HOW TO CONTROL ASTHMA



http://www.allergyfoundation.co.za



Asthma is a long term illness of the lungs that causes the airways to become inflamed and produce lots of mucus. Viral infections, cold air, allergens, exercise, and smoke make the airways "twitchy"; they close easily causing asthma attacks with coughing, wheezing and shortness of breath (see what is asthma). Between attacks the airways are inflamed (see what is an allergy).



NORMAL BRONCHUS

ASTHMA BRONCHUS

What is asthma control?

Asthma is a long-term disease that has no cure. But asthma can be completely controlled so that

- You have no chronic and troublesome symptoms, such as coughing and shortness of breath
- You are not using quick-relief medicines regularly
- You have good lung function
- You can do all normal activities and sleep through the night
- You have NO asthma attacks with emergency room visits or hospital stays

Record Your Symptoms

You can record your asthma symptoms in a diary to see how well your treatments are controlling your asthma. (see asthma diary).

Asthma is well controlled if:

- You have symptoms no more than 2 days a week, and these symptoms don't wake you from sleep more than 1 or 2 nights a month.
- You can do all your normal activities.
- You take quick-relief medicines no more than 2 days a week.
- You have no more than one asthma attack a year that requires you to take corticosteroids by mouth.
- Your peak flow doesn't drop below 80 percent of your personal best number.

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Partner with your doctor to control/manage your or your child's asthma. Learn about the medications, how they work, the best techniques and to how to use them with the greatest effect. Children aged 10 or older, and younger children who are able, should take an active role in their asthma care

Asthma Medications

Medications are one of the most important ways to prevent or treat asthma symptoms. There are two types of asthma medications: controller medications and quick relief (rescue/reliever) medications. Although many people think their reliever medication is the most important (because they make them feel better when they are having an attack), actually the controller medications are even more important. This is because if you use your controller medication every day with the technique your doctor shows you, you should not even have any attacks at all!

Bring all your pumps and medicines with you to your every visit so your doctor, nurse or pharmacist can explain to you what type of medicine it is, and check whether your technique in using it is good enough.

Controller Medications

Controller medications work slowly over weeks to months to reduce the airway swelling and inflammation and help prevent asthma symptoms from occurring in the first place.

Controller medications:

- Prevent asthma symptoms from occurring and reduce and/or prevent:
 - Inflammation and scarring in the airways.
 - Tightening of the muscle bands around the airways (bronchospasm).
- Will not provide quick relief of asthma symptoms.
- Do not show immediate results, but work slowly over time.
- Should be taken daily, even when you are not having symptoms.



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Quick-Relief (Rescue or Reliever) Medications

Rescue/reliever medications are fast-acting medications used to relieve asthma symptoms within five to 20 minutes. They should be used whenever you have asthma symptoms. These types of medicines are usually inhaled directly into the lungs through an inhaler or a nebulizer. Although these are very popular medicines used to open up your chest and allow you to feel better, they do not deal with the inflammation that is causing the symptoms. The controller pump is actually more important.

Rescue/reliever medications:

- Relieve asthma symptoms once they have started.
- Are fast-acting (start working in five to 20 minutes).
- Do not control or prevent inflammation in the airways.
- Relax the tightened muscle bands around the airways (bronchospasm).
- Should only be needed occasionally. Talk to your doctor if you find you are using quick-relief medications more than twice a week to control your breathing.

What is an action plan?

- An action plan tells you exactly how to monitor your asthma control and what you should do if your asthma is
- 1 In the green ... Well controlled: Use your normal medication
- 2) Orange ... not controlled: Use relievers and see your doctor
- Red ... Red alert: Use relievers and see a doctor immediately

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ATTACAL ASTRON		
Asthma sufferers can: • Have NO Symptoms • Have a normal lifestyle, play sport and sleep well.	 Take your controller medication every day whether you feel well or unwell. Visit the Doctor /Asthma Clinic twice a year even if asthma is well controlled. 	Doctor's Phone No: Hospital Phone No: Date
Have as few acute attacks as possible Miss little or no school and work Have your best possible peak flow	 Take your medication/pumps/spacers with you to every doctors/nurses visit. Take this plan to each visit so it can be updated. 	Normal Peak flow
	Take your asthma diary to each visit.	
GREEN ZONE - GO	ORANGE ZONE - CAUTION	RED ZONE - RED ALERT!
This is where you want to be most of the	Your asthma is not under control/getting	Your asthma is critical/dangerous when:
time. Your asthma is under control when:	worse when:	Breathing is hard and fast
 No cough or wheeze 	Cough, wheeze or tight chest	Can't talk easily or feed easily
Can play games and sport normally	 Waking at night with asthma symptoms 	Severe shortness of breath
No sleep disturbance	Need to use the reliever inhaler more than	The reliever pump is not helping
Using reliever less than 3 times a week	3 times a week	OR Peak flow is below 50%
AND Peak flows are greater than 80%	 Problems playing or doing sport 	Follow the Red Zone Action and see a
	OR Peak flow recordings are between	doctor immediately or go to the closest
	(50%) and (80%)	emergency room.
ACTION: TAKE NORMAL MEDICINES	ACTION	ACTION
1. Controller	Increase the reliever inhaler to	Call an ambulance or go to the doctor
Strength	puffs four times per day until you are back in	NOW, even if symptoms get better!
Your device is	the green zone.	Take 1 dose/puff of reliever every minute
Take puffsevery day	Continue to take your controller inhaler as	for 10 minutes. Use a spacer if you have
2. Other Medicines	normal to prevent your symptoms.	one. Repeat this if there is no improvement,
Medicine	Other action:	as often as you need.
Dose		
When	If there is no improvement, medication	While waiting: Give one puff of reliever every
3. Reliever	may need to be changed, so make an	minute for 10 minutes using a spacer if you
Device	appointment to see your Doctor or Asthma	have one.
	Nurse.	 If you have steroid tablets or syrup give
Takepuff(s) as required		
And if necessary take puff(s) as required	Follow the advice in this plan and fill in a	them now. Your dose is



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Signs That Your Asthma Is Getting Worse (see action plan)

Your asthma might be getting worse if:

- Your symptoms start to occur more often, are more severe, or bother you at night and cause you to lose sleep.
- You're limiting your normal activities and missing school or work because of your asthma.
- Your peak flow (see peak flow tests) is low compared to your personal best or varies a lot from day to day.
- Your asthma medicines don't seem to work well anymore.
- You have to use your quick-relief inhaler more often. If you're using quick-relief medicine 3 or more days a week, your asthma isn't well controlled.
- You have to go to the emergency room or doctor because of an asthma attack.

If you have any of these signs, see your doctor. He or she might need to change your medicines or take other steps to control your asthma.

Remember

Take your medicines as directed by your doctor, and you:

- May have more days without asthma symptoms
- Won't use quick-relief medications as often.
- Will have fewer symptoms at night
- Will breathe better
- May avoid permanent lung function changes/damage.



A medical specialist with a special interest and skill in allergy might be able to help. See the list of health professionals with skills in allergy on the AFSA website.

