

## **Jenny Lind Children and Young People's Department**

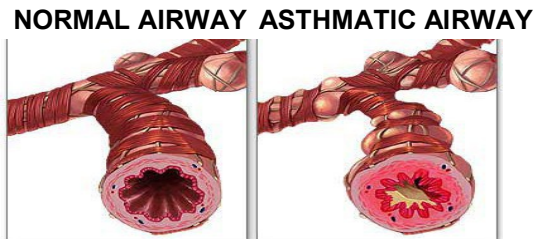
# **Taking Control of Your ASTHMA**

## **A Booklet for Teenagers**



## **What is Asthma?**

Asthma is a condition that affects the small tubes that carry air in and out of your lungs. In asthma the linings of these tubes are swollen, sticky mucus is produced and the muscles around them tighten, the space in the breathing tubes is reduced making it more difficult to breathe.



Symptoms of asthma can include coughing, wheezing, shortness of breath and tight feelings in the chest.

We don't know what causes asthma, but we do know that certain things can trigger attacks by irritating the lining of the airway. You may know what triggers your asthma, examples include viral infections ('colds'), some types of exercise, smoky atmospheres, house dust mites, pets, pollen, mould, air pollutants, stress (such as exams) , emotions, changes in the weather or temperature and hormones.

This booklet offers some suggestions which may help you to have better control of your asthma, so you are able to take part in all the activities you enjoy.

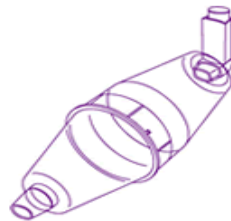
## **Your Asthma Medication**

Medicine for the treatment of asthma may come in the form of inhalers and/or tablets. You may need to take a combination of these to maintain good control of your asthma.

**Always take your asthma medication as you have been advised to by your doctor or nurse.**

## **Preventer Medication**

Preventer inhalers need to be taken regularly. For most types this is twice daily, every day, even if you feel well. Preventer medication helps to reduce the swelling in the tubes. If you stop taking it, the swelling may come back, make your symptoms worse, making you more likely to have an asthma attack.



Taking the few minutes to have your preventer regularly can save you missing time from school or other activities or having an unsettled night because of worsening symptoms. Preventer inhalers usually contain a steroid which mimics the steroid your body produces naturally. Because you breathe the medicine straight into your lungs, very little goes into the rest of your body, so you are very unlikely to have side effects such as gaining weight or limiting your height.

Having uncontrolled asthma can also lead to these things because you are less able to exercise and your body uses energy to help you breathe rather than grow. We know that it may be difficult to remember to take your inhalers sometimes, especially if you are very busy or if you have not had any asthma symptoms for a while.

**Here are some ideas that may help:**

- Try  
leaving your preventer inhaler and spacer by your bed so you can take it when you wake up and when you get into bed or
- Try  
leaving it by your tooth brush so that you can have it twice daily before brushing your teeth

**Reliever medication**

Reliever inhalers are used when you are having an asthma attack (such as cough, wheeze or shortness of breath) or prior to exercise. If you have asthma, it is important to have your reliever with you or near at hand at all times. Although inhalers with spacers are the best way of getting the medicine into your lungs, we know that it may not be easy to carry your spacer around as well as your reliever inhaler. However there are varieties of other inhalers which you may like to try which do not need spacers just ask when you come to clinic and we can show you these.

These inhalers work well for mild asthma attacks

**What about severe attacks?**

We usually suggest that you have an ordinary reliever inhaler which fits into a spacer in case you have a severe attack. You can keep this in your bag or in the school office. Discuss how to multi-dose for severe attacks with your doctor or nurse.

Steroid tablets are used in severe asthma attacks. They are usually given in short courses so that your body remembers to continue to produce some of its own.

### **How quickly will my reliever inhaler work?**

Did you know that you should feel the benefit from your reliever inhaler within five to ten minutes? The benefits should last for four to six hours but you can repeat it before then if necessary. However, if you need it again within 2 hours it is likely to indicate that your asthma is less well controlled and you should see your GP.

If you need to take your inhalers again within 30 minutes or feel as if you don't get any relief at all from your inhaler you must ask someone to call an ambulance for you to get to hospital. Continue to take your inhaler (preferably via a spacer) until you receive medical help. Your reliever inhaler may make you feel a bit shaky and you may notice your heart beating a bit faster; don't worry these symptoms will soon disappear and are not harmful.

### **Other medicines**

Sometimes we recommend a combined inhaler which contains both long acting reliever and steroid.

Tablets may also be used for treating asthma. Some need to be taken every evening to reduce the swelling in the airways.

If you are unsure what your treatment does please ask.

It may take up to three weeks before you feel any better if your preventer inhalers are changed, as they can take a while to reduce the swelling initially. However if you are worried about your asthma, speak to your parents, your nurse or doctor as soon as you can.

### **Outpatient Appointments**

It is important that you attend your outpatient appointments here at the hospital and with your local asthma nurse. This will give you the chance to ask any questions you have and for your health and medicines to be reviewed.

Some appointments are now being held by telephone or video link as well.

Please can you bring all of your inhalers, spacers and tablets with you, along with your peak flow diary and your action plan to your appointments, this can be checked and updated if necessary.

If you are unable to attend for an appointment, please ask your parent or carer to call to rearrange this for you. We can then make use of your slot for someone else.

### **Exercise and Social Activities**

Exercise and keeping active is very important for all of us, especially if you have a

respiratory condition like asthma. There may be days, though, when you may feel you are unable to take part because you are feeling 'tight' chested or 'wheezy'. You may need to ask your parent or carer to write a letter to school to explain this. There might be an alternative activity you can do instead. You should try to return to regular exercise as soon as you are able. We recommend that if exercise normally makes you cough, wheeze or short of breath, that you take your reliever just prior to exercise and have it available for use during and after the session.

**Remember to do some warm up exercises and cool down exercises before and after. Please let us know if asthma is stopping you doing things which you enjoy.**

### **School Care Plan**

If you feel you need more support with your asthma from the teachers and staff at school, they can arrange for the school nurse to produce a care plan.

The care plan is written in agreement with yourself, your parents, the school nurse and school staff, it says when you should take your inhalers, any activities you should avoid, and the emergency treatment of your asthma. The care plan is then available to help your teachers understand your asthma.



### **Peak Flows**

Your Doctor or nurse may have asked you to record peak flows in a diary. This involves three separate blows (resetting the meter after each blow) into your peak

flow meter, and writing down the best score. You may be asked to do this in the morning and evening so the results can be used to see how well your asthma is being controlled and whether any changes in your treatment are needed. The amount you are expected to blow is calculated according to your height.

### **Action Plan**

Peak Flow readings along with an Action Plan can be useful for you when managing your asthma. If your peak flow deteriorates or you develop worsening symptoms the Action Plan will help you know what treatment to take and when to seek medical help. Remember as you grow, your asthma Action Plan will need updating. Ask your doctor or nurse to do this for you when you come to clinic.

### **Repeat Prescriptions**

Check on the label of your inhalers how many puffs/doses they contain. It is sometimes difficult to tell when spray inhalers are getting empty, although some now include a counter. If they don't, you may be able to feel the difference between a full one and an almost empty inhaler canister. You should always have a spare reliever and preventer inhaler, you may be able to work out and write on your calendar when you need to get a new preventer inhaler. You can get repeat prescriptions from your GP.

Remember to ask for a new spacer every 6 to 12 months (depending on the type you use) and a new peak flow meter every three years.

### **Transfer to the adult clinic**

When you are sixteen you will be too old to come to the Jenny Lind Department so we will either transfer your care back to your GP or to one of the adult respiratory consultants. The adult team will try to attend your last appointment in the Jenny Lind Department so you can ask them any questions you may have.

## USEFUL TELEPHONE NUMBERS

### TO CHANGE AN APPOINTMENT:

1. Jenny Lind Outpatient Department: Telephone: 01603 287055

### TO HELP SOMEONE STOP SMOKING:

1. Suggest they speak to their GP

2. Telephone: Smoke Free Norfolk 0800 0854 113

- Visit their website: [www.smokefreenorfolk.nhs.uk](http://www.smokefreenorfolk.nhs.uk)

3. Contact: <https://www.smokefreenorfolk.nhs.uk/contact-us/>

### IF YOU HAVE ANY WORRIES ABOUT YOUR ASTHMA YOU COULD:

1. Speak to your parents

2. Contact your GP

3. Phone Martin, Karen or Cath

Children's Respiratory Specialist Nurses: 01603 287851

4. Phone Asthma UK Advice line: 0300 222 5800

(This is answered by nurse specialists who may be able to give you further help and advice)

- Visit their website [www.asthma.org.uk](http://www.asthma.org.uk)
- Email [info@asthma.org.uk](mailto:info@asthma.org.uk)

