

**FIGURE 15. ASSESSING ASTHMA CONTROL AND ADJUSTING THERAPY IN YOUTHS  $\geq 12$  YEARS OF AGE AND ADULTS**

| Components of Control  |   | Classification of Asthma Control<br>( $\geq 12$ years of age)  |  |  |
|--|---|--|--|--|
|  |   | Well Controlled  | Not Well Controlled  | Very Poorly Controlled   |
| Impairment   | Symptoms  | $\leq 2$ days/week   | $> 2$ days/week  | Throughout the day   |
|  | Nighttime awakenings  | $\leq 2$ x/month   | 1–3x/week  | $\geq 4$ x/week  |
|  | Interference with normal activity   | None   | Some limitation  | Extremely limited  |
|  | Short-acting beta <sub>2</sub> -agonist use for symptom control (not prevention of EIB) | $\leq 2$ days/week   | $> 2$ days/week  | Several times per day  |
|  | FEV <sub>1</sub> or peak flow   | $> 80\%$ predicted/<br>personal best   | 60–80% predicted/<br>personal best   | $< 60\%$ predicted/<br>personal best   |
|  | Validated questionnaires  |  |  |  |
|  | ATAQ<br>ACQ<br>ACT  | 0<br>$\leq 0.75^*$<br>$\geq 20$  | 1–2<br>$\geq 1.5$<br>16–19   | 3–4<br>N/A<br>$\leq 15$  |
| Risk   | Exacerbations requiring oral systemic corticosteroids                                   | 0–1/year   | $\geq 2$ /year (see note)  |  |
|  |   | Consider severity and interval since last exacerbation   |  |  |
|  | Progressive loss of lung function   | Evaluation requires long-term followup care.   |  |  |
|  | Treatment-related adverse effects   | Medication side effects can vary in intensity from none to very troublesome and worrisome. The level of intensity does not correlate to specific levels of control but should be considered in the overall assessment of risk. |  |  |
| Recommended Action for Treatment<br>(See “Stepwise Approach for Managing Asthma” for treatment steps.) |   | <ul style="list-style-type: none"> <li>Maintain current step.</li> <li>Regular followup at every 1–6 months to maintain control.</li> <li>Consider step down if well controlled for at least 3 months.</li> </ul>              | <ul style="list-style-type: none"> <li>Step up 1 step.</li> <li>Reevaluate in 2–6 weeks.</li> <li>For side effects, consider alternative treatment options.</li> </ul> | <ul style="list-style-type: none"> <li>Consider short course of oral systemic corticosteroids.</li> <li>Step up 1–2 steps.</li> <li>Reevaluate in 2 weeks.</li> <li>For side effects, consider alternative treatment options.</li> </ul> |

\*ACQ values of 0.76–1.4 are indeterminate regarding well-controlled asthma.

Key: EIB, exercise-induced bronchospasm; ICU, intensive care unit

**Notes:**

- The stepwise approach is meant to assist, not replace, the clinical decisionmaking required to meet individual patient needs.
- The level of control is based on the most severe impairment or risk category. Assess impairment domain by patient's recall of previous 2–4 weeks and by spirometry/or peak flow measures. Symptom assessment for longer periods should reflect a global assessment, such as inquiring whether the patient's asthma is better or worse since the last visit.
- At present, there are inadequate data to correspond frequencies of exacerbations with different levels of asthma control. In general, more frequent and intense exacerbations (e.g., requiring urgent, unscheduled care, hospitalization, or ICU admission) indicate poorer disease control. For treatment purposes, patients who had  $\geq 2$  exacerbations requiring oral systemic corticosteroids in the past year may be considered the same as patients who have not-well-controlled asthma, even in the absence of impairment levels consistent with not-well-controlled asthma.
  - ATAQ = Asthma Therapy Assessment Questionnaire<sup>®</sup>
  - ACQ = Asthma Control Questionnaire<sup>®</sup>
  - ACT = Asthma Control Test<sup>™</sup>
  - Minimal Important Difference: 1.0 for the ATAQ; 0.5 for the ACQ; not determined for the ACT.

**Before step up in therapy:**

- Review adherence to medication, inhaler technique, environmental control, and comorbid conditions.
- If an alternative treatment option was used in a step, discontinue and use the preferred treatment for that step.