Montelukast and asthma – what do I need to know?

Montelukast (also known as Singulair) may be suggested to you and your child to help treat their asthma.
This information sheet will tell you the things you need to know to help you decide if this is something you would like your child to try.

What is montelukast and why might my child be prescribed it?

Montelukast is an 'add on' treatment for asthma. This means it is usually given as well as inhaled steroids if inhaled steroids on their own are not controlling your child's asthma symptoms well enough.

Montelukast can reduce swelling in the tubes that carry air to the lungs (the airways) and make them less likely to get 'twitchy'. This means, if it is given alongside inhaled steroids, your child may have fewer symptoms and better controlled asthma.

Your child can take it as a chewable tablet usually taken at nighttime, or you can also get it as granules that you mix in with soft foods for younger children.

Does Montelukast work on everyone?

No, Montelukast does not work on everyone.
Although Montelukast can have make a big difference to some children's asthma, to others it can have no effect at all.
It isn't possible to know in advance who will respond and who won't. The only way to know is to try it. It is important to stop Montelukast if your child hasn't responded, so they are not taking medicines they don't need.

Are there any serious side effects of Montelukast?

All medicines have possible side effects. This means they can affect some people, while other people get no side effects at all.
Montelukast is the same, but some of the possible side effects of montelukast can be serious and distressing. It is therefore important to look out for them if your child is starting Montelukast.

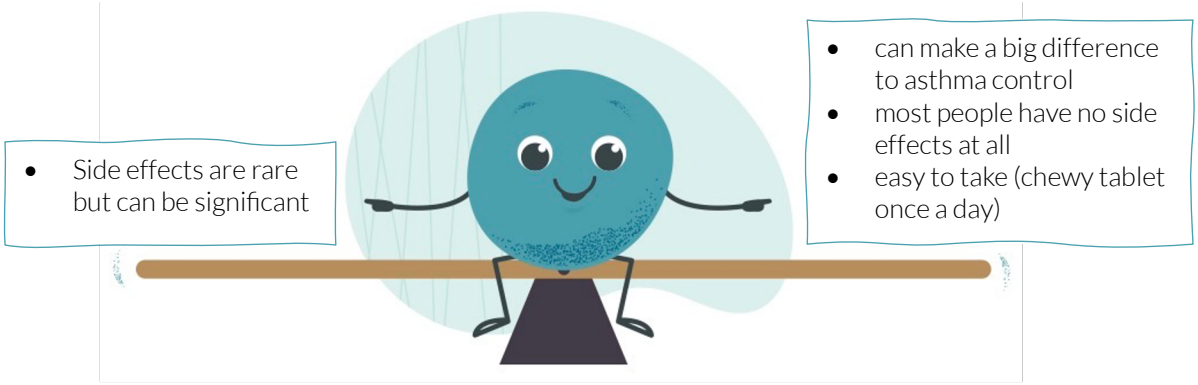
The important side effects are:

About 1 child in every 100	Sleep disturbance: (nightmares, night terrors or difficulty getting to sleep or staying asleep)
	Aggression and behaviour change
About 1 child in every 1000	Memory disturbance
	Attention problems
About 1 child in every 10,000	Hallucinations
	Suicidal behaviour
Younger children (under 5 years) may also develop some stuttering to their speech	

These side effects usually develop quickly (within a week or 2) of starting the medicine and almost always resolve after stopping it.
But they are not likely to go away unless the medicine is stopped.
This is why it is important to look out for these changes and tell your asthma doctor quickly if you see them.

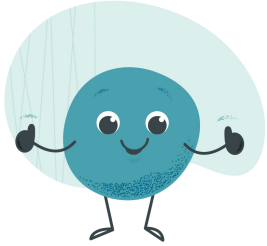
How do I decide if my child should take it?

If your child's doctor has suggested Montelukast, it will be because their asthma isn't well enough controlled.
Montelukast is a good option to help, but it won't be the only option.
Deciding whether to take it means having to weigh up if the risk of side effects is lower than the benefit they may get if it works:



What if I decide I want my child to have a trial of Montelukast?

- The most important thing is knowing about the side effects and looking out for them:
- Read the patient information leaflet that comes in the Montelukast box
- Be aware of the side effects and look out for them
    - Tell friends, family and teachers about the side effects and ask them to look out for them too – they may notice things before you do
    - If you notice any side effects, contact your prescriber and ask for advice
- If montelukast isn't making any difference to your child's asthma control after 3 months, ask your prescriber to stop it
- If your child does get side effects, its very helpful if you can report them so we can track how many children are getting them and what they are. You can do this via the yellow card scheme at https://yellowcard.mhra.gov.uk



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Author Jen Townshend