

Persistent Asthma

Requirements for Classification

If your patient with asthma has any **ONE** of the following, they should be classified as a persistent asthmatic:

- Day-time symptoms** more than 2 times per week
- Night-time symptoms** more than 2 times per month
- Use of a short-acting beta-agonist** more than 2 days per week
- Exacerbations:**
 - For ages 5 years and older: 2 or more exacerbations requiring oral steroids per year
 - For ages 1-4 years:
 - 2 or more exacerbations in 6 months requiring oral steroids
OR
 - 4 or more wheezing episodes per year lasting more than one day AND risk factors for persistent asthma which include:
 - One major criterion: (a) Parent with asthma. (b) Physician diagnosis of atopic dermatitis. (c) Evidence of sensitization to aeroallergens
OR
 - Two minor criteria: (a) Evidence of sensitization to foods. (b) $\geq 4\%$ blood eosinophilia. (c) Wheezing apart from colds.
- FEV₁ of 80% or less** (before bronchodilator)

Inhaled corticosteroids are the most effective anti-inflammatory medication for long-term management of persistent asthma.

See Stepwise Approach to Asthma (Table 7 of the UMHS Asthma Guideline) for more details.

www.med.umich.edu/1info/FHP/practiceguides/asthma/asthmagdln.pdf

Based on the 2007 National Asthma Education and Prevention Program Expert Panel Report 3, Guidelines for the Diagnosis and Management of Asthma, National Heart, Lung and Blood Institute (www.nhlbi.nih.gov).

The information in this reference was reviewed by the UMHS Asthma Quality Improvement Steering Committee and was last updated on 10/19/2010. Questions and/or comments may be directed to Georgiana Sanders, MD, MS (gsanders@umich.edu) or Karla Stoermer-Grossman, MSA, RN, AE-C (kstoerme@umich.edu)