

Inhaled Steroids: Frequently Asked Questions

The inhaled steroid that you will take is:

Why do I need inhaled steroids?

People with asthma have airways that are sensitive to “triggers,” like dust or pollen, or having a cold. This leads to swelling (inflammation) of the lining of the airways deep in the lungs. The swelling leads to extra mucous production. The muscles around the airways also tighten during an asthma episode (see Figure 1).

Both the swelling and the muscle tightening make it hard for air to pass through. This causes wheezing, coughing, shortness of breath and tightness in the chest.

Inhaled steroids decrease swelling and muscle tightening and keep asthma under control.

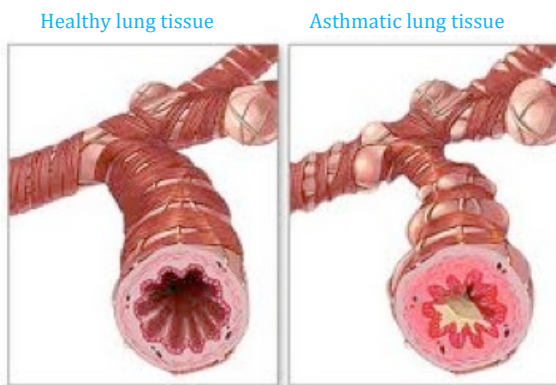


Figure 1

Why do I have two different asthma medicines?

Albuterol (by pump or nebulizer) treats the muscle tightening around the airways. Albuterol is often called a “quick relief medication.”

Corticosteroids are medicines that reduce the swelling in the airways. These are often called “controller medications.” They need to be taken every day to prevent an asthma episode.

Are these the steroids athletes and bodybuilders use to build muscle?

No! Corticosteroids are a completely different kind of steroid from the **anabolic steroids** that some athletes abuse.

It’s confusing because both are called “steroids” for short. Corticosteroids do not build muscle. They do not have the same dangerous side effects of anabolic steroids.

Will inhaled steroids stunt my growth or cause other side effects?

Many of the side effects of inhaled steroids only affect people who use high doses of oral steroids, like Prednisone or Prednisolone, for a long time. Prednisone is only used for very severe asthma. Children who take inhaled steroids may be just ½ inch shorter than their expected adult height.

The dose a person gets through the inhaler is just a tiny dose. In fact, a 5-day course of oral steroids is the same as almost a year of inhaled steroids.

Inhaled steroids sometimes cause thrush, a white coating on the tongue and gums, or a hoarse voice. Rinsing your mouth out with water or brushing your teeth after using inhaled steroids should prevent these side effects. If you notice these side effects, call your health care provider.

Are inhaled steroids addictive?

No. Even though you may need medication every day, this does not mean they are addictive.

It’s important not to overuse Albuterol. It may stop working well if you take it too often.

I don’t feel comfortable taking inhaled steroids every day. I’m fine now. Can I stop?

When your asthma is under control, talk to your health care provider. Your provider might lower the dose. Together you can figure out what dose will keep you healthy and active.

Do not stop taking the daily controller medications even if you feel fine! If you stop them, the airway swelling may return and you may wheeze more or have a bad asthma attack.

The goals of taking inhaled steroids as daily controller medications are: to be able to sleep through the night, not miss school or work and to be active without shortness of breath.

This Family Education Sheet is available in [Spanish](#).