



Asthma — Staying in Control

How asthma treatment has changed — and what it means for you

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PATIENT GUIDE

Dr Reguram Sandrasegaram • Young Street Medical & Dental Centre

The blue puffer alone isn't enough.


Australia's asthma guidelines changed in 2025. Even if your asthma feels mild, an anti-inflammatory inhaler is now part of the plan — to keep small flare-ups from becoming serious attacks.


 **2.8M**
Australians live with asthma — about 1 in 9


 **55%**
fewer serious attacks with the new approach


 **90%+**
of asthma deaths are considered preventable


What's actually changed (and why)


 **Asthma is inflammation**
Even when you feel fine, your airways are mildly inflamed. The blue puffer (SABA) opens them — but doesn't calm the inflammation.

 **Blue puffer = symptoms only**
It works fast, but doesn't prevent the next attack. Using it more than twice a week is a sign asthma isn't controlled.

 **Steroid + reliever combo**
A combination inhaler (often budesonide-formoterol) treats the inflammation AND opens the airways — one inhaler, both jobs.

 **As-needed is OK**
If your asthma is mild, this new combo can simply be used when you have symptoms — called AIR (anti-inflammatory reliever) therapy.

 **Daily for more troublesome**
If symptoms are frequent, the same inhaler is used every day plus as-needed. This is called MART therapy.

 **Action plans save lives**
A Written Asthma Action Plan tells you what to do as symptoms change. Every adult with asthma should have one.

Still using just a blue puffer? Come and see us.
If your asthma plan hasn't been reviewed since 2025, it may be time. The new approach has stronger evidence, simpler dosing, and far better protection from sudden severe attacks — even for 'mild' asthma.



Your Asthma — Day to Day

Triggers, technique, and your action plan

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Six things that keep you breathing easy



Use your inhaler properly

Poor technique wastes most of the dose. Ask your GP or pharmacist to watch you use it — a 2-minute fix can transform your control.



Carry your reliever

Always have it with you — pocket, bag, car. If you need it before exercise, that's fine; that's what it's for.



Know your triggers

Common ones: smoke, dust, pets, pollen, cold air, exercise, viral colds. Avoiding what you can helps a lot.



Treat the colds

Viral infections are the biggest cause of attacks. See us early in a cold — a small adjustment can prevent a hospital visit.



Don't smoke — or be near it

Smoking and vaping worsen asthma and reduce inhaler effectiveness. Help to quit is genuinely available.



Get your yearly review

Annual asthma checks pick up worsening control before it becomes an attack. Worth booking even when you feel fine.



Call 000 or get help if:

- You can't finish a sentence in one breath
- Your reliever isn't lasting 3–4 hours
- Lips or fingertips turning blue or grey
- You feel frightened by your breathing



Your next steps:

- ✓ Book a review — ask about an updated action plan
- ✓ Bring all your inhalers; we'll check technique
- ✓ Get your flu and COVID vaccines — they really help
- ✓ Save the National Asthma Council site to your phone

Asthma — quiet, not silent

Treating the inflammation, not just the wheeze, changes everything.

A modern inhaler plan and a written action plan turn most asthma into a background thing. — Dr Regu