

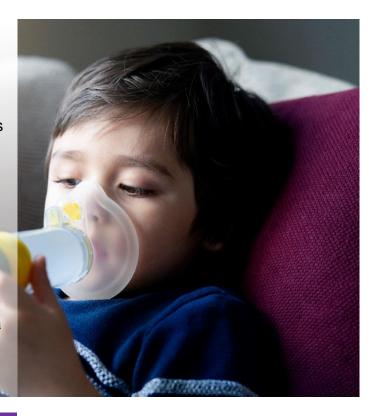
# Helping Your Child Manage Their Asthma

### What is Asthma?

Asthma is a medical condition that causes breathing problems.

This occurs when something triggers a reaction in the airways (breathing passages) and they become smaller.

This may be called a 'flare up' or 'attack'.



# What are asthma symptoms?

- Wheezing (a whistling sound of air passing through narrow airways)
- · Taking small, faster breaths
- Difficulty talking or catching their breath and/or complains of chest tightness
- Nostrils flare with each breath
- Coughing
- Skin pulling in between and under the ribs
- Skin at base of throat sucking in

### **Triggers**

Knowing your child's triggers will help you control or stop their symptoms

Things that irritate (or bother) your child's airways are called triggers. Triggers make asthma flare up.



Smoke



Infections



Animal Dander



**Pollen** 



Dust Mites



Exercise



Air Pollution



Mold



Strong Smells



Hot/Cold Weather



Other Triggers:

Regular play and exercise is good for your child's health. If your child has symptoms with exercise, it may be that their asthma is not well controlled; see your action plan (page 3) or see your practitioner or asthma clinic for advice.



# Helping Your Child Manage Their Asthma

### How do medications help?

There are two main kinds of medication for treating asthma.



### **Controller Medication**

- Usually this is an 'inhaled steroid' or sometimes medications by mouth
- Treats airway swelling and reduces mucous build up
- May take several days or weeks to start working
- This medication will be given every day even when your child is feeling well



### **Reliever Medication**

- Usually referred to as a 'bronchodilator'
- Relaxes airway muscles, helping the airways to open wider
- Starts to work quickly
- This medication may be given more often during a flare up

How to Use a Spacer/Aerochamber<sup>™</sup> and Metered-Dose Inhaler (MDI or Puffer) Knowing and using your child's device.

Your c	hild	shoul	ld use:
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#### Spacer with Mask and a Metered-Dose Inhaler (Puffer)

Suggested age: infant or child less than 8 years, or anyone unable to use spacer with mouthpiece

### Spacer with Mouthpiece and a Metered-Dose Inhaler (Puffer)

Suggested age: 8 years of age and older, if they can follow instruction to close lips around mouthpiece



### STEP 1

Shake puffer well and put into spacer



### STEP 2

(with Mask)

Cover mouth and nose well (avoid eyes)



# STEP 2

(with Mouthpiece)

Close your lips around the mouthpiece



STEP 3

Press puffer once



#### STEP 4

Breathe in and out, slowly and deeply, 6 to 10 times

- · If another puffer is prescribed, wait 30 seconds and repeat steps 1-4
- Rinse mouth and wash face after use of controller medication

**TIP** If you hear a sharp whistle sound from the Spacer/Aerochamber<sup>™</sup> your child is breathing too fast. Ask them to slow down their breathing.

### Cleaning of your Spacer/Aerochamber™ device

- The Spacer/Aerochamber<sup>™</sup> should be cleaned once a week.
- Clean the front piece and back piece with warm soapy water. Soak for 15 minutes and shake gently. Rinse all parts in clean water and let dry.



# **Helping Your Child Manage Their Asthma**

### **Asthma Action Plan**

# GREEN ZONE - Good | Controlled Asthma



- No asthma symptoms
- Not missing daycare/school
- Parents are not missing work

### What should I do?

### **CONTROLLER - REDUCES AIRWAY SWELLING**

MEDICINE (Colour):

Puff/Dose

Time/Day



Take **EVERYDAY** to prevent asthma symptoms.



- Getting a 'cold'
- Cough, wheeze or difficulty breathing, especially at night
- Symptoms with play or normal activity

# YELLOW ZONE - Caution | Take Action - Flare Ups -



Time/Day

### What should I do?

### **CONTROLLER - REDUCES AIRWAY SWELLING**

MEDICINE (Colour):

Puff/Dose

If reliever medicine is needed every 4 hours or if asthma symptoms are not improving after 1 day, see your practitioner

## **USE RELIEVER AS NEEDED - OPENS TIGHT AIRWAYS QUICKLY**

MEDICINE (Colour):

Puff/Dose

Time/Day



- Skin sucking in between and under the ribs
- Skin at base of throat sucking in
- Continuous coughing or wheezing
- If reliever medicine is needed more than every 4 hours
- Very tired or limp
- Blue or grayish in colour

## **RED ZONE – DANGER | Take Action – Get Help**



### What should I do?

CALL 911 or GO TO THE NEAREST EMERGENCY DEPARTMENT IMMEDIATELY

Give puffs of reliever medicine using Spacer/Aerochamber™ every 20 minutes on the way to hospital or while waiting for help. Repeat if no improvement.





# Helping Your Child Manage Their Asthma

### Going home from the hospital

Use this plan for the next days after you leave the hospital.

Type of Medication	Name of Medication	How much and how often	Special instructions
Reliever			
Controller			
Other Medications (such as antibiotics or steroids)			



Family Doctor	Pediatrician	Respirologist (Lung Doctor)	Allergy Doctor



Using this guide, you can keep your child's airways healthy by:

- avoiding triggers
- understanding proper use of medications
- knowing when to seek medical help

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Excerpts of this handout are based on the Asthma Action Plans developed by Child Health BC, BC Children's Hospital and the Medical Services Commission of British Columbia, Guidelines and Protocols Advisory Committee to support the implementation of the BC Guideline 'Asthma in Children - Diagnosis and Management' (2015). Available from <a href="http://www.bcguidelines.ca/">http://www.bcguidelines.ca/</a>.