(Asthma Facts)

What is Asthma?

Asthma is the situation when the airways in the lungs narrow down as the muscles are being contracted, or being infected or producing too much mucus that causes breathing difficulty. That is the patient will find it difficult to breath either in or out. The cause of asthma is still unknown. Even though there is no cure for asthma but if it is diagnosed in time and treated and controlled correctly, most asthma sufferers can live a normal life like everyone else.

Common Symptoms of Asthma

- * Breathing difficulty
- * Chest tightness
- * Wheezing

- * Coughing
- * Tiredness
- * Speaking difficulty

Contact Organisations

Asthma Foundation

Free call 1800 645 130 (office hours)

Asthma Foundation Phone: (03) 9696 7861

Website: www.asthmaaustralia.org.au

Asthma Foundation NSW Phone: 9906 3233

Website <u>www.asthmansw.org.au</u> Address: Unit 1, 82 Pacific Highway

St Leonard, NSW 2065

National Asthma Council

Australia

Website: www.nationalasthma.org.au

NSW Health Department Website: www.health.nsw.gov.au

NSW Multicultural Health Phone: (02) 9382 7516

Website: www.mhcs.health.nsw.gov.au

If you have language problem, please call the interpreter line on 131450 (free service)

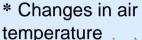
Trigger Factors

Because the respiratory system of an asthma sufferer is much more sensitive compared to that of a normal person, this system can, therefore, react easier with changes, things or substances in the environment. Any thing, substance or situation that leads to an asthma attack is call a **trigger factor**.

There are many factors that trigger an asthma attack. These include:

* Cigarette smoke





* Exercise









* Pollens









* Laughing too much



* A number of food additives such as MSG (monosodium Glutamate –

621)

* A number of chemical substances such as paint fume, perfume, sawdust



- * Moulds
- * Infection (that is bronchial infection)
- * A number of medications such as Aspirin and those that used to treat arthritis and other infections. The Beta-blockers that used to treat high blood pressure, heart and chronic headache)

How Should I Manage My Child's Asthma

- 1. Choose a family doctor who has a lot of experience with asthma to help you to understand the asthma situation of your child.
- 3. Make sure you child use asthma medication correctly as advised by your family doctor.

- 5. Understand clearly the asthma symptoms of your child and how to treat them.
- 7. Regularly take your child to your family doctor to check the condition of asthma. This will help to control your child's sickness and give your child a better life.

- 2. Ask your family doctor for a written **Asthma Action Plan** (www.nationalasthma.org.au). This plan will help you to understand when the asthma situation become more serious, how to quickly treat an asthma attack and when do you need to call an ambulance.
- 4. Understand and avoid the sources that cause asthma attacks: Avoid any source that you know will cause an asthma attack to your child. For example: Pet fur/pollens/cigarette smoking etc.
 - 6. Understand the signs that show your child is suffering a serious asthma attack and act as instructed in the asthma treatment action plan given by your family doctor.

8. Familiarize yourself with the "Asthma First Aid Plan".

Medicines used to treat Childhood Asthma

Asthma can be treated by the use of medications so that the majority of children can live a normal life. Medicines for asthma are manufactured in different forms. They could be in the forms of tablets, liquid, or a breathing device such as pump with facemask, or spraying via a spacer device with facemask and puffer.

There are two main groups of asthma medications:

1. Preventers

2. Relievers

1.1.PREVENTERS

How do preventers work?

Preventers can work on the inflammation of the airway – that is it helps to cure the



cause of asthma, not just its symptom.

Preventer medication also helps reduce the sensitivity of the airway, reduce the swelling and the release of phlegm.

Using preventer medication will help you to avoid symptoms of asthma and help your lungs to work properly.

Preventer medications are normally taken twice a day regardless whether there is a symptom of asthma attack. Do not stop using preventer without consulting your doctor.

Stop using preventer at your own will could lead to an immediate asthma attack in your child.

Medications: Intal, Intal Forte, pulmicort, Respocort, Flixotide, Cortisone, Singulair, Tilate, Flixotide, Qvar.

Colours: Brown, beige, orange and white.

Medicines used to treat Childhood Asthma cont...

2. RELIEVERS

When should reliever be used?

Use when having an attack – Relievers help to relieve the attack immediately and can be used whenever needed.

How does reliever work?

When inhaling into the lung, the medication quickly opens the twitchy



airways by relaxing the muscles covering the airways. It also reduces the breathing difficulty, coughing and wheezing of the asthma attack.

How quick does reliever work?

Reliever medication works effectively within a few minutes (10 minutes). For Atrovent, however, it may take about 30 minutes to react.

What are the side effects of relievers?

Slight quivering, distress and fear, quicker heartbeats. These effects, however, are not harmful and won't last long. They will disappear after using the reliever for a period of time. Most of those using relievers don't suffer from any side-effect after using these relievers. However, you should inform your doctor immediately if your child suffers from any side-effects. Remember that you should not stop giving the reliever to your child until advised by your family doctor.

Medications: Ventolin, Respolin, Bricanyl, Asmol, Atrovent, Airomir, Epaq and Theophyline.

Colours: Blue or green

Notes:

- If using both preventer and reliever, it's best to inhale the reliever into the lungs before using the preventer.
- If your child often needs to use reliever, say everyday you should discuss with your family doctor about the use of preventer.
- If the medication takes too long to effect, you may need to increase the number of doses. Please talk to your doctor about it.
- You need to discuss with your doctor to learn more about the "Asthma Treatment Plan" and the "Asthma First Aid Plan".
- •Always bring along medication.

To use a spacer with facemask, follow the steps below:

1.Remove the cap from the puffer.



2.Shake the puffer.



3.Insert the puffer in to one end of the spacer, and the other end with the facemask (made of rubber).



- 4. Use one hand to handle the spacer and securely place the facemask over the mouth and nose of the child. (You can also hold and let the child sit on your upper leg).
- 5. Use the other hand to hold the puffer upright and press the puffer down once.
- 6. Keep the facemask in place to prevent the medication mixture to escape. Carefully observe and wait for the child to breath in and out six times.



7. Repeat steps 5 and 6 if required more medication (as instructed by your doctor)

- Spacers are used to transfer medication from the puffer into the lungs. Every spacer has a one-way valve that allows the medication to be inhaled.
- When the child breaths out into the spacer,, the one-way valve will close, preventing medication to escape out to the air. Using a spacer, therefore, helps to deliver more medication into the airway
- Spacing devices with facemasks are normally used in children under the age of three

Common Questions Asked By Parents

1. At which age does a child develop asthma?

The stage when a child develops asthma varies. If asthma develops, it normally occurs when a child is between 2-7 years of age.

2. Can a child avoid asthma?

Whether a child can avoid suffering from asthma depends on his/her age when asthma begins to develop as well as how serious it is. About 50% of children who suffered light asthma will no longer have symptoms of asthma as they reach teenage stage. But children who suffer serious asthma are unlikely to avoid symptoms of asthma at teenage stage.

3. Is asthma inheritable?

Yes it is. Asthma development tends to be inherited from the parents. This, however, does not necessarily mean a child will develop asthma if his/her parents are asthma sufferers.

4. How often does asthma occur?

Asthma often occurs and occurs all around the world. Anyone, at any stage can have asthma. In Australia there are more than two million asthma sufferers. One out of four young Australian children has asthma. As they grow up, there is one asthma sufferer out of seven teenagers.

5. Will my child grow out of asthma in the future?

Some children will grow out of asthma but some others still have asthma. About half of those with asthma symptoms in childhood will not have asthma symptoms as they reach teenage stage. However, it is very hard to predict if your child will grow out of asthma.

6. Why do I need to take my child to the family doctor to review his/her asthma conditions on a regular basis?

Asthma needs to be reviewed regularly due to the three important reasons below:

- Help to discover the seriousness of asthma in order to find the best treatment for you child.
- To find out how effective the medications are, that are used to control your child's asthma.
- To review whether the child's asthma conditions have improved of not so that appropriate actions can be taken

Common Questions Asked By Parents continued...

7. Can asthma be cured?

Despite the fact that there have been many efforts in trying to find the cure for asthma, we still haven't found a cure for asthma. We must, therefore, control the symptoms and have an understanding about the infection of the respiratory system. Luckily, we have already developed medications that can effectively control asthma for everyone.

8. How can asthma medications be used?

In order to deliver medication into the airways, most of the asthma medications are manufactured in the form of inhalants (or breathing pieces of equipment). Because the medication can travel into the lungs when being inhaled.

There are a number of pieces of equipment that can be used in conjunction with asthma medication such as puffers, spacer or nebulisers. Other asthma medications that can be taken orally or inject directly into the blood vessel if your child suffers serious asthma.

9. How long does it take a reliever to work?

Within a few minutes (10 minutes). Atrovent, however, can take up to 30 minutes to start working.

10. Do I need to carry along a reliever?

As there is a need to use reliever medication when having an asthma attack or wheezing. You need to carry a reliever with you all the time

11. What are the side effects of Ventolin?

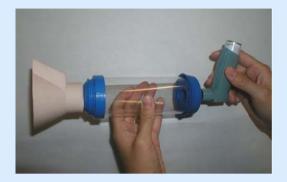
Slight quivering, distress and fear, and quicker heartbeats. These effects, however, are not harmful and won't last long. They will disappear after using the reliever for some period of time. Most of those using relievers don't suffer from any side-effect after using Ventolin. However, you should inform your doctor immediately if your child suffers from these side-effects. Remember that you should not stop giving the reliever to your child until advised by your family doctor.

12. When does my child need to use a preventer?

Preventers are to be used twice a day regardless of whether your child has symptoms of asthma. Preventers are normally prescribed to those who have often suffered asthma attacks and those who have chronic asthma. Don't stop using the preventer even if your child feels better. Stoping use of the preventer without consulting your doctor could lead to your child suffering an asthma attack straight away.

How to Clean Spacer

The spacer should be kept clean and out of dust by: Washing the spacer every month. Wash the spacer when it is cloudy or when you don't see the one-way valve moving as the child breaths in and out. How often the spacer should be clean depending how often you use it.



Facemask, spacer and puffer after being assembled

The spacer should be disassembled for cleaning. Wash it in warm water mixed with soap or detergent. After that, leave the parts to dry before re-assembling. Note that there is no need to rinse it with water or wipe it with cloth or paper tea towels after washing because this will make the medication to stick onto the wall of the spacer.

