

YOU HAVE JUST BEEN TOLD THAT YOU OR YOUR CHILD HAS ASTHMA, NOW WHAT?

WHAT IS ASTHMA?

Asthma is an inflammatory disease of the small airways in the lungs that results in recurring episodes of difficult breathing due to the airways becoming more narrow (smaller) than normal. These episodes may occur quite often or may come and go intermittently. Asthma ranges from very mild to severe.

WHAT ARE THE SYMPTOMS OF ASTHMA?

When the small airways in lungs begin to narrow, people with asthma usually notice some or all of the following problems:

- Coughing
- Wheezing
- Chest tightness
- Shortness of breath
- Reduced ability to exercise

WHAT CAUSES AN ASTHMA EPISODE?

(See diagram on back of this page)

- First, a “trigger” is inhaled into the lungs and irritates the small airways in the lungs.
- Once the small airways are irritated, the insides of the airways become red, swollen and narrower than normal. If nothing is done about the swelling it can get worse and people tend to develop more asthma symptoms.
- Due to the swelling, the small airways in the lungs become quite “twitchy”. This causes the muscles on the outside of the airway to tighten and narrow the airways even more. Breathing becomes much harder than normal at this point and could lead to a serious asthma episode.
- Asthma episodes, like asthma itself, can range from mild to severe. Severe asthma episodes can be life threatening and can result in a hospital stay or even death. Therefore, prevention of episodes is very important.
- Common asthma triggers are smoke, colds, animal dander, dust, pollen, cold air and exercise. Please note that exercise should not be avoided. If you or your child develops asthma symptoms with exercise, it may be a sign that your or your child’s asthma is poorly controlled. Contact a healthcare professional to learn how to improve asthma control. Triggers vary from person to person. Each person should learn about their own triggers and try to prepare for them and avoid them when possible.

IS ASTHMA A LIFELONG CONDITION?

As a general rule, asthma diagnosed in childhood is a lifelong condition. Asthma symptoms may diminish in adolescence, but can often return in adulthood. People with the following factors are most likely to have asthma that persists into adulthood:

- A parent with asthma
- A history of eczema (scaly red rashes on the skin)
- Allergies or hay fever; allergic rhinitis (inflammation of the lining in the nose)

THE GOOD NEWS FOR PEOPLE WITH ASTHMA:

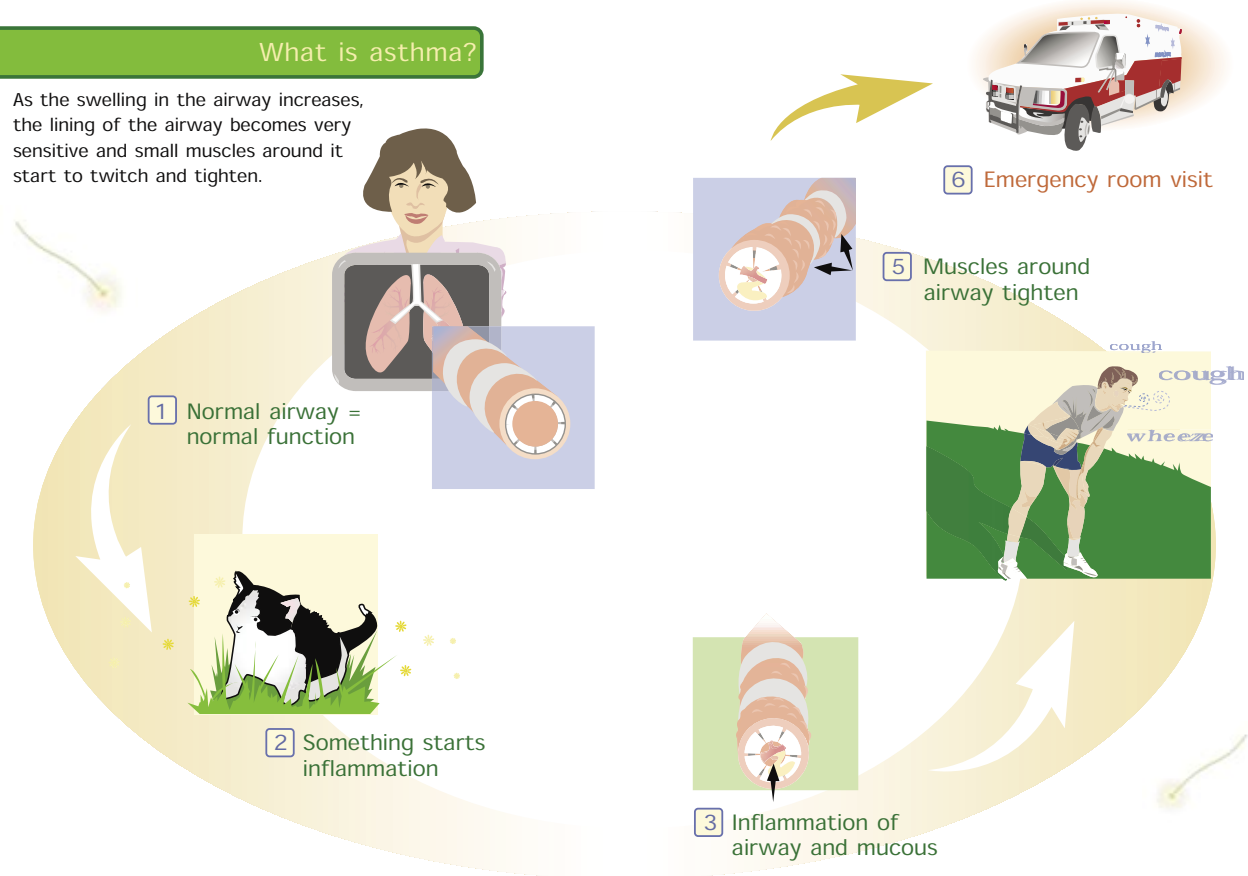
- Researchers are constantly seeking a cure. In the meantime, asthma can be controlled. If asthma is well controlled, there is a low risk for a serious asthma episode and a person can be as active as they like.
- To control asthma you need to avoid contact with things that trigger your asthma and use your asthma medications regularly as directed by your doctor.
- There are people with well-controlled asthma who are OLYMPIC ATHLETES!

WHO WILL HELP YOU TO MANAGE YOUR ASTHMA?

- Your family doctor will diagnose and help manage your or your child’s asthma and should provide you with a written asthma action plan.
- Your pharmacist can also provide helpful information about asthma and asthma medications.
- *The Chinook Asthma Program* is where you will meet with asthma educators who can perform breathing tests to make sure your lungs are working at their best as well as provide you with information about asthma and asthma medications. The asthma educators will work with your doctor to develop a written asthma plan and ensure you have the tools and confidence to feel at ease managing your or your child’s asthma.
- To contact an asthma educator in your community, contact the Building Healthy Lifestyles toll-free number at 1-866-506-6654 or 388-6654.

What is asthma?

As the swelling in the airway increases, the lining of the airway becomes very sensitive and small muscles around it start to twitch and tighten.



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Client Checklist for Asthma



What to expect at each office visit with your family physician:

	Assess asthma control:
	Discuss frequency of asthma symptoms
	Amount of rescue medication required (blue inhaler usage)
	Review triggers and trigger avoidance strategies
	Demonstrate use of inhaler device
	Make or review a written asthma action plan
	Discuss roles and use of asthma medications
	Aim to reduce asthma medication dosage while maintaining proper control of asthma
	Discuss any other concerns about asthma with your doctor



Tests & Measurements that should be done or discussed on a yearly basis, or as recommended by your family physician:

	Lung function testing (spirometry)
	Height and weight measurements
	<p>Screening for osteoporosis if on inhaled corticosteroids for asthma and you have the following risk factors:</p> <ul style="list-style-type: none"> • Age > 60 years • Postmenopausal state without hormone replacement therapy • Male impotence or infertility • Previous fractures with minor trauma • Family history of fractures (parental) • Past or current chronic glucocorticoid therapy • Smoking or alcoholism • Physical inactivity
	Referral to an Asthma educator for education & evaluation
	Vaccinations
	Annual influenza vaccine
	Ensure immunizations are up to date