



Asthma: take control; great tips for teenagers

Strategies for healthy management of asthma in teenagers

**ASTHMA
FOUNDATIONS**
AUSTRALIA

Disclaimer: Information in this brochure is not intended to replace professional medical advice. Any questions regarding a medical diagnosis or treatment should be directed to a medical practitioner.

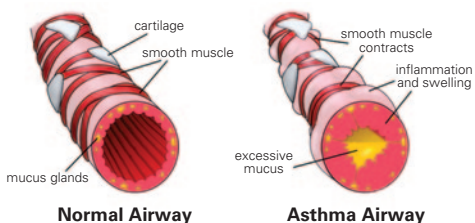
Asthma: take control; great tips for teenagers

So you've got asthma. What else do you need to know?

- You can do what anyone else can – as long as you look after your asthma
- Lots of people have asthma
- If you tell your friends you have asthma, they could help you if you have an attack
- Know all about your medications and when to take them
- Learn how to use your puffer properly
- Find out what triggers your asthma
- Keep your reliever puffer with you all the time
- Learn how to tell when an asthma attack is coming on
- It's a good idea to see your doctor regularly to check your asthma
- Know how to treat an asthma attack – learn Asthma First Aid

What is asthma?

Inside your lungs are thousands of tiny tubes called airways, which carry air in and out of your body. If you have asthma, your airways are extra sensitive. Certain triggers cause your airways to narrow, making it hard to breathe.



Three main factors cause the airways to become narrow:

- The inside lining of the airways becomes red and swollen (inflammation)
- Extra mucus (sticky fluid) may be produced
- The muscle around the airways tightens (bronchoconstriction)

Why do people get asthma?

Some people are born with a tendency to develop asthma. There's often a family history of asthma, hay fever or a skin condition called eczema. We are not sure why asthma develops in some people, but it can happen at any age.

How do you recognise asthma?

- Shortness of breath
- Wheeze
- Chest tightness
- A dry, irritating, persistent cough, particularly at night/early morning, with exercise or activity

Asthma triggers

All kinds of things can trigger an asthma attack but they can be different for everybody. The main ones are:

- Colds and flu
- Cigarette smoking
- Exposure to cigarette smoke (passive smoking)
- Exercise/activity
- Inhaled allergens (e.g. pollens, moulds, animal dander and dust mites)
- Environmental factors (e.g. dust, pollution, wood smoke and bush fires)

- Changes in temperature and weather
- Certain medications (e.g. aspirin)
- Chemicals and strong smells (e.g. perfumes, deodorants and cleaners)
- Emotional factors (e.g. laughter, stress)
- Some foods and food preservatives, flavourings and colourings

You may not always know what triggers your asthma. It is helpful to identify triggers in order to avoid them however this is not always possible (e.g. colds and flu). Exercise is the only trigger that should not be avoided.

Did you know that anything you smoke is likely to damage your lungs and make your asthma worse?

Asthma Medications

There are three main groups of asthma medications:

1. Relievers
2. Preventers
3. Symptom controllers

1. Relievers

Inhaled medications - Airomir, Asmol, Bricanyl, Ventolin (blue)

Relievers provide relief from asthma symptoms within minutes by relaxing the muscles around the airways for up to four hours.



Important points

- Always carry your blue reliever medication in case you need to use it, particularly for an asthma emergency
- If you are using your reliever medication more than three times per week to ease asthma symptoms it may be a sign that your asthma is not well controlled. Check with your doctor

2. Preventers

Inhaled medications – Alvesco (rust), Flixotide (orange), Intal Forte (white), Pulmicort, Qvar (brown), Tilade (yellow)

Oral medications – Singulair

Preventers make the airways less sensitive, reduce the redness and swelling inside the airways and dry up the mucus. It may take a few weeks for preventers to reach their full effect.

Preventers must be taken daily to keep you well, reduce the risk of asthma attacks and to prevent lung damage. A number of these medications are corticosteroids (sometimes referred to as 'steroids'). They are similar to the steroids that we produce naturally in our bodies. They are not the same as anabolic steroids misused by some athletes.

Treatment of Acute Asthma

When there is little response to relievers, the doctor may prescribe a short course of oral corticosteroid tablets (Prednisolone/Prednisone). This is used to reduce the inflammation in the airways and quickly regain control of asthma in an acute attack or when symptoms persist.

Atrovent (green) is a different type of medication that may be prescribed. Ask your doctor for further information.

This medication takes up to 30 minutes to work, can keep the airways open for up to six to eight hours and is more commonly used for other lung conditions.

Important points

- Some people may only need preventers for a set period (eg. seasonal) while other people need to take preventers all year round
- Preventers need to be taken at the same time each day at the dosage prescribed by your doctor
- Preventers take time to work, so an improvement in your symptoms may not be noticed for a couple of weeks. Do not stop taking your preventer medication after only a few days
- Preventers are safe to use every day and they can reduce the risk of life threatening asthma attacks

3. Symptom Controllers

Foradile (pale blue), Oxis, Serevent (green)

Symptom controllers (also called long acting relievers) help to relax the muscles around the airways for up to 12 hours. They are taken daily, usually at morning and night, and can only be prescribed for people who are taking regular inhaled corticosteroid preventers and are still experiencing asthma symptoms.

Singulair is a non-corticosteroid medication that may be prescribed by your doctor. It is a tablet that is taken daily and may be used on its own or in addition to corticosteroid medication. Ask your doctor for further information.

Combination Medications

Seretide (Flixotide and Serevent - purple), Symbicort (Pulmicort and Oxis - red)

Combination medications combine a preventer with a symptom controller in the same delivery device.

Combination medications need to be taken at the same time each day at the dosage prescribed by your doctor.

The SMART (Symbicort Maintenance And Reliever Therapy) Protocol

- Some people over the age of 12 may have Symbicort prescribed as both their reliever and preventer, under strict guidelines. This is known as the SMART protocol

NOTE

- Seretide cannot be used as reliever medication or for asthma emergencies

Getting the most out of your asthma medications

Puffers need to be used correctly to ensure maximum benefits are achieved with minimum side effects. It is important to:

- Have your technique regularly checked by your doctor, pharmacist or asthma educator
- Use a spacer with a puffer to minimise side effects and deliver more medication to your lungs (a spacer is a device into which you fire medication from a puffer and inhale)
- Check that there is medication left in your inhaler (some puffers have a counter)
- Check that your medication has not expired



- Know how to care for and clean your medication devices
- When you are well (no asthma symptoms and rarely using your blue reliever), talk to your doctor about a review of your medications
- Make sure you ask your doctor, pharmacist or asthma educator if you have any questions or concerns about your asthma medication and/or asthma delivery devices

Can I exercise?

Exercise can sometimes trigger asthma but we also know that keeping fit is a great way of keeping on top of your asthma, so exercise is important!

People with asthma can play almost any sport (except SCUBA diving) - you'd be surprised how many world-class athletes have asthma.

Just remember these tips...

- Always warm up before playing sport
- Check with your parents or your doctor about which puffer to use before sport and when you should use it
- Remember to carry your reliever puffer at all times

If you have an asthma attack during sport, follow the Asthma First Aid Plan. If you feel better after a short while, you can return to your game. If your asthma returns, follow the Asthma First Aid Plan again and don't return to your game. It would be a good idea to see your doctor and get your asthma checked.



Tips to take control of your asthma

Keeping your asthma in control can be easy if you follow these tips:

- Always carry your blue reliever puffer with you – you use this when you have asthma symptoms
- Talk with your parents, school nurse and doctor about a written Asthma Action Plan
- Visit your doctor at least every six months to check your asthma and discuss your written Asthma Action Plan
- Remember to take your asthma medications - they are your key to freedom from asthma
- Know and avoid your asthma triggers
- Exercise to stay healthy
- Know your asthma symptoms and how to treat them
- Recognise signs of worsening asthma and follow your written Asthma Action Plan
- Know your Asthma First Aid Plan and how to use it
- Tell your family and friends about your asthma and how they can provide Asthma First Aid

What is an Asthma Action Plan?

An Asthma Action Plan is a written set of instructions prepared in partnership with your doctor that helps you to manage your asthma at different times. Your plan should help you to:

- Recognise worsening asthma symptoms
- Start treatment quickly
- Seek the right medical assistance

Early attention to worsening asthma may prevent you from having a serious attack. Ask your doctor for a Written Asthma Action Plan.

What to do in an asthma emergency

If the person's condition suddenly deteriorates or you are concerned at any time call an ambulance immediately (Dial 000) and state that the person is having an asthma attack.

In an asthma emergency follow the Asthma First Aid Plan located opposite.

If a person has difficulty breathing and is not known to have asthma, call an ambulance immediately and follow the Asthma First Aid Plan. No harm is likely to result from giving a blue reliever puffer.

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Asthma First Aid

1

Sit the person upright, be calm and reassuring.

Do not leave them alone.



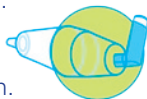
2

Give 4 separate puffs of a blue reliever*

The medication is best given one puff at a time via a spacer device.

Ask the person to take 4 breaths from the spacer after each puff of medication.

If a spacer is not available, use the blue reliever puffer on its own.



3

Wait 4 minutes.



4

If there is little or no improvement repeat steps 2 and 3.

If there is still no improvement call an ambulance immediately (DIAL 000).

Continue to repeat steps 2 and 3 while waiting for the ambulance.



If the person's condition suddenly deteriorates or you are concerned at any time call an ambulance immediately (DIAL 000).

For further information:

1800 645 130

(office hours)

www.asthmaaustralia.org.au

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*A Bricanyl Turbuhaler may be used in first aid treatment if a puffer and spacer is unavailable.

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for professional, confidential and
independent information about asthma

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