

Developed by leading expert in behavioural medicine, Professor Rob Horne, University College London (UCL). IPCRG and AstraZeneca provided input into the development of the Reliever Reliance Test but do not have any editorial control, which is the responsibility of Professor Rob Horne. The production and distribution of this tool has been fully funded by AstraZeneca.

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 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 asthma medication without consulting your healthcare professional. It is important to continue to take your Reliever Inhaler as directed by your healthcare professional, including during any worsening of your asthma or prior to exercise.**

PART 1 Your views about your 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

There are no right or wrong answers. We are interested in your views.

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

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

1 Strongly disagree	2 Disagree	3 Uncertain	4 Agree	5 Strongly agree
---------------------	------------	-------------	---------	------------------

2 I don't worry about asthma when I have my Reliever Inhaler around.

1 Strongly disagree	2 Disagree	3 Uncertain	4 Agree	5 Strongly agree
---------------------	------------	-------------	---------	------------------

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

1 Strongly disagree	2 Disagree	3 Uncertain	4 Agree	5 Strongly agree
---------------------	------------	-------------	---------	------------------

4 The benefits of using my Reliever Inhaler easily outweigh any concerns.

1 Strongly disagree	2 Disagree	3 Uncertain	4 Agree	5 Strongly agree
---------------------	------------	-------------	---------	------------------

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

1 Strongly disagree	2 Disagree	3 Uncertain	4 Agree	5 Strongly agree
---------------------	------------	-------------	---------	------------------

**PART 1
SCORE**

PART 1 TOTAL

PART 1: See reverse to interpret your scores

PART 2 Using your 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 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
--------------	------------------------	------------------	--------------------	----------------------------

**PART 2
SCORE**

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

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 Reliever Inhaler as directed by your healthcare professional, including during any worsening of your asthma or prior to exercise.

How can this self-test help me?

Many people with asthma rely too much on their Reliever Inhaler.^{1,2} 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 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 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 Reliever Inhaler. Like many people, you seem to be relying on your 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 Reliever Inhaler. Like many people, your 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 Reliever Inhaler. You do not appear to be over-relying on your 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 Reliever Inhaler.^{1,2} 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?²

As well as using a 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 Reliever 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)³ or partially controlled/uncontrolled (GINA 2023)⁴ 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,⁵ created and designed by leading expert in behavioural medicine, Professor Rob Horne, UCL.

¹ Price D, Fletcher M, van der Molen T. NPJ Prim Care Respir Med. 2014; 24:14009. ² Partridge MR, van der Molen T, Myrseth SE, et al. BMC Pulm Med. 2006; 6:13. ³ NICE Guideline [NG80]. Asthma: diagnosis, monitoring and chronic asthma management. November 2017. ⁴ Global Initiative for Asthma (GINA). Available at: <https://ginasthma.org/wp-content/uploads/2023/07/GINA-2023-Pocket-Guide-WMS.pdf>. Accessed: October 2023. ⁵ Horne R, Weinman J, Hankins M. Psychology & Health. 1999; 14(1):1-24.

PromoMats ID: Z4-58921

Date of Preparation: November 2023, revised 1 October 2025 Statement 4 updated following feedback to improve communication.

© Prof Rob Horne

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 Reliever Inhaler as directed by your healthcare professional, including during any worsening of your asthma or prior to exercise.