

# Lightning Learning: Steroids in Asthma



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Fig. 6 (a) For the second of t



## STOP!

The UK has some of the highest rates of asthma in the world affecting about 1-in-10 children.

In 2018 there were 25,128 cases of under-16s going to hospital with asthma. (NHS England)

- → Steroids are used to reduce acute exacerbation, severity and duration.
- → Treatment options include a short course of oral corticosteroid (typically 3 days of oral prednisolone).
- → Data suggests that the use of oral dexamethasone is non-inferior compared to oral prednisolone.(1)
- → Consider a **single dose** of oral dexamethasone for acute asthma exacerbation in children.

#### LOOK

There is increased evidence of vomiting with prednisolone. (2)

With the use of dexamethasone we can reduce...

- The incidence of children vomiting at home and ED
- Non-compliance at home
- TTO dispensing



### **LEARN**

#### **DEXAMETHASONE DOSE**

Oral → 0.6 mg/kg (3)

(maximum of 16 mg/dose)

#### References:

- 1. Comparative efficacy of oral dexamethasone versus oral prednisone in acute pediatric asthma (F. Qureshi et al.) http://bit.ly/2kuWKB9
- 2. Dexamethasone for acute asthma exacerbations in children: a meta-analysis (G.E. Keeney et al.) http://bit.ly/2ks1jfn
- 3. Management of Wheeze and Asthma in Children (Local Paediatric ED guideline) http://bit.ly/2IZRWE8

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