

# **Tell me about... Asthma**



**NATIONWIDE  
CHILDREN'S**

*When your child needs a hospital, everything matters.<sup>SM</sup>*



# **Tell me about...Asthma**

This book belongs to: \_\_\_\_\_

**Please ask your nurse or respiratory therapist to introduce you to the GetWell® Network asthma education videos on the Patient Edutainment system.**

**NationwideChildrens.org**

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# Is Your Asthma Under Control?

Take this quiz to find out:

Do you take your rescue (quick-relief) medicine more than TWO times PER WEEK?

☐ Yes   ☐ No

Do you wake up at night with asthma symptoms more than TWO times PER MONTH?

☐ Yes   ☐ No

Do you refill your rescue (quick-relief) inhaler more than TWO times PER YEAR?

☐ Yes   ☐ No

If you answered “yes” to any of these questions, your asthma may not be controlled as well as it could be.

Talk to your doctor about your answers. Review your rescue and controller medicines with your doctor.

# What is Asthma?

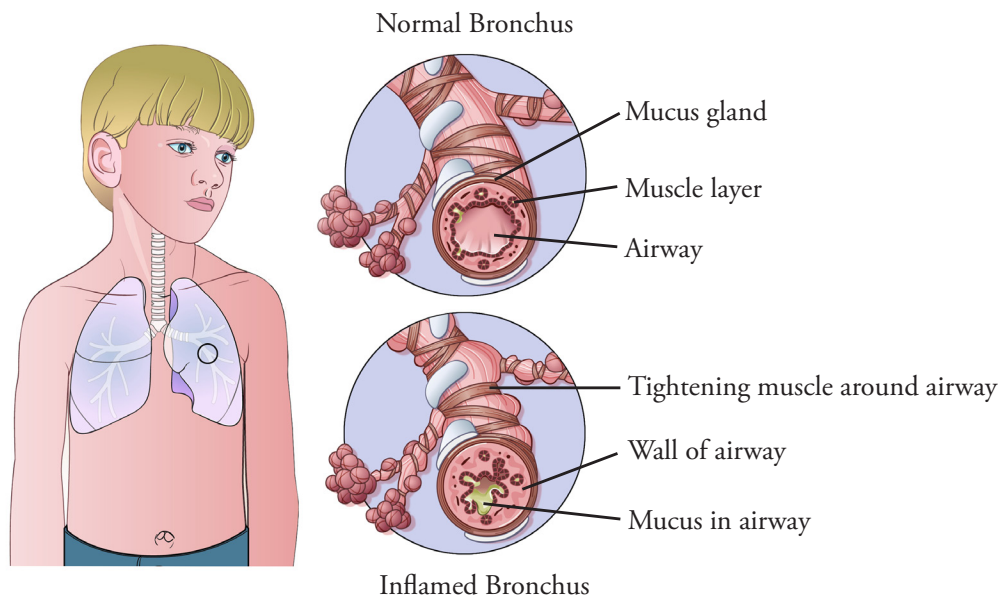
Asthma is a disease of the lungs. When you have asthma, the airways are very sensitive to many things in the air. The airways may get smaller when you are around things that trigger your asthma. This is called a flare-up.

## What happens during an asthma flare-up?

Asthma can be very serious. Breathing problems that start out mild can turn deadly. Three main things happen during an asthma flare-up that can make it hard to breathe:

- The airways swell and they become smaller.
- The airways fill with mucus.
- The muscles around the airway tighten and squeeze the airways making them smaller.

Asthma flare-ups begin with swelling in the airways. Asthma flare-ups or serious attacks can happen if the swelling is not treated. Taking medicines to control the swelling can prevent an asthma flare-up. **Medicines that treat the swelling must be used every day.** Follow the Asthma Action Plan that your doctor gives you.



## Can asthma be cured?

The good news is that asthma can be controlled. There is no medicine that can cure asthma. Asthma symptoms often improve as children get older. However, this may take a long time.

# Signs of an Asthma Flare-Up

## Warning signs

Most asthma flare-ups start slowly. You may notice small changes in your child's body before a flare-up. Changes include:

- runny or stuffy nose
- sneezing
- itchy or watery eyes
- itchy or sore throat
- tiredness

Many things can cause an asthma flare-up. They are called triggers. Know your child's asthma triggers and avoid them.



## Time to start rescue medicine:

- Coughing
- Wheezing
- Noisy breathing
- Chest tightness
- Fast breathing
- For very young children, grunting during sucking or feeding, fussiness, or unusual tiredness

## Call your doctor

Rescue medicine didn't help or isn't lasting 4 hours:

- Coughing continues
- Wheezing increases
- Vomiting after cough
- Chest tightness
- **Fast breathing continues**

**Danger signs – Go to the E.R. or call 911!**

**Rescue medicine has been given but your child is having the following symptoms:**

- Lips and fingernails turn grey or blue
- Breathing hard and fast (gasping)
- Nose opens wide when breathing
- Ribs and neck muscles show when breathing
- Hard to talk, walk, eat or drink due to being short of breath

### **What to do during an asthma flare-up**

Tell your child to:

- Tell an adult (parent, teacher, school nurse, coach, or babysitter) when having trouble breathing.
- Follow the Asthma Action Plan.
- Take the rescue medicine as directed by the doctor.
- Relax. Stay calm and try to breathe slowly and deeply.



# Asthma Triggers

Many things can start an asthma flare-up. They are called triggers. Know your asthma triggers and avoid them.

## ❑ Dust mites

Tiny dust mites live in pillows, stuffed animals, mattresses, carpets, and furniture cushions.

- Keep mattress, box springs, and all pillows in dust mite-proof covers.
- Wash your sheets, even brightly colored children's sheets and blankets, each week in very hot water.
- Remove stuffed toys from the bedroom or wash them weekly in hot water.
- Stay out of rooms that are being vacuumed or dusted.
- If possible, take rugs or carpets out of the bedroom.
- Do not use humidifiers inside the bedroom.

## ❑ Pets

- Do not have pets with fur or feathers in your bedroom or home.

## ❑ Cockroaches

- Kill all the bugs in the entire building. Make sure you do not re-enter until all fumes and smells are completely gone.
- Don't keep food in the bedrooms.
- Keep food and garbage sealed.

## ❑ Mold

- Fix leaky faucets and pipes.
- Clean moldy surfaces with bleach in water (1 part bleach to 10 parts water).
- Clean shower curtains.

## ❑ Indoor/Outdoor Pollutants and Irritants

- Avoid perfume, talcum powder, hair spray, and scented cleaning products.
- Avoid incense, scented candles, fireplaces, wood burning stoves, kerosene heaters, and outdoor fire pits.



# Asthma Triggers, continued

## ☐ Weather

- On cold days, cover your nose and mouth with a scarf or wear a turtleneck.
- On hot humid days, stay inside in air conditioning, especially during the afternoon hours. Plan any outdoor activities for the morning.

## ☐ Pollen

- Stay inside and keep windows closed when pollen levels are high.
- Remove clothing after spending time outdoors.
- Bathe or wash your child's hair before going to bed.
- Be sure your child takes the allergy medicine every day.

## ☐ Air Quality

- Be aware of your child's symptoms on air quality alert days

## ☐ Exercise

Exercise is important for everyone, even those with asthma. Asthma should NOT keep your child from playing sports or being active.

- Ask the doctor about taking asthma medicine before play or exercise.
- Always take rescue medicine while exercising. Use it right away if symptoms develop.

## ☐ Colds, flu or infections

Be sure your child:

- Avoids people with colds.
- Gets a flu shot every year.
- Washes hands frequently.
- Doesn't touch their face.
- Takes controller medicine, as directed, every day even if feeling well.

## ☐ Stress

Teach your child:

- To stay calm and breathe slowly.
- Focus on things that keep him or her calm or happy.

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*Keep your bedroom a "safe haven."*

# Asthma Triggers: Secondhand and Third-hand Smoke Exposure

## Secondhand Smoke:

- Secondhand smoke is what you breathe in when you are around a smoker. It is the smoke the smoker breathes out and the smoke that comes from the burning end of a cigarette, cigar or pipe. It contains more than 4,000 chemicals.
- Exposure to secondhand smoke makes asthma worse. It can cause more asthma episodes.
- Don't smoke around your child. Don't let others smoke around your child.
- Don't allow smoking in the house or car, even when no one else is present. The harmful chemicals from tobacco products linger and can still cause problems for anyone with asthma.

## Third-hand Smoke:

- Third-hand smoke is the nicotine residue. It stays on furniture, walls, and carpeting after a cigarette has been smoked in a room or car.
- Third-hand smoke clings to hair, skin, clothes, furniture, drapes, walls, bedding, carpets, dust, vehicles and other surfaces, even long after smoking has stopped. When infants, children and nonsmoking adults inhale, ingest or touch substances containing third-hand smoke, they may be at risk of tobacco-related health problems, such as asthma.

## What you can do:

- Make every effort to stop smoking, even if you could not stop before. Keep trying!
- Do not let anyone smoke in your home. Smoke stays in the furniture cushions, carpets and curtains. It can continue to irritate your child.
- If people must smoke, tell them to do it outside.
- Never smoke in the car with your child or in the car your child normally rides in.
- Avoid homes, restaurants, and other places where people smoke.



- If other people care for your child, make sure they do not smoke.
- Wash your hands and face after smoking, since smoke stays on your skin.
- Wear a covering over your clothing (“smoking jacket”) when you smoke, even outside, since smoke sticks to clothes. Leave the covering outside before going indoors.

**Here are some tips to help you stop smoking:**

- Talk to your doctor about medicines to help you quit smoking.
- Create a quit plan and set a quit date.
- Tell your friends and family members that you’re trying to quit so they can support you.
- Enroll in a quit smoking class or program.
- Find out what makes you want to smoke. Plan ways to avoid these times or think of ways you can deal with them without smoking.
- Reduce your exposure to other smokers.

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*Post “no smoking” signs in your home.*

# Asthma Medicines

There are two types of medicines for treating asthma. They are called **rescue (quick-relief) medicines** and **controller medicines**.

## Rescue medicines

Everyone with asthma needs a rescue medicine. Use it at the first signs of an asthma flare-up.

**A rescue medicine...**

- May be an inhaler or a nebulizer (aerosol)
- Works very quickly to make it easier for your child to breathe, but it lasts for a short time
- Helps to open airways right away
- Should not be needed more than 2 times per week
- May not work for a flare-up in patients who use it more than 2 times per week
- May be used 15 to 20 minutes before exercising or playing

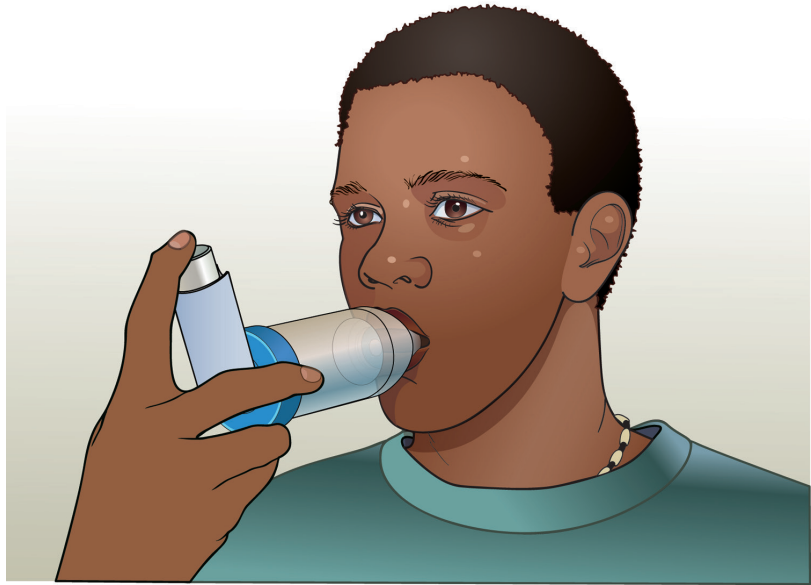
## Controller medicines

- Most people with asthma also need one or more controller medicines. A controller medicine:
- Helps prevent asthma symptoms and flare-ups
- Is taken every day even if feeling well
- Works to reduce the swelling and the mucus in the airways
- Does NOT help during an asthma flare-up

## Tips

- Use a rescue medicine as directed by the doctor.
- Keep your rescue inhaler and spacer with you at all times.
- Take your controller medicine every day as directed by your doctor, even when you feel fine.
- See the specific asthma medicine sheets. It will tell you how and when to take your asthma medicine, possible side effects, and important things to remember. Ask your nurse or respiratory therapist if you did not receive these.
- Refill your controller medicine every 1 or 2 months. Ask your pharmacist how often if you are not sure.
- Use your Asthma Action Plan. It will tell you when and how to take each medicine (see page 13).

- Use an asthma diary to keep track of symptoms and how often you use your rescue medicine (see page 14).
- Sit down with your doctor to develop an Asthma Action Plan. It will tell you when and how to take each medicine.
- Tell your teacher, coach and school nurse that you have asthma.



# Steroids and Asthma

During an asthma flare-up, the airways swell and fill with mucus. Steroids are medicines used to prevent or treat this swelling. The steroids used to treat asthma are NOT the same steroids that some people take to build muscles.

There are two kinds of steroids used to treat asthma:

1. Inhaled steroids are sprays or mists that are breathed into the lungs.
2. Oral steroids are a tablet or liquid taken by mouth.

Inhaled steroid medicines

- Are used every day, even when feeling well
- Prevent asthma symptoms and flare-ups
- Reduce swelling in the airways
- Help to reduce coughing and wheezing
- Go straight into the airways. This means fewer side effects
- Be sure your child rinses his mouth after every use.

Steroids by mouth

- Are powerful medicines used to treat serious asthma flare-ups
- Are taken only for a few days
- May cause a lot of side effects

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*The steroids used to treat asthma are NOT the same steroids that some people take to build muscles.*

# Asthma: When to Go to School or Work

Talk to your doctor about when you might need to stay home from work or school.

Your doctor may say it is OK to go to school or work if you:

- Have a stuffy nose but no wheezing, fever or sinus pain
- Have a little wheezing that goes away after you use your rescue medicine
- Are able to do normal activities
- Can breathe without extra effort

Your doctor may suggest that you stay home when you:

- Have a fever
- Have a bad cold
- Wheeze, cough, are short of breath, or your chest feels tight an hour after taking rescue medicine
- Feel too weak to do normal activities
- Are breathing hard or very fast



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*Go to the E.R. or call 911 if you are having trouble breathing.*



# Using an Asthma Action Plan

Sit down with your doctor to develop an Asthma Action Plan. A plan can be very helpful, especially during an asthma flare-up.

Your Asthma Action Plan can help you decide:

- What medicines to take
- How much to take
- When to take them
- When and how to get help

Your Asthma Action Plan should include:

- Emergency phone numbers
- Flare-up symptoms

See your doctor every 3 to 6 months for an asthma checkup.

## Sharing your plan

You may want to give a copy to friends, relatives, teachers, coaches, neighbors and babysitters so that they can help you if you have a flare-up.



An Asthma Action Plan may use 3 color “zones” to help you decide what to do:

Green Zone	Your breathing is good. Take your controller medicines every day to help prevent flare-ups.
Yellow Zone	You’re having a flare-up. Take your rescue medicines to keep it from getting worse. Continue taking your controller medicines.
Red Zone	You’re having a serious flare-up. Take your Red Zone medications and get help now!

# Asthma Symptom Diary

Patient: \_\_\_\_\_

Month: \_\_\_\_\_

[illegible]

# Teamwork: Working with Your Doctor

Schedule an “asthma-only” office visit.

1. Come prepared. Bring all of your medicines, spacer and any questions you may have.
2. Tell your doctor about any asthma symptoms you have had.
3. Keep a diary of your symptoms and show it to your doctor.
4. Ask your doctor what you should do if your asthma flares up.
5. Tell your doctor if you do not understand his or her instructions.
6. Talk to your doctor about asthma triggers and ways to avoid them.
7. Talk to your doctor about your medicines. Make sure you know:
  - The names of your medicines
  - How to use them
  - When to take them
  - How they make you feel
8. Talk to your doctor about an Asthma Action Plan for treating asthma.

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*Before each visit take a few minutes to think about your asthma.  
Write down any problems or questions you may have.*

# Goals of Asthma Care

Do you feel this way?

“I’m tired of waking up at night, coughing and wheezing.”

“It seems like I am always using my rescue inhaler.”

“I can’t play sports or keep up with my friends.”

**You don’t have to!**

Most people with asthma should be able to:

- Sleep well almost every night.
- Go to school and work every day.
- Use a rescue medicine less than twice a week.
- Exercise and play sports.
- Decrease the number of E.R. visits and doctor visits.

**Take control of your asthma**

Work with your doctor to set goals to help control your asthma.

- Sit down with your doctor to develop an Asthma Action Plan and follow it.
- Use your rescue medicine when in the “yellow zone” of your Asthma Action Plan.
- Take a controller medicine every day as directed by your doctor.
- Know your asthma triggers and stay away from them.
- Know your early and late warning signs and what to do when they occur.

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*Your asthma CAN be well controlled. You CAN play or exercise almost every day. You CAN sleep well almost every night.*

# Course Review for Parents

1. What happens during an asthma flare-up?
2. What are your child's triggers?
3. Tell me what your child's rescue medicine is.
4. When do you give your child the rescue medicine?
5. Can you tell me your child's controller medicine(s)?
6. When do you use your child's controller medicine(s)?
7. Show me how you use an inhaler with spacer.
8. How do you know when the inhaler is empty?

## Notes

This image shows a single page of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

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