

# Family Asthma Guide



The Goal is Control!



Children's Health Fund (CHF) has been at the center of the movement for health equity for children for 35 years. CHF's National Network is a critical resource in ensuring that children living in under-resourced communities have the same chance to live a healthy life as every other child in this country. Bringing together the many providers of care in these communities in one network allows CHF to share knowledge that improves healthcare everywhere. It allows us to spot and head off emerging challenges. It allows us to act as one voice for policy change.

To request the Family Asthma Guide, please go to: childrenshealthfund.org.

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Look for this symbol for tips on what YOU can do to control your asthma.

But I have asthma...







## Yes, you can!







Play outside with my friends







Play at the park



Did you know?

There are even Olympic athletes with asthma?



People with asthma do all these things. With good asthma control, you can too. Different people need different plans. Work with your medical provider to make a plan that is right for you. Don't let asthma hold you back!

# The Goal is Control!

This guide will help you and your family understand your asthma better. Learn what YOU can do to control your asthma.



#### **Asthma control means:**

- You can play and exercise without problems
- You can sleep well
- No missed school because of asthma
- Mo hospital stays
- Few or no emergency room visits
- Few or no side effects from medicine

#### What are YOUR goals for asthma control?

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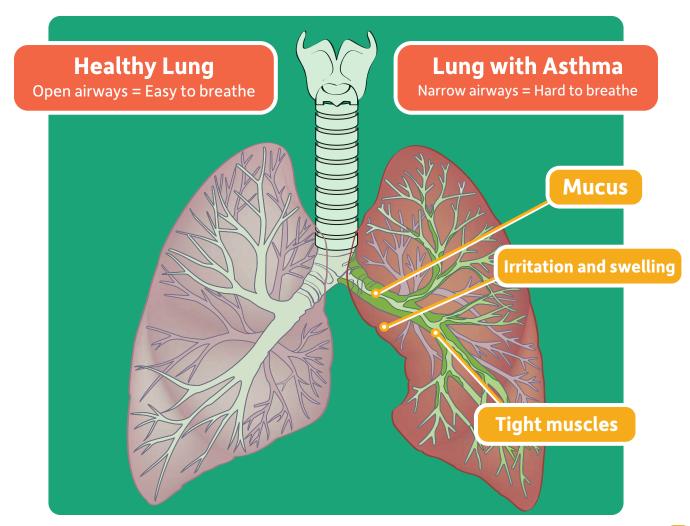
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## What is Asthma?

- Asthma is a disease of the lungs. It makes the small airway tubes get narrow, so it is hard for air to get in and out.
- When your airways are too narrow, you get asthma symptoms, and it is hard to breathe.



### What is Asthma?



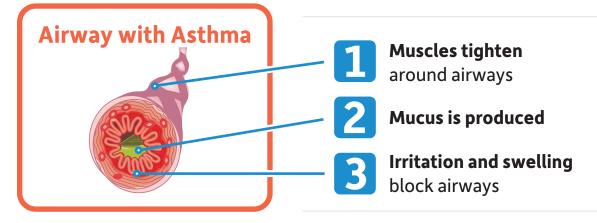
Asthma is a lung disease that makes it hard to breathe.

Asthma is a disease with symptoms that come and go. Some people have fewer symptoms as they get older. You may not have symptoms for a long time, but they can come back any time. Be ready to act quickly. Some people with asthma only have symptoms when they get a cold or exercise. Other people have symptoms every day. Some people are worse at certain times of the year.

Asthma can't be cured, but you CAN work with your medical provider to have fewer symptoms. Learn what to do to take control!



## Three things happen when you have asthma:





Asthma can be controlled. You can learn to manage your asthma. **Asthma Symptoms** 

#### What does asthma feel like?



Asthma is not the same for everyone. You may have some or all these symptoms:



#### Cough

With asthma you may cough a lot, even when you don't have a cold. The cough may last a long time. It may wake you up at night. You may cough when you play or exercise.

#### Wheezing

Wheezing is a whistling sound when you breathe out. This is the air trying to go through narrow airways.

#### **Out of breath**

When you feel out of breath you may have trouble breathing or feel like you can't get enough air. You may need to breathe faster than normal.

#### **Chest tightness**

Chest tightness is when your chest feels tight or heavy. Your chest may hurt or feel like something is squeezing or pressing on it. You may feel like it is hard to get air in and out of your lungs.

#### Fatigue/tiredness

Fatigue or tiredness is when you get tired more easily than usual.



Know your symptoms so you can act quickly when they begin. Plan with your medical provider. Acting early can keep symptoms from getting worse.

## **Asthma Categories**

#### How bad is my asthma?



Your medical provider will classify your asthma based on how often you have symptoms, or how sick you get.

#### The categories are:

Intermittent

**Mild Persistent** 

**Moderate Persistent** 

Severe Persistent

## Ask your medical provider which category of asthma you have.

People in any category can get very sick when they have an asthma attack.

- Be ready
- Have your medicines
- Know what to do



A person who sleeps well can do better at school. If you wake up at night coughing a lot, your asthma is not in control.

## Your medical provider will check your asthma control:

Well controlled

**=** s

No symptoms at all

This is the goal for everyone.

Not well controlled

=

Some symptoms

Talk to your medical provider. Your plan may need changes to get your asthma well controlled.

Ask your medical provider how well you are doing.

Very poorly controlled

=

A lot of symptoms

Talk to your medical provider. Your plan may need changes to get your asthma well controlled.

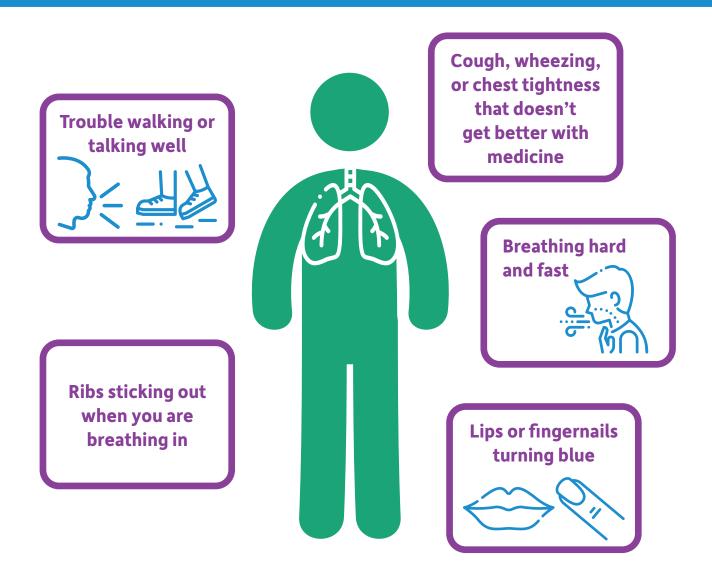


Talk to your medical provider to make sure you are on the right medicines, especially when your symptoms change.



## ATTENTION **Asthma Attacks**

An asthma attack is when your asthma symptoms get out of control and make you sick. **Signs of a serious asthma attack can include:** 



If this happens, get help immediately.

See the Asthma Action Plan on page 26



# What is a Trigger?



## What is a Trigger?



An asthma trigger is something that makes your asthma symptoms start or get worse. Different people have different triggers.



Knowing your triggers will help you manage your asthma.

#### **Common Triggers**

#### Indoor

- Dust or dust mites
- · Cats, dogs, or other animals
- Rats or mice
- Cockroaches
- Mold

#### Outdoor

- Pollen from flowers, grass, or trees
- Changes in weather or seasons

#### **Irritants**

- Cigarette smoke
- Strong smells (like cleaning products or perfumes)
- Air pollution or smog

#### Other

- Stress, worry, or other emotions
- Colds or sickness
- Exercise or play
- Food allergies
- Cold air

What ar	re <b>YOUR</b>
asthma	triggers?

1			





## **Trigger Control**

What triggers your asthma? Try to avoid your triggers. Plan for when you will be around them.

#### In the house

#### **Pests**

- Use baits, not sprays, to kill cockroaches. Sprays can trigger asthma attacks.
- Use traps to kill rodents.
- Don't leave food out. This can bring mice or roaches into your home.
- Fix holes around pipes and in the walls where pests may enter.

#### **Dust**

- Clean dusty surfaces with a damp cloth so dust doesn't get in the air.
- Wait 30 minutes to go inside after sweeping to avoid dust in the air.
- Vacuum cleaners with a HEPA filter prevent dust from getting into the air.

#### Mold

- Mold grows on moist surfaces.
- Check for puddles of water under the refrigerator and in the bathroom and kitchen.
- Fix leaks. Water damage on the walls, floor, or ceiling can grow mold.

#### Smells and odors

- Sprays and cleaners with strong smells can bother your lungs.
- Lemon, baking soda, and vinegar are safer for cleaning.
- Air fresheners, candles, and perfumes can trigger asthma.
- Don't smoke or be around smoke.

#### Outside

If you have allergies to plants or pollen, know what months are worst for you. Plan. Talk to your medical provider about allergy medicines.

### **ATTENTION**

Particles in the air are bad for asthma!
Particles come from cigarette smoke, vaporizers, and flames.



You should avoid areas where people have smoked, vaporizers are used, or candles and incense are burned.



## **Allergies**

#### How do I know if I have allergies?

There are different ways to test for allergies. One way is with a blood test. Another is with a skin test. Your medical provider may do these tests in the office or send you to a special doctor called an allergist.

People with
allergies may
need to take
allergy medicines.
Controlling allergies
may help you control
your asthma.

#### Do allergies make my asthma worse?

An allergy is when your body reacts to something that is harmless to most people. Allergies can cause a rash, hives, itchy eyes, runny nose, sneezing, or coughing. Allergies can make asthma worse.

Some people are allergic to dust mites, pollen, mold, rats, mice, cats, dogs, and cockroaches. Allergies can make asthma harder to control.

#### **Related Conditions**

Some medical conditions make asthma more difficult to control. Talk to your medical provider about your other health problems including:

- **Snoring:** If you snore most nights even without having a cold, ask your medical provider if you could have obstructive sleep apnea.
- **Bedwetting:** For some children, bedwetting is related to uncontrolled allergies.
- **Behavior issues:** Poor sleep can cause difficulty focusing, impulsiveness, and increased activity.
- Anxiety: Anxiety can make asthma worse, and asthma can make anxiety worse.
- **Trouble exercising:** It is important to be in good shape. When asthma is well controlled you should be able to exercise normally. If you get out of breath, cough, or wheeze, tell your medical provider.
- **Sickle cell:** Some blood disorders, like sickle cell disease, can cause serious asthma problems. See your hematologist regularly if you have a blood disorder.



Ask your medical provider if you need to be tested for allergies.



## What Medicine Should I Take?



## There are 2 kinds of medicine to treat asthma

#### **Relievers**

Relievers relax tight muscles around the airways. Use your reliever medicine for quick relief of asthma symptoms.

#### Controller

Controllers prevent irritation, swelling, and mucus that block airways. If you are on a controller medicine, use it every day to prevent symptoms. Ask your medical provider if you need a controller.







Everyone who has asthma should have a reliever medicine. People who have asthma symptoms often should be on a controller medicine too.

### **Asthma Medications**

#### **RELIEVERS**

Everyone with asthma should have a reliever medicine.

**Relievers** are also called rescue medicines. They can come as inhalers or go in a nebulizer machine; you may need more than one.

#### What do relievers do?

- Some relax the muscles around the airways. Some decrease airway irritation.
- These medicines work quickly to help you feel better.

#### When should I use my reliever(s)?

- Only when you need it.
- For quick relief.
- When you are having symptoms (cough, wheezing, chest tightness, out of breath, fatigue/tiredness).
- Before exercise or activity, if needed.
- About half an hour before you are going to be around one of your triggers.

My Reliever(s):		

#### **CONTROLLERS**

Some people also need a controller medicine. These medicines try to prevent asthma symptoms.

**Controllers** can be inhalers or medicine that goes in a nebulizer machine.

#### What do controllers do?

- They reduce irritation, swelling, and mucus in the airways.
- They take time to work. Don't expect to feel different right away.

#### When should I use my controller?

- Every day or twice a day (as directed by your medical provider).
- Whether or not you are having asthma symptoms.
- If used every day, you will have fewer symptoms over time.
- If used every day, they will help with your triggers.

Му	Co	ntro	ller	(s):
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#### **Important!**

- When you have symptoms or an asthma attack, use your reliever(s) for quick relief.
- If you are on a controller, use it every day, even when you are not having symptoms.
- If you are on a controller, you should also have a reliever. You will still need your reliever when you have symptoms.

## **Medicine Tips**

#### TIP:

Talk to your medical provider if your medicine makes you feel bad or sick. You may need to use a spacer or change to a different medicine.



Rinse your mouth after using inhaled controller medicines.

If you are on a controller, use it every day. Make taking your controller part of your regular routine.

Always use a spacer with your inhalers. More medicine gets into your lungs, so less gets on the inside of your mouth.



#### Don't run out of medicine!

- Plan.
- Get refills before you run out of medicine.
- If you run out of refills, call your medical provider. Don't wait for your next appointment.
- Check the expiration date on your medicine.
- Do not use it if it is past the expiration date.
- Take your medicine when you are away from home.

#### Relievers



Albuterol Sulfate



(albuterol)



Ventolin HFA (albuterol)



Xopenex HFA (levalbuterol)



ProAir HFA (albuterol)



ProAir RespiClick (albuterol)



Maxair Autohaler (pirbuterol)



Xopenex solution (levalbuterol)



Symbicort 80 or 160 (budesonide/ formoterol)



Dulera 50 or 100 or 200 (mometasone/ formoterol)

#### **Controllers**



Pulmicort Flexhaler 90 or 180 (budesonide)



**Pulmicort Respules** 0.25 or 0.5 or 1.0 (budesonide solution)



Qvar RediHaler 40 or 80 (beclomethasone)



Fluticasone MDI 44 or 110 or 220



Fluticasone Diskus 50 or 100 or 250



Avesco MDI 80 or 160 (ciclesonide)



Aerospan MDI (flunisolide)



**Arnuity Ellipta** 50 or 100 or 200 (fluticasone)



Asmanex Twisthaler 110 or 220 (mometasone)



Singulair 4 or 5 or 10 (montelukast)



Advair Diskus 100 or 250 or 500 (fluticasone/ salmeterol)



Advair metered-dose inhaler 45 or 115 or 230 (fluticasone/ salmeterol)



Wixela Inhub 100 or 250 or 500 (fluticasone/ salmeterol)



AirDuo RespiClick 55 or 113 or 232 (fluticasone/ salmeterol)



Dulera MDI 50 or 100 or 200 (mometasone/ formoterol)



Symbicort 80 or 160 (budesonide/ formoterol)



Accolate 10 or 20 (zafirlukast)



Zyflo 600 (zileuton)



Cromolyn solution



Serevent Diskus 50 (salmeterol)



Foradil DPI (formoterol)

#### **Oral Steroids**



Prelone syrup (prednisolone)



Orapred syrup (prednisolone)



Pediapred syrup (prednisolone)



Prednisone tablet



Methylprednisolone tablet

#### **Allergy Medicines**



Rhinocort Aqua (budesonide)



Nasonex (mometasone)



Flonase (fluticasone)



Nasacort (triamcinolone)



Singulair 4 or 5 or 10 (montelukast)



Zyrtec solution (cetirizine)



Zyrtec tablets (cetirizine)



Claritin syrup (loratadine)



Claritin tablets (loratadine)



Allegra syrup (fexofenadine)



Allegra tablets (fexofenadine)



Xyzal solution (levocetirizine)



Xyzal tablets (levocetirizine)

## **Using an Inhaler**

#### How do I use an inhaler?





#### Inhaler

Sprays a mist of medicine that you breathe in



#### **Spacer**

A tube that connects to your inhaler

Allows more medicine to go deep into your lungs



#### Mask

Covers mouth and nose to create a seal while breathing

Used with spacer and inhaler for young children

#### **INHALER**

- 1. Shake inhaler.
- 2. Connect it to the spacer or spacer with mask, if you have one.
- Put end of spacer in your mouth or mask over your nose and mouth.
- 4. Press down on inhaler.
- Breathe in deeply and hold it for 10 seconds. If you can't do this, use a spacer, and take 4 to 6 deep breaths.
- 6. Wait 1 minute and repeat steps 1 to 5 if taking a second dose.

#### **DRY POWDER INHALERS**

There are other kinds of inhalers that have powder inside, instead of mist. Ask your medical provider if you don't know what kind you have.

- 1. Do not shake.
- 2. Make sure you hold inhaler or disk right side up.
- 3. Twist or click dose counter.
- 4. Hold inhaler to mouth.
- 5. Breathe in hard, deep, and fast.
- 6. Hold breath for 10 seconds.
- 7. Be sure to breathe out from your nose. You don't want to lose any powder from your mouth.



Bring your inhaler with you when you see your medical provider. Ask them to watch you use it to make sure you are doing it right.

## Using a nebulizer

#### What is a nebulizer?

It is a machine that makes liquid medicine into a mist. You breathe the mist into your lungs.



#### How do I use a nebulizer?

- 1. Attach plastic tubing to the nebulizer machine.
- Connect the other end of the tube to the medicine cup.
- 3. Put your medicine in the cup.
- 4. Attach mask or mouthpiece to medicine cup.
- 5. Put mask over mouth and nose or use mouthpiece.
- 6. Be sure not to breathe through your nose if you use the mouthpiece.
- 7. Turn on the machine.
- 8. Take slow, deep breaths.
- Keep doing this, until all the medicine is gone from the cup and there is no more mist.
- 10. Clean the mask, mouthpiece, tubing, and medicine cup so that germs won't grow.







#### TIP:

A treatment usually takes 5-10 minutes
Sit with the medicine cup upright so it doesn't spill.

#### Parents' tip

Nebulizer treatments can be scary or boring. Try to distract your child by looking at a book or telling a story. If your child uses a nebulizer, ask your medical provider if an inhaler would work instead.

### **Peak Flow and Spirometry**



#### What is a peak flow meter?

It is a small tool that measures how well air gets out of your lungs. High numbers mean better airflow. Low numbers mean it's harder to breathe.

- Your medical provider can help you practice. Find out your best number when you feel well. This is your goal.
- At home, check your peak flow to see how you are doing.
   When you get sick, your numbers will get lower. This is a sign to act using your Asthma Action Plan.
- If you feel well, high peak flow numbers show that your medicines are working.

#### What is spirometry?



This is a breathing test to see how your lungs are working. It is also called a pulmonary function test. For this test, you breathe into a mouthpiece connected to a special computer, called a spirometer. Some medical providers may have this machine in their office. Others use a special clinic for this test.



## How do I use the peak flow meter?

- 1. Stand up straight.
- 2. Put the pointer at the very bottom next to the smallest number.
- 3. Take a deep breath.
- 4. Place the mouthpiece in your mouth and close your lips around it.
- Blow out as hard and as fast as you can, in one quick blow.

Repeat steps 1-5 two more times. Write down the numbers. The biggest is your peak flow.



Talk to your medical provider to see if you need a peak flow meter and when to use it.



# What is an Asthma Action Plan?

Your medical provider helps to make this plan with you.

- It tells you what to do when you have asthma symptoms.
- It reminds you to take your controller medicines every day, even when you are feeling well.
- It helps you decide when to use your reliever medicines.
- It helps you to know when you need to see your medical provider. It can help you decide when to go to the emergency room.

Your asthma action plan has all your asthma information. Carry it with you. Give a copy to your school and to people who take care of you.



Keep your asthma action plan up to date with all your medicines. Keep it where you can see it every day.

### **Asthma Action Plan**



#### Everyone should have an asthma action plan!

Your medical provider will help you fill out a form like this one.

Medical Provider Information
Name:
Date filled out:
Phone:
Take these medicines every day!  Medicine How Much How Often
Comments:
Take green and yellow zone medicines!  Medicine How Much How Often  Comments:
Take red zone medicines & call a doctor now!  Medicine How Much How Often  Comments:  Get HELP from a medical provider. Do NOT Wait!  If you cannot reach the medical office, call 911 or go to an EMERGENCY ROOM right away

Write down your asthma triggers:

### **Be Ready!**

Let your school, daycare, or babysitters know about your medicine plan and triggers.

Carry inhalers and spacer or leave them with the school nurse. You never know when you will need them!

School Medication Form – The form allows you to keep your asthma medicine in the nurse's office or carry it yourself, if you are old enough



#### Have an emergency plan

Share it with your family, school, daycare, and babysitters. These are things you may need if you must go to the emergency room:









Trust yourself. If you feel like your asthma is acting up, act! Talk to your medical provider if you think your medicine or plan isn't working.



## Phone Numbers & Appointments



	MY MEDICAL PROVIDER	
	<u>Name</u>	
M	Address	
	Phone number	
	Nama	
	Name Address	
	Phone number	
	THORE HUMBER	
	Name	_
	Address	
	Phone number	
	MY PHARMACY	
+	Name Address	
	Phone number	
_	THORE HUMBER	
	MY SCHOOL / SCHOOL HEALTH OFFI	CE
金の子	Name	
	Address	
	Phone number	_
		MY APPOINTMENTS:
LOCAL AS	STHMA RESOURCES	
_		
Kemem	<b>ber:</b> In an Emergency call 911	



#### **National Asthma Resources**

- National Heart, Lung, and Blood Institute (NHLBI)
  nhlbi.nih.gov
- American Academy of Allergy, Asthma, and Immunization (AAAAI)

  AAAAI.org
- American Lung Association (ALA) lungusa.org
- Consortium on Children's Asthma Camps asthmacamps.org
- Asthma & Allergy Foundation of America (AAFA) aafa.org
- The Allergy & Asthma Network/Mothers of Asthmatics Inc. (AAN/MA) aanma.org
- Centers for Disease Control and Prevention (CDC) cdc.gov/asthma
- American Academy of Pediatrics (AAP)
  aap.org



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