This leaflet has been written for parents and carers about how to use this medicine in children. Our information sometimes differs from that provided by the manufacturers, because their information is usually aimed at adult patients. Please read this leaflet carefully. Keep it somewhere safe so that you can read it again.

**Name of drug**

Budesonide

**Brand names:** These include Easyhaler® Budesonide, Budesonide Cyclocaps®, Budelin Novolizer®, Turbohaler® and Pulmicort®.

**Why is it important for my child to take this medicine?**

Budesonide is a steroid medicine. It reduces inflammation in the lungs that can act as a trigger for an asthma attack, and so should reduce the number of attacks. Budesonide is commonly called a ‘preventer’ medicine. It is important that your child takes it regularly to help prevent asthma attacks.

* Budesonide will not reduce wheezing or breathlessness during an acute asthma attack – your child should use their ‘reliever’ inhaler for this (this is often a blue salbutamol inhaler).

**What is budesonide available as?**

Budesonide has to be inhaled into the lungs (breathed in) to work. A special device called an inhaler is used and this is usually used with another device called a spacer. Dry powder inhalers are sometimes used for older children.

**Metered dose inhalers:** 100, 200 and 400 micrograms per inhalation

- Easyhaler® Budesonide
- Budesonide Cyclocaps®
- Budelin Novolizer®
- Turbohaler®
- Pulmicort®

Your doctor may suggest that your child uses an inhaler that provides budesonide together with another medicine called formoterol, which has the brand name Symbicort® and uses a Turbohaler®.

**When should I give budesonide?**

- Sometimes it is just used once a day: this can be in the morning or the evening.
- Give the medicine at about the same time(s) each day so that this becomes part of your child’s daily routine, which will help you to remember.

**How much should I give?**

Your doctor will work out the amount of budesonide (the dose) that is right for your child. The dose will be shown on the medicine label.

* It is important that you follow your doctor’s instructions about how much to give.

**How should I give it?**

Your doctor or asthma nurse will show you how to use the aerosol inhaler and spacer device, if one is needed.

* Detailed information on how to use inhalers is given on the last page of this leaflet.

**When should the medicine start working?**

Budesonide needs to be given regularly to prevent asthma and wheeze. It will start to work within 24 hours, but it may take a few weeks to reduce the inflammation. Your child may continue to have attacks during this time, but they should start to happen less often. Continue to give the medicine as told to by your doctor or nurse, even if your child does not have any wheeze or other symptoms of asthma.

If your child’s asthma does not seem to be getting any better after 6 weeks, and they still need to use their reliever medicine often, contact your doctor or nurse.

**What if my child is sick (vomits)?**

If your child is sick at any time, you do not need to give them another dose, as inhaled medicine will still work.

**What if I forget to give it?**

If you remember up to 6 hours after you should have given a dose, give your child the missed dose. For example, if you usually give a dose at about 7 am, you can give the missed dose at any time up to 1 pm. If you remember after that time, do not give the missed dose. Wait until the next normal dose.

**What if I give too much?**

Budesonide is unlikely to cause any harm if your child accidentally has more puffs than your doctor has recommended, but if your child takes too much inhaler on several occasions, there may be side-effects.

If you are worried that you may have given your child too much budesonide, contact your doctor or local NHS services (111 in parts of England; 0845 4647 in parts of England and Wales; 08454 24 24 in Scotland) for advice.

Have the inhaler or packaging with you if you telephone for advice.

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Budesonide inhalers should not be used during an acute asthma attack (sudden onset of wheezing and breathlessness). Use your child’s reliever medicine (usually a blue salbutamol inhaler).
Are there any possible side-effects?
We use medicines to make our children better, but sometimes they have other effects that we don’t want (side-effects).

If your child is taking a high dose of budesonide, they may develop a yeast infection in the mouth, called oral thrush. If you notice a thick white or cream-coloured covering on your child’s tongue, the mouth is red and irritated, or they have a hoarse voice for more than a few days, contact your doctor for advice, as this may need treatment. You can help prevent this by making sure your child rinses their mouth after using budesonide, and by using a spacer device.

• If your child’s voice is hoarse or their throat is sore after using the inhaler, encourage them to rinse their mouth after every use.

• Your child may develop a dry mouth with this medicine. Eating citrus fruits (e.g. oranges) or taking sips of water may help.

• Inhaled budesonide may slow your child’s growth at the start of treatment, but they will probably catch up when their asthma is properly controlled. Their final adult height should not be affected. Your doctor will check your child’s growth while they are receiving treatment with budesonide.

• All steroid medicines, including budesonide, but only in high doses, may affect the adrenal glands so that they produce less of a hormone called cortisol when the body is stressed (e.g. during illness or injury). This means that your child may have more difficulty fighting off an infection, or may recover less quickly from injury or after surgery.

There may, sometimes, be other side-effects that are not listed above. If you notice anything unusual and are concerned, contact your doctor. You can report any suspected side-effects to http://yellowcard.mhra.gov.uk.

Can other medicines be given at the same time as budesonide?
• You can give your child medicines that contain paracetamol or ibuprofen, unless your doctor has told you not to.

• Budesonide should not be taken with some medicines that you get on prescription. Tell your doctor and pharmacist about any other medicines your child is taking before giving budesonide.

• Check with your doctor or pharmacist before giving any other medicines to your child. This includes herbal or complementary medicines.

Is there anything else I need to know about this medicine?
• If your child becomes very unwell or requires an operation, tell the doctors that they use a budesonide inhaler.

In a very few cases, children become unwell when they stop or reduce the amount of any steroid medicine they are taking, including budesonide (in high doses). This may include your child becoming very tired or dizzy, having stomach pains or vomiting. If you are at all worried about this, contact your doctor.

• There are many different inhalers available. If your child is having difficulty with one of them, you can ask your doctor or pharmacist to change it for another one.

• Even with regular use of budesonide, your child may still have asthma attacks. Use a reliever medicine as usual for these.

General advice about medicines
• Try to give medicines at about the same times each day, to help you remember.

• If you are not sure a medicine is working, contact your doctor but continue to give the medicine as usual in the meantime. Do not give extra doses, as you may do harm.

• Only give this medicine to your child. Never give it to anyone else, even if their condition appears to be the same, as this could do harm.

If you think someone else may have taken the medicine by accident, contact a doctor straight away.

• Make sure that you always have enough medicine. Order a new prescription at least 2 weeks before you will run out.

• Make sure that the medicine you have at home has not reached the ‘best before’ or ‘use by’ date on the packaging. Give old medicines to your pharmacist to dispose of.

Where should I keep this medicine?
• Keep the medicine in a cupboard, away from heat and direct sunlight. It does not need to be kept in the fridge.

• Make sure that children cannot see or reach the medicine.

• Keep the medicine in the container it came in.

Who to contact for more information
Your doctor, pharmacist or nurse will be able to give you more information about budesonide and about other medicines used to treat asthma.

You can also get useful information from:
England - 111 / 0845 4647 - www.nhsdirect.nhs.uk
Wales/Gal Lechyd Cymru: NHS Direct 0845 4647 - www.nhsdirect.wales.nhs.uk
Northern Ireland: NI Direct - www.nidirect.gov.uk
Asthma UK - 0300 222 5800 - www.asthma.org.uk

www.medicinesforchildren.org.uk
Budesonide for asthma – using the inhalers

This page provides instructions on how to use the budesonide inhalers. An instruction leaflet will also be provided with the inhaler. This will tell you how to put the inhaler together and how to use it.

If you are not sure whether you are using the inhaler properly, or need help, contact your asthma nurse or pharmacist, who will be able to show you or check what you are doing.

Using an aerosol inhaler with a ‘spacer’ device

- Put the spacer device together, following the instructions that come with it.
- For a young child, attach the mask to the spacer mouth piece. If your child can hold the spacer mouthpiece in their mouth and hold it firmly between their lips, creating a good seal, you may not need to use the mask.
- Some spacers (e.g. aerochambers) only come with a mask or a mouth piece. If you are unsure, check with your asthma nurse or pharmacist that you have the best type of inhaler for your child.
- Take the cap off the inhaler, making sure that the mouth piece is clean.
- While holding the inhaler upright, place your thumb on the bottom of the inhaler and your first finger on the top. Then shake the inhaler several times up and down.
- If the inhaler is new or has not been used for three days or more, one puff should not be released into the air.
- Insert the mouth piece of the inhaler into the spacer. It should fit easily and securely.
- Place the mask over your child’s mouth and nose, ensuring a good seal with the skin around the mouth. Reassure your child during this step, as they may be distressed.
- Press down once on the aerosol canister with the first finger. This releases one puff into the spacer.
- Hold the mask in place and encourage your child to take five deep and slow breaths in and out. It is important not to rush this step.
- If more than one dose/puff is required, wait for one minute then repeat the previous steps.
- Your child should rinse their mouth out thoroughly with water or clean their teeth.

Using a dry-powder inhaler

There are many different types of dry-powder inhaler. These are not used with a spacer.

Follow the instructions that come with your inhaler for how to get it ready. The following instructions are for most dry-powder inhalers. If you are not sure how to use your child’s inhaler, ask your pharmacist or nurse to show you.

- Ask your child to breathe out normally, as far as they can. Place the mouthpiece of the inhaler firmly between the lips, ensuring a good seal around the mouthpiece.
- Once they have started to breathe in, give (release) the dose as directed by your pharmacist or nurse. Your child should continue to finish the breath in, so that they inhale the puff of medicine.
- Take the inhaler out of your child’s mouth. They should close their mouth and hold their breath for 5–10 seconds, or for as long as they can comfortably manage. They can then breathe normally. It is important not to rush this step.
- If your child has to take more than one puff, they should breathe normally for a minute or so before giving the next one.
- Your child should rinse their mouth out thoroughly with water or clean their teeth.

Using a Turbohaler

Follow the instructions that come with your turbohaler for how to get it ready. If you are not sure how to do this, ask your pharmacist or nurse to show you.

- Hold the inhaler upright with the grip downwards, and the opening upwards. Turn the inhaler all the way in one direction until it clicks, then turn it back completely in the other direction. The click means it is ready to use.
- Ask your child to breathe out normally, as far as they can. Place the mouthpiece of the inhaler firmly between the lips, ensuring a good seal around the mouthpiece.
- Then ask your child to breathe in forcefully through the mouthpiece.
- Take the inhaler out of your child’s mouth. They should close their mouth and hold their breath for 5–10 seconds, or for as long as they can comfortably manage. They can then breathe normally. It is important not to rush this step.
- If your child has to take more than one puff, they should breathe normally for a minute or so before giving the next one.
- Your child should rinse their mouth out thoroughly with water or clean their teeth.

www.medicinesforchildren.org.uk