



WORLD ASTHMA DAY

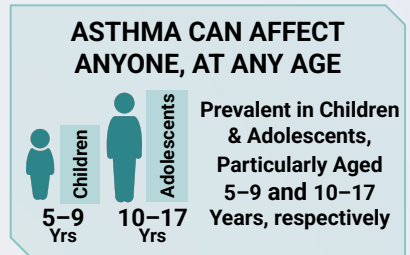
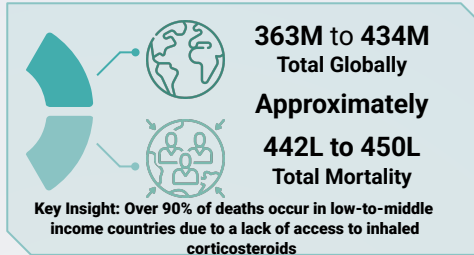
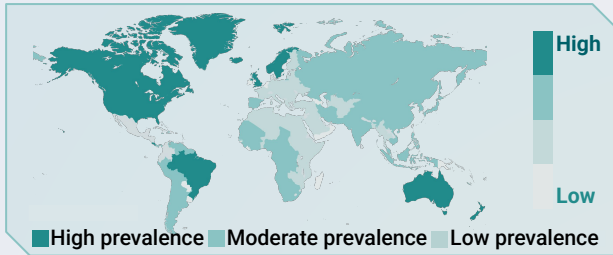
MAY 5, 2026

BREATHE EASY, LIVE FULLY



What Is Asthma?

It is a chronic, non-communicable, inflammatory condition. That causes the airways in the lungs to swell, narrow, and produce extra mucus.



Types of Asthma

Allergic Asthma Non-Allergic Asthma Occupational Asthma Exercise-Induced Bronchoconstriction Cough-Variant Asthma Aspirin-Induced Asthma

Common Triggers

Air pollution Allergens Tobacco smoke Infection Physical activity Emotional stress

Asthma Symptoms

Wheezing Shortness of Breath Chest Tightness Persistent Cough

Microscopic View

Healthy Airway Severe Asthma

Airway smooth muscle:

- Hyperresponsiveness
- Constriction
- Thickening

Subepithelial inflammation and fibrosis

Mucus hypersecretion and impaired mucus clearance

Increased eosinophils and/or neutrophils in airway lumen

Key Management Strategy

Early diagnosis and regular monitoring Adherence to prescribed medications Avoidance of known triggers Patient education awareness Asthma action plan

Bronchial Comparison

Relaxed smooth muscles Normal airway

Wall inflamed and thickened Asthmatic airway

Tightened smooth muscles Air trapped in alveoli Asthmatic airway during attack

Treatment Regimen

Medication	Main Role	Top Examples
Daily Controller (ICS)	Prevents swelling/mucus	Pulmicort, Arnuity, QVAR
Combination (ICS+LABA)	Long-term control + open airways	Symbicort, Breo, Dulera
AIR / MART Therapy	One inhaler for daily use	Symbicort (Budesonide/Formoterol)
Quick Reliever (SABA)	Immediate "emergency" relief	Albuterol (Ventolin, ProAir)
Add-on (LAMA/LTRA)	Extra support for difficult symptoms	Spiriva, Singulair
Biologics	Targeted injections for severe cases	Dupixent, Tezspire, Exdusur
Oral Steroids (OCS)	Short-term "reset" for major flares	Prednisone