

# Living with Asthma

---

## What is asthma?

Asthma is a disease that affects breathing. There is no cure for asthma, but you will learn to control it.

The exact cause of asthma is not known. It appears to be more common in people who have allergies. It seems to run in families.

If you have asthma, you will always have some swelling in the lining of your airways. The muscles around the airways can tighten, making the airways smaller. The airways also produce more mucus, which makes them more likely to clog.



*Normal, open airway    Restricted airway*

Asthma may occur at any age. Most children with asthma have their first symptoms before age 5. About half appear to “outgrow” their asthma, having fewer symptoms in their teen years. For some of these children, their asthma will return later in life.

## What are the symptoms?

Symptoms of asthma include:

- Coughing, especially at night or for several weeks after a cold, flu or other infection
- Wheezing
- Breathing faster than normal when at rest
- Tightness or pain in the chest
- Trouble breathing
- Often feeling tired or out of breath
- Trouble sleeping.

In young children, it can be hard to tell if symptoms are from asthma or from another illness that causes coughing or wheezing.

## What are some things that might trigger an asthma attack?

Asthma triggers are the things that cause asthma symptoms or make them worse. Triggers are different for each person.

Put a check next to the triggers that make asthma worse for you or your child. Then, read about how to control these triggers.

- Smoking: Avoid second-hand smoke, incense and smoke from a fireplace or campfire. Use a HEPA air purifier in your bedroom. If anyone in your home smokes, now is the time to quit. For help quitting call 1-888-354-PLAN or go to [www.fvfiles.com/153155.pdf](http://www.fvfiles.com/153155.pdf).
- Cold air: Cover the nose and mouth with a scarf.
- Mold: Keep the humidity in your home between 30 and 50 percent. (You may need to buy a dehumidifier.) Fix leaky faucets, pipes and other water problems. Clean moldy surfaces with a cleaner that contains bleach.
- Pet hair or dander: Keep furred and feathered pets out of your home if you can. Be sure to keep them away from sleeping areas. Remove carpets and cloth-covered furniture. Use a HEPA air purifier in the bedroom.
- Colds and flu: Hand-washing is the best way to prevent colds and other illnesses. You might also use hand sanitizer. Be sure to get a yearly flu shot as well.
- Strong odors: Use only unscented products (shampoo, soap, lotion, toilet paper, cleaners, etc.). Avoid perfume, cologne, scented after-shave, hair spray and air fresheners.
- Dust and dust mites: Every week, wash bedding, blankets and stuffed animals in hot water. Remove carpets from the bedroom. Vacuum carpet, rugs and hardwood once or twice a week. (Be sure your vacuum cleaner has a HEPA filter. Ideally,

those with asthma should stay away for a while after rooms have been vacuumed.) Put pillows and mattresses inside a dust-proof cover. Keep the humidity in your home between 30 and 50 percent. (You may need to buy a dehumidifier.)

- Cockroaches: Always keep food and garbage in closed containers. Use poison baits, powders, gels or paste (for example, boric acid). You can also use traps. If you use roach spray, those with asthma should stay away until the odor is gone.
- Certain medicines: Tell your doctor about all the medicines you take. Include aspirin, cold medicines, vitamins and eye drops.
- Certain foods: Avoid beer, wine, dried fruit, processed potatoes, shrimp and any other foods that trigger asthma.
- Pollen: Keep windows closed when there's a lot of pollen in the air. An air conditioner will help, too. Try to stay indoors from late morning to afternoon, when pollen is at its worst. Ask your doctor if you need to take or increase medicine before allergy season starts.
- Exhaust from cars and buses: Try to stay indoors when air quality is poor. (For current quality levels, go to [www.airnow.gov](http://www.airnow.gov).) If you live near a street, keep windows closed.

*Adapted from "Asthma Action Plan,"*

*NIH Publication No. 07-5251.*

## What should I do during an asthma attack?

At the first sign of an attack, follow your asthma action plan. This is the plan you received from your care team. It will tell you exactly what to do. Your action plan may include:

- Medicine to improve breathing.
- Using a peak-flow meter (a device that shows how severe the attack is).
- Calling a doctor or 911.

Call 911 if:

- Breathing is very hard or fast.
- The person cannot talk or walk.
- You see “sucking in” between the ribs (called retractions).
- The lips are turning blue.

## How can I prevent an asthma attack?

As you learn to control asthma, life starts to feel normal again. You or your child can go back to regular activities, including sports. You have more energy for work, play, school and family. There will be fewer missed days at work or school. And, everyone in your home will sleep better at night.

But safety is the most important reason to control asthma. When asthma is well controlled, there is a much lower risk of dying from an asthma attack.

To control asthma:

- Take your medicine every day, even when you feel well. This helps keep the airways open. For more about medicines, see page 4.
- Avoid or control the things that cause an asthma attack.
- See the doctor regularly, not just after an asthma attack.
- Get to know the earliest signs of an asthma attack. If an attack occurs, follow your action plan right away.
- If your child has asthma, share his or her action plan with all caregivers. (This includes babysitters, daycare providers, teachers and school nurses). Everyone who cares for your child should know what to do during an asthma attack. By a certain age, your child should learn what to do as well.

Asthma is under control when you:

- Need an inhaler less than three times a week (except for exercise).
- Wake up at night with symptoms fewer than twice a month.

To bring asthma under control, you will need to work closely with your care team. It may take more than one try to find a plan that works for you.

## Is it safe to exercise?

Yes—as long as asthma is well controlled.

People with asthma can play any sport and get any amount of exercise. This is true even if exercise has caused an asthma attack in the past. In fact, athletes with asthma regularly compete at the highest levels.

We all need exercise to stay healthy and strong.

If asthma is well controlled, you or your child can exercise safely. Follow these safety tips.

- Ask your doctor if you need medicine before exercise. Take all medicines as directed.
- Warm up before exercise. Try 5 to 10 minutes of walking or light stretching.
- Don't exercise outdoors when asthma triggers are present (pollen, air pollution, cold air, etc.).
- If your child has asthma, talk to his or her teachers or coaches. Be sure they know the signs of an asthma attack and how to treat it.

# Asthma Medicines

---

## *Controllers and relievers*

### **Controller medicines**

Medicines that help control asthma and prevent symptoms are called **controllers**. They work over time—they will not relieve symptoms quickly. Some people take more than one controller.

Names of the controllers you take:

---

---

### ***How do they work?***

Controllers help prevent asthma attacks. They take down swelling, relax airway muscles and reduce mucus over time. This keeps your airways open. They also block your body's response to asthma triggers (things that cause asthma symptoms).

### ***How do I take them?***

Some controllers are taken by mouth. Others are breathed in through an inhaler.

Your doctor will tell you how to take your medicine. Be sure to take it every day, at the same times each day.

### **Reliever medicines**

Medicines that relieve an asthma flare-up quickly are called **relievers**. Some people take more than one reliever.

Names of the relievers you use:

---

---

### ***How do they work?***

Relievers relax the muscles around the airways to open them up and make breathing easier. They bring fast relief from asthma symptoms.

### ***How do I take them?***

Relievers are breathed in through an inhaler or a nebulizer. Take them at the first sign of an asthma flare-up.

## Is it safe to travel?

You can travel safely with asthma, but you need to plan ahead.

- Carry extra medicine with you. Never keep your medicine in a checked bag.
- Set aside a few days' worth of medicine in another place—in a handbag or with a travel partner—in case the items you carry are lost or stolen.
- Tell the people you will travel with that you have asthma. Be sure they know the signs of an asthma attack and what to do if you need help.
- Find out how and where to get medical care where you will be traveling.
- Pack wisely. You will want to bring:
  - Asthma medicine (both relievers and controllers)
  - Written prescriptions, in case you lose your medicine
  - A spacer or chamber
  - A peak flow meter, nebulizer or MDI
  - Copies of your asthma action plan
  - Your doctor's name, phone number and fax number
  - Your own address and phone number, as well as an emergency contact
  - Medical ID (bracelet, card or necklace) that states you have asthma
  - Your insurance card

## Asthma in children and teens

As soon as they're old enough, children should learn to manage their asthma and make healthy choices. Ask the doctor to help your child set specific goals for self-care. Then, follow up on these at each doctor's visit. Your child's goals will change as he or she grows.

Many children do a great job controlling their asthma. But when they enter their teen years, some children begin to have trouble. They don't like feeling "different" from their friends, so they may stop taking their medicines. They might worry about having an asthma attack in public. Some begin to smoke, or they spend time with friends who smoke.

When children and teens can't manage their care well, parents and other caregivers need to take charge. Check in each day to be sure they're taking their medicines. It also helps to use a peak flow meter to check for changes in the airways. The meter will pick up even small changes, so that you can treat any problems before they become serious.

### ***Asthma medicine***

Remember, never leave asthma medicine within the reach of young children. A responsible adult should help your child take his or her medicine until the child is able to do it alone. After that, your child should carry an inhaler at all times. Do not leave the inhaler with the school nurse.

Children as young as three can learn to use an inhaler with a spacer. Those who have trouble may find a nebulizer helpful. (A nebulizer is a small machine that converts asthma medicine into a mist. The child breathes the mist in through a mask.)

Sometimes, an inhaler won't help during an asthma attack—your child may not be able to breathe in enough air to get the medicine into the lungs. If you think this may be happening, call 911 right away.

## ***At school or daycare***

All of your child's teachers and coaches should know that your child has asthma.

At the start of each school year, try to meet with your child's teachers, coaches, principal and the school nurse. Be sure to give each person a copy of your child's asthma action plan. You should also:

- Explain what do to if your child has an asthma attack.
- Discuss your child's triggers and warning signs.
- Show them how to use your child's medicines.
- Leave important phone numbers (parents, doctor) in case your child has trouble breathing.

## ***A note to teens***

Asthma can be a special challenge in the teen years. Even if you've easily managed your asthma in the past, you may start to have more problems with symptoms. This could be due to hormonal changes, or it could result from changes in your lifestyle.

Follow these tips:

- Keep taking your medicines as directed. If you don't want to take controller medicine in front of your friends, take it in the morning or at night. You won't notice the effects of this medicine, but if you stop taking it, it could be harmful—even fatal.
- Use your peak flow meter. Even if you feel fine, your meter can detect changes in your airways, sometimes two or three days before you have an asthma attack. This gives you time to prevent an attack from occurring.
- Don't smoke, not even a little bit. Smoking and second-hand smoke can cause sudden, severe asthma attacks. If you smoke or spend time with smokers, it will be much harder to control your asthma. Smokers 14 to 19 years old can get help quitting from the American Lung Association's "Not On Tobacco" program. You can also get free phone counseling through the Lung Helpline (1-800-LUNG-USA).
- Stay active. You don't need to give up sports and other activities. Just be sure that your coaches each have a copy of your asthma action plan.
- If you have concerns, talk to your family or doctor. Maybe you're nervous about having an asthma attack in public. Or maybe there's an asthma trigger at a friend's house and you're not sure what do to. Remember, you're not in this alone. Your support network is ready to help brainstorm solutions, so keep the lines of communication open.

# Asthma Management Goals

---

## For patients

### To help control my asthma:

- I will work with my care team.
- I will follow my asthma action plan.
- I will take all of my medicines.
- I will use my peak flow meter.
- I will know about my asthma triggers and how to avoid them.
- I will know the early signs of an asthma attack.
- I will know how to tell when my asthma is getting worse.
- I will know when to call my doctor or 911.
- If I am a smoker, I will quit smoking.

### When my asthma is under control, I:

- Need an inhaler less than three times a week (except for exercise)
- Sleep through the night better
- Can run and exercise
- Miss fewer days of work
- Other: \_\_\_\_\_

## For parents

### To help control my child's asthma:

- I will work with my child's care team.
- I will help my child follow his or her asthma action plan.
- I will share the action plan with anyone who cares for my child.
- I will make sure my child takes all of his or her medicines.
- I will help my child use a peak flow meter.
- I will help my child avoid his or her asthma triggers.
- I will know the early signs of an asthma attack.
- I will know how to tell when my child's asthma is getting worse.
- I will know when to call the doctor or 911.
- If I am a smoker, I will quit smoking.

### When my child's asthma is under control, they:

- Needs an inhaler less than three times a week (except for exercise)
- Sleeps through the night better
- Can run and play
- Misses fewer days at school
- Other: \_\_\_\_\_

## Resources

Air Now (for current information about air quality)  
[www.airnow.gov](http://www.airnow.gov)

American Lung Association in Minnesota  
651-227-8014  
[www.lungusa.org/associations/states/minnesota](http://www.lungusa.org/associations/states/minnesota)

Centers for Disease Control and Prevention  
800-232-4636  
[www.cdc.gov/asthma](http://www.cdc.gov/asthma)

Arthur Family Health - Asthma  
[www.pbskids.org/arthur/health/asthma/](http://www.pbskids.org/arthur/health/asthma/)

Kids Health Asthma Center  
[kidshealth.org/parent/centers/asthma\\_center.html](http://kidshealth.org/parent/centers/asthma_center.html)

Minnesota Department of Health  
888-345-0823  
[www.health.state.mn.us/asthma](http://www.health.state.mn.us/asthma)

Preventing Asthma Attacks in Children  
1-866-NO-ATTACKS  
[www.noattacks.org](http://www.noattacks.org)

United States Environmental Protection Agency  
[www.epa.gov/asthma](http://www.epa.gov/asthma)