

Peak flow

If your child is over six years old and has been asked to use a peak flow meter and record the readings, please encourage your child to do this.

What to do if your child's asthma symptoms are getting worse

Most people find that asthma attacks are the result of gradual worsening of symptoms over a few days.

- 1 Give your child their advised dose of reliever (blue) inhaler.
- 2 If there is no relief after 5–10 minutes give a second dose of relief medication and seek medical advice.
- 3 Let your child choose the easiest position for breathing (usually sitting up) and loosen any tight clothing.
- 4 If your child is showing signs again after two hours, seek medical advice, or call an ambulance if you are worried and cannot contact your GP.
- 5 If your child has severe symptoms of asthma, a 'rescue dose' of 10 puffs of reliever should be given, preferably through a spacer device over 3–4 minutes, giving each puff separately. Medical advice should then be sought.

Useful contacts

GP tel:

Asthma UK Adviceline

Telephone: 0800 121 62 44, 9 am–5 pm,
Monday–Friday

Web address: www.asthma.org.uk

Ipswich Hospital

Switchboard: 01473 712233

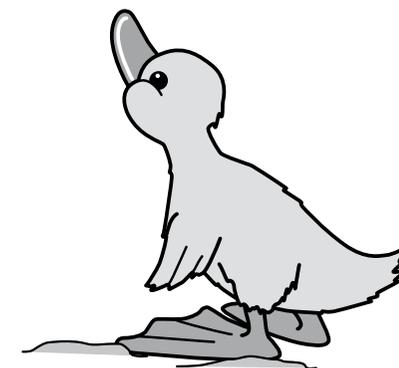
Paediatric Assessment Unit: 01473 702198

Bergholt Ward: 01473 702194

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What is Asthma?



Paediatric Respiratory Nurses
Tel: 01473 702196

Paediatric Assessment Unit
Tel: 01473 702198

Bergholt Ward
Tel: 01473 702194 or 702195

What is asthma?

Asthma is a condition which affects the airways – the small tubes that carry air in and out of the lungs. These airways are extra sensitive to substances (or triggers) which irritate them. Common triggers include colds, house-dust mite, pollen, smoke, furry animals and some others.

When the airways come into contact with a trigger, the muscles around the walls of the airways contract and become tighter. The lining of the airways swell and produce a sticky mucus. When the airways narrow it becomes difficult for air to move in and out.

Your child may show symptoms of coughing, particularly at night and after exercise, experience wheezing or a whistling noise in the chest, or may become short of breath.

When your child's asthma is treated and well controlled, your child should be able to remain free from symptoms and lead a normal life.

Asthma medications

Make sure your child uses their medication as directed. There are two main types of asthma inhalers. They are called **relievers** and **preventers** and they work in different ways.

Reliever (blue inhalers)
for example:

- Salbutamol (Ventolin)
- Terbutaline (Bricanyl)

Relievers are taken immediately when asthma symptoms appear. They quickly relax the muscles surrounding the narrowed airways. This allows the airways to open wider, making it easier to breathe again. A reliever should provide relief of symptoms for 3–5 hours, if not, medical attention should be sought.

Preventer (brown, orange inhalers)
for example:

- Beclometasone (Clenil Modulite)
- Fluticasone (Flixotide)
- Budesonide (Pulmicort)

Preventers protect the linings of airways. They help to calm down the swelling in the airways and stop them being so sensitive. Preventers reduce the risk of severe attacks. The effect builds up over a period of time; it can take up to 14 days to see an improvement when your child starts to use a preventer inhaler, so it needs to be taken every day, usually in the morning and evening, even when your child is feeling well.

Prednisolone (steroid tablets)

A short course of steroid tablets (3–5 days) is sometimes needed to treat an asthma attack. The tablets bring severe asthma symptoms under control quickly. **These are best taken after breakfast in the morning to reduce the risk of stomach irritation.**

Other medications

There are other forms of inhalers and medication which may be prescribed for your child, in addition to a reliever and preventer.

Inhaler devices

There are many different types of inhaler devices. It is important that you and your child know how to use the device that he or she has been given. A **spacer** with an inhaler is often the preferred device for most age groups. Your child's inhaler technique should always be checked in the asthma clinic or before going home from hospital.

How you can help your child with asthma

Encourage your child to do a full range of activities. There is no need to protect your child from activity or exercise, but they may need to use an inhaler beforehand in some cases.

Inform your child's school about his or her asthma. Each school has an asthma policy. →