA HealthCare, Harvard Pilgrim Health Care, the American Lung Association of NH, and the Foundation for Healthy Communities.

For More Information Call:

Aetna US Healthcare <i>Healthy Outlook Program</i>	1-800-245-1206 Option 9
Anthem Blue Cross Blue Shield in NH <i>SmartCare for Asthma</i>	1-800-422-2940
CIGNA HealthCare of NH <i>Every Breath Counts</i>	1-800-531-3121
Harvard Pilgrim Health Care of New England <i>Asthma Management Program</i>	1-800-544-9759
American Lung Association of NH	1-800-LUNG-USA

Foundation for Healthy Communities

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Treatment

- ▲ Control environment and avoid other triggers
- ▲ Appropriate use of anti-inflammatories, bronchodilators, and leukotriene modifiers
- ▲ For allergic individuals—appropriate use of immunotherapy, nasal anti-inflammatories, and oral antihistamines
- ▲ Peak flow monitoring—identify personal best and set zones
- ▲ Flu or pneumonia vaccine when appropriate
- ▲ Written asthma management plan for patient (home and school)
- ▲ NHLBI stepwise approach for managing acute or chronic asthma symptoms
- ▲ Routine follow-up: spirometry, re-evaluation of symptoms, medications and inhaler techniques

Patient Education

- ▲ Understanding asthma as an inflammatory disease
- ▲ Medications, their use, and appropriate techniques
- ▲ Control of allergies and triggers
- ▲ Management of exercise and physical activity
- ▲ Smoking Cessation
- ▲ Warning signs, immediate treatment, and when to call your provider
- ▲ Review asthma management plan and patient education at every visit

Equipment

- ▲ Spacers/holding chamber
- ▲ Peak flow meter and diary
- ▲ Nebulizer
- ▲ Meter dose inhaler/Dry powder inhaler

The information in this guideline is based on the NATIONAL INSTITUTES OF HEALTH—National Heart, Lung, and Blood Institute.

Effective dates:
July 1, 2000–June 30, 2002