Conversion Guidance: Mometasone Inhaler to Alternate Inhaled Corticosteroid July 2022

VHA Pharmacy Benefit Management Services, Medical Advisory Panel, and VISN Pharmacist Executives

The following recommendations are based on medical evidence, clinician input, and expert opinion. The clinician should utilize this guidance and interpret it in the clinical context of the individual patient.

This conversion guidance is intended to assist providers in selecting an alternate inhaled corticosteroid during the mometasone inhaler (Asmanex) shortage.

Due to favorable pricing, conversion to ciclesonide (Alvesco) is recommended, if appropriate. Ciclesonide has been added to the VA National Formulary.

Table 1 provides comparative doses in asthma and may be used to assist converting patients from mometasone to another inhaled corticosteroid inhaler. This is not a table of equivalence and does not imply potency equivalence, but rather, suggested total daily doses for low, medium, high, inhaled corticosteroids based on product labeling.^{1, 2}

Single-drug inhaled corticosteroids are not FDA-approved for COPD; however, clinically, they are used as add-on therapy to bronchodilators in doses similar to those used for asthma.³ There is no conversion guidance specific to COPD; table 1 may serve as a guide.

Consider disease control and severity when switching. Monitor patient response and adjust dose as appropriate. Refer to product package insert for further dosing information.

Table 1.	Inhaled	Corticostero	id Dose Con	nparison in Asthma
----------	---------	--------------	-------------	--------------------

Dwg Name	Brand Strengths		Frequency of	TOTAL DAILY DOSE		
Drug Name	Name	(mcg)	Administration	Low	Medium	High
Mometasone DPI	Asmanex	110, 220	220mcg (once daily) 440mcg (divide into 2 daily doses)	220mcg	220mcg	>440mcg
Mometasone HFA MDI	Asmanex	50, 100, 200	Twice daily	200-400mcg	200-400mcg	>400mcg
Beclomethasone HFA MDI	QVAR	40, 80	Twice daily	≤200mcg	>200-400mcg	>400mcg
Budesonide DPI	Pulmicort	90, 180	Twice daily	≤ 400mcg	>400-800mcg	>800mcg
Ciclesonide HFA MDI	Alvesco	80, 160	Twice daily	≤160mcg	>160-320mcg	>320mcg
Fluticasone propionate HFA MDI	Flovent	44, 110, 220	Twice daily	≤250mcg	>250-500mcg	>500mcg
Fluticasone propionate DPI	Flovent	50, 100, 250	Twice daily	≤250mcg	>250-500mcg	>500mcg
Fluticasone propionate DPI	ArmonAir	55, 113, 232	Twice daily	≤250mcg	>250-500mcg	>500mcg
Fluticasone furoate DPI	Arnuity	50, 100, 200	Once daily	100mcg	100mcg	200mcg

References

- 1. Global Initiative for Asthma. Global strategy for asthma management and prevention, 2022 <u>2022 GINA Main Report Global Initiative for Asthma GINA</u>
- 2. Pharmacists Letter. Comparison of Asthma Meds. Full Update February 2021
- 3. Comparison table: Inhaled corticosteroids for treatment of COPD. Med Lett Drugs Ther. 2020 Sep 7;62(1606):e148-e149