Reliever Reliance Test

This is a self-test designed to help you and your doctor, nurse or pharmacist to understand what you think about your Blue Reliever Inhaler* for asthma and whether you might be relying on it too much. **This is not medical advice.** DO NOT stop or change your medication without consulting your healthcare professional.

**PART 1** Your views about your Blue Reliever Inhaler

1. Please circle the score that best represents your current view
2. Please write the score for each statement in the score box next to it
3. Please add up the scores to get your total score
4. Share your score with your doctor, nurse or pharmacist

These are statements other people have made about their Blue Reliever Inhaler.

1. **Using my Blue Reliever Inhaler to treat symptoms is the best way to keep on top of my asthma.**

2. **I don’t worry about asthma when I have my Blue Reliever Inhaler around.**

3. **My Blue Reliever Inhaler is the only asthma treatment I can really rely on.**

4. **The benefits of using my Blue Reliever Inhaler easily outweigh any risks.**

5. **I prefer to rely on my Blue Reliever Inhaler than my Steroid Preventer Inhaler.**

**PART 2** Using your Blue Reliever Inhaler

1. Please circle your answer below and write your score in the box
2. Share your score with your doctor, nurse or pharmacist

**On average, during the past 4 weeks, how often have you used your Blue Reliever Inhaler?**

1. Not at all
2. Twice a week or less
3. 3 times a week
4. 4–5 times a week
5. More than 5 times a week

*Contains a medicine called SABA (short-acting β-agonist), prescribed to provide quick relief from asthma symptoms if they occur

© Prof Rob Horne

There are no right or wrong answers. We are interested in your views.
How can this self-test help me?

Many people with asthma rely too much on their Blue Reliever Inhaler. It’s easy to see why, as it usually makes you feel better as soon as you take it. Some people see it as the most important part of their asthma treatment BUT there can be ‘good’ and ‘not-so-good’ things about the Blue Reliever Inhaler.

‘Good’ effects are that it can feel as if the asthma symptoms are improving quickly.

‘Not-so-good’ things are that, while the Blue Reliever Inhaler helps deal with the symptoms of asthma, it does not help to manage the underlying cause of asthma attacks.

What does my total score for PART 1 mean?

18–25:
High risk of over-reliance on your Blue Reliever Inhaler. Like many people, you seem to be relying on your Blue Reliever Inhaler a lot. If you are using it 3 or more times a week, this could be a sign that your asthma is not as well controlled as it could be. It’s worth discussing your results with your doctor, nurse or pharmacist.

11–17:
Medium risk of over-reliance on your Blue Reliever Inhaler. Like many people, your Blue Reliever Inhaler is important to you, but you might be relying on it a bit too much. If you are using it 3 or more times a week, this could be a sign that your asthma is not as well controlled as it could be. It’s worth discussing your results with your doctor, nurse or pharmacist.

10 or less:
Low risk of over-reliance on your Blue Reliever Inhaler. You do not appear to be over-relying on your Blue Reliever Inhaler. This is good news. Please keep reading to check that you don’t have any of the other possible signs of poor asthma control.

What does my total score for PART 2 mean?

If you score 3 or more you may be using too much of your Blue Reliever Inhaler. This might be a sign your asthma is not as well controlled as it could be. Talk to your doctor, nurse or pharmacist as there may be better ways of managing your asthma.

What are the other signs of poor asthma control?

As well as using a Blue Reliever Inhaler 3 or more times a week, there are three other signs of poor asthma control. If, in the last 4 weeks, any of the following have been true for you, it’s worth discussing your asthma management with your doctor, nurse or pharmacist:

1. Daytime symptoms 3 or more times a week. 2. Asthma has woken you up at night. 3. Used your blue inhaler 3 or more times a week. 4. Asthma has limited your activity.

With the right treatment, most people can achieve good control of their asthma.

NOTE: Guidelines apply a pragmatic threshold to define uncontrolled (NICE 2017) or partially controlled/uncontrolled (GINA 2021) asthma as using the reliever for symptomatic relief three or more days/times a week. The 5-item questionnaire is adapted from the validated and globally used Beliefs about Medicines Questionnaire, created and designed by leading expert in behavioural medicine, Professor Rob Horne, UCL.


PromoMats ID: Z4-40194
Date of Preparation: November 2021

This is not medical advice. DO NOT stop or change your asthma medication without consulting your healthcare professional. It is important to continue to take your Blue Reliever Inhaler as directed by your healthcare professional, including during any worsening of your asthma or prior to exercise.