

Inhaled Corticosteroid (ICS) Monotherapy

Commonly Prescribed Asthma Controller Medications- Asthma Treatment (Reference: 2007 NAEPP guidelines and 2011 GINA guidelines)

(Table reflects total daily dose recommendations. In general, prescribing recommendations are to divide total daily dose into twice daily administration.)

Medication	Age (years)	Low Dose	Medium Dose	High Dose	Formulary DHS	Formulary LA Care
Beclomethasone HFA (QVAR)	5-11	80-160mcg/day	>160-320 mcg/day	>320 mcg/day	Yes	Yes
Beclomethasone HFA (QVAR)	≥12,Adult	80-240mcg/day	>240-480 mcg/day	>480 mcg/day	Yes	Yes
Budesonide Nebulizer(Pulmicort)	≤ 4	0.25-0.5mg/day	>0.5-1 mg/day	>1 mg/day	Yes	Yes- Age
Budesonide Nebulizer (Pulmicort)	5-11	0.5mg/day	1mg/day	2mg/day	Yes	Yes-Age
Budesonide Flexhaler (Pulmicort)	5-11	180-400 mcg/day	>400- 800 mcg/day	>800 mcg/day	Yes*	Yes-Step
Budesonide Flexhaler (Pulmicort)	≥12,Adult	180-600 mcg/day	>600-1200 mcg/day	>1200 mcg/day	Yes*	Yes-Step
Fluticasone HFA (Flovent)	<12	88-176 mcg/day	>176-352 mcg/day	>352 mcg/day	Yes**	Yes
Fluticasone HFA (Flovent)	≥12,Adult	88-264 mcg/day	>264-440 mcg/day	>440 mcg/day	Yes***	Yes
Fluticasone diskus (Flovent)	<12	88-176 mcg/day	>176-352 mcg/day	>352 mcg/day		Yes
Fluticasone diskus (Flovent)	≥12,Adult	88-264 mcg/day	>264-440mcg/day	>440mcg/day		Yes
Mometasone 110mcg Twisthaler (Asmanex)	6-11	1 puff/day	2 puffs/day	4 puffs/day		Yes-Step
Mometasone 220 mcg Twisthaler (Asmanex)	≥12,Adult	1 puff/day	2 puffs/day	>2 puffs/day		Yes-Step
Ciclesonide (Alvesco)	≥12,Adult	80-160mcg/day	>160-320mcg/day	>320- 1280 mcg/day		

#Additional Medications Available: Table not all inclusive.

Strengths Available:

Beclomethasone (QVAR): 40mcg/puff or 80mcg/puff

Budesonide (Pulmicort): 0.25 mg respule or 0.5 mg respule (Nebulized solution generic)

*Budesonide (Pulmicort) Flexhaler: 90mcg or 180 mcg (DHS formulary restricted for use in pregnancy)

Fluticasone (Flovent) HFA: 44 mcg/puff, 110mcg/puff, 220mcg/puff (**44 mcg/puff restricted to ages 4-11, ***220mcg restricted to ages ≥ 12)

Fluticasone (Flovent) diskus: 50mcg/actuation, 100mcg/actuation, 250mcg/actuation

Mometasone (Asmanex)Twisthaler: 110mcg/puff (delivers 100 mcg/actuation) or 220 mcg/puff (delivers 200mcg/actuation)

Ciclesonide (Alvesco): 80mcg/puff or 160mcg/puff

LA Care Formulary: 'Age' indicates age restrictions may apply, 'Step' indicates therapy may be initiated in step-wise fashion but not as first line. For complete formulary restrictions, contact LA Care or visit website www.lacare.org