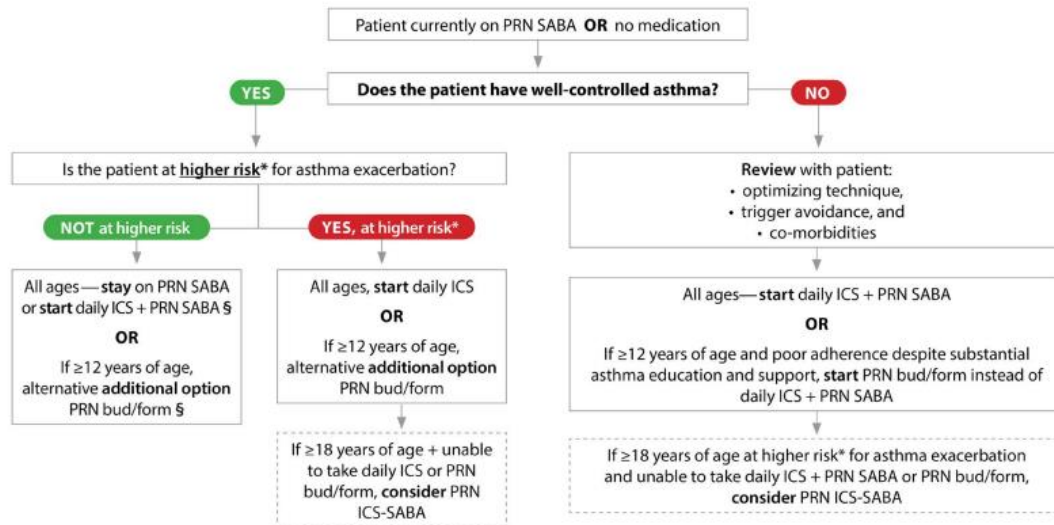


Treatment approach for patients on PRN SABA or no medication



*Higher risk if a patient had any of the following:

- 1) any history of a previous severe asthma exacerbation requiring:
 - systemic steroids,
 - ED visit, or
 - hospitalization
- 2) poorly-controlled asthma as per CTS criteria
- 3) overuse of short-acting beta-agonist (defined as use of more than two inhalers of SABA in a year)
- 4) current smoker

§ Based on patient preference—the decision to switch from PRN SABA to daily ICS + PRN SABA or PRN bud/form is for those that want better asthma control and to decrease their risk of exacerbation

⋯ Dash boxes represent harm reduction strategy

SABA: short-acting beta-agonist; ICS: inhaled corticosteroids; bud/form: budesonide-formoterol in a single inhaler; ED: emergency department

Figure 3. Treatment approach for patients on PRN SABA or no medication.

Source: [Canadian Thoracic Society 2021 Guideline update: Diagnosis and management of asthma in preschoolers, children and adults \(cts-sct.ca\)](https://www.cts-sct.ca/guidelines/asthma)