

# Suggested Order of Therapy for Daily Care\*

## THErapy #1: Bronchodilator



**WHAT?** albuterol (Proventil®, ProAir®, Ventolin®), levalbuterol (Xopenex®)

**HOW?** Inhaler or nebulizer

**WHY?** To open up the airways by relaxing the muscles around them. This helps to widen the airway and make air flow easier into and out of the lungs. This assists other medications getting into the lungs better, and mucus to move out easier.

## THErapy #2: Hydration



**WHAT?** hypertonic saline (Hypersal®, Pulmosal®)

**HOW?** nebulizer

**WHY?** Draws water onto the airway surface making airway secretions less thick and sticky, and helps cilia have enough room to move. Cilia are little hair like structures whose job is to move the mucus by moving together in a waving pattern. Cilia help move the mucus up the system of airways toward the larger airways where mucus can be coughed out.

## THErapy #3: Mucolytics



**WHAT?** dornase alfa (Pulmozyme®), Acetylcysteine (Mucomyst®)

**HOW?** nebulizer

**WHY?** Making mucus less sticky and thick will make it easier for you to move the mucus and cough it up and out. Less mucus means less chance for more bacteria to grow in the lungs.

## THErapy #4: Airway Clearance Therapies



**WHAT?** Moving mucus up and out!

**HOW?** Chest percussion, OPEP (AerobiKa®, Acapella®, Flutter valve®) PEP device

**Breathing techniques:** autogenic drainage, active cycle breathing, huff cough

**Vest systems:** TheVest®, inCourage®, Smart Vest®, Afflo Vest® Monarch®

**Other:** percussor or VibrAlung®

**WHY?** Moving mucus up and out of the lungs is the most important component of your airway clearance therapies. After all the hard work you've done taking your medications, huff and cough that mucus up and out.

## THErapy #5: Inhaled Antibiotics

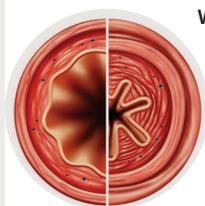


**WHAT?** aztreonam (Cayston®), tobramycin (TOBI®, TOBI® Podhaler™, Bethkis®), colistimethate (Colistin®)

**HOW?** nebulizer

**WHY?** Antibiotics help to kill the bacteria that can grow in the mucus. Always take ALL of the antibiotics that the doctor has told you to take.

## THErapy #6: Corticosteroids (if you have an asthma diagnosis)



**WHAT? Inhaled steroids:** budesonide (Pulmicort®), beclomethasone (Pulmicort, QVar®), fluticasone (Flovent®, mometasone (Asmanex®) ciclesonide (Alvesco®)

**Inhaled corticosteroid and long acting bronchodilator:** (fluticasone and salmeterol (Advair®), budesonide and formoterol (Symbicort®), fluticasone and vilanterol (Breo®), mometasone/formoterol (Dulera®).

**HOW?** inhaler/nebulizer

**WHY?** Airways can have swelling in them from mucus and recurrent infections. Corticosteroids will help reduce swollen inflamed airways. Don't forget to rinse your mouth after taking them!

\*Please note: you may not be currently using all of these medications or therapies

This information meets the guidelines and standards of the Cystic Fibrosis Foundation's Education Committee. Hasbro Children's Hospital, Providence, RI