

How to Treat your Wheeze/Asthma

Advice for children and young people with asthma and their parents and carers

Useful websites:

Asthma UK: www.asthma.org.uk

Teenage Health Freak:
www.teenagehealthfreak.org.uk

NHS Choices:
www.nhs.uk/conditions/asthma



Name:

Date:



Smoking even outdoors will make asthma worse

National Smoking Helpline: 0800 022 4332

Website: www.nhs.uk/smokefree

Treatment Plan once you are home

Salbutamol – (blue reliever inhaler)

Dose Start date

This should be reduced using the Six Steps to reducing your inhaler usage guide below

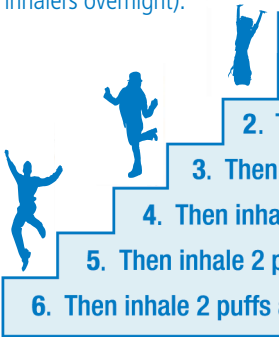
Prednisolone – (oral soluble)

Dose Length of treatment (in days)

Start date End date

Six Steps to reducing your salbutamol (blue reliever inhaler) usage

(If your child is sleeping and breathing comfortably you do not need to wake them to give them their inhalers overnight).



One puff every five breaths using the spacer (Tidal Breathing)

1. Inhale 10 puffs every 4 hours for 24 hours
2. Then inhale 8 puffs every 4 hours for 24 hours
3. Then inhale 6 puffs every 6 hours for 24 hours
4. Then inhale 4 puffs every 6 hours for 24 hours
5. Then inhale 2 puffs every 6-8 hours for 24 hours
6. Then inhale 2 puffs as and when required

If your child gets more wheezy or breathless, go back up a step and contact your GP as soon as possible

Steroids (preventer inhaler)

Dose Start date

Other medication

A follow up review should be undertaken by your GP/nurse within the next Days.

Spacers

Always take your inhalers via a spacer as this is a much more effective way of getting medicines into the lungs

- Smaller children (generally under 3 years) to use spacer with face mask
- Older children (generally over 3 years) to use spacer with mouthpiece



When my asthma is back under control this is what I should do

reliever (blue inhaler)



This is my blue reliever inhaler.

This is used to relieve the wheeze/cough and can be used before exercise if necessary - it is best used with a spacer.

This helps me when I am coughing or wheezing by opening up and relaxing my lungs.

If I am using this more frequently than normal, I should see my doctor or nurse to have my asthma checked.

When my asthma is well controlled I should not need to use my blue inhaler regularly.

preventer inhalers (brown, orange, purple, green or white)

My preventer inhaler is (colour)



This inhaler prevents my lungs becoming irritated and inflamed.

I must use this every day even when I am well to keep my asthma under control.

Spacer prescribed? Yes No

Health Care Professional has checked technique? Yes No

Top Tips

- Organise a review with your GP or Asthma Nurse
- Keep your blue inhaler with you at all times
- Get a new inhaler when you start your last one
- Ask your health care professional how to use your inhaler and spacer properly and check your technique at every appointment
- If you run out, in an emergency a pharmacist may be able to supply salbutamol (there may be a charge for this)
- Avoid trigger factors for your asthma/wheeze e.g. pollen/dust
- Remember to rinse your mouth out after using your preventer
- Wash your spacer monthly with warm soapy water, leaving it to drip dry
- **Smoking, even outdoors will make asthma worse**

What do I do if my child is wheezy / has asthma? (traffic light advice)



**LIFE
THREAT**

If your child:

- becomes unresponsive
- becomes blue
- is having severe difficulty breathing
 - using tummy muscles
 - ribs are sinking in
- is unable to complete sentences
- is unable to take fluids and is getting tired
- is pale, drowsy, weak or quiet

You need **EMERGENCY** help

Ring **999** - you need help immediately

If you have a blue inhaler use it now -
1 puff per minute via Spacer

UNTIL AMBULANCE ARRIVES

Nearest Hospitals (open 24 hours 7 days a week):

Frimley Park, Surrey	Royal Berkshire, Reading
Hillingdon Hospital	Stoke Mandeville Hospital, Aylesbury
John Radcliffe, Oxford	Wexham Park Hospital, Slough
Milton Keynes Hospital	



MODERATE

If your child is:

- having some difficulty in breathing / breathing noisily
- mild wheeze and has breathlessness that is not responding to the usual reliever (blue inhaler) treatment
- using their blue reliever inhaler – more than 2 puffs every 4 hours
- breathing more quickly than normal

You need to contact a nurse or doctor today

Increase blue inhaler 10 puffs over 20 minutes and repeat every 4 hours via spacer please ring your GP surgery during the day or when your GP surgery is closed, please call **NHS 111** by dialling **111**.



MILD

If your child is:

Using their reliever more than usual but is not breathing quickly and is able to continue doing day to day activities and is able to talk in full sentences

Needs doctor / nurse **review over the next few days, unless deteriorating**. Continue to use blue inhaler as required. Read this leaflet about how to help with your wheeze / asthma symptom control.

Warning signs that your asthma is not well controlled include:

- waking up regularly to cough, feeling tight / wheezy during the night
- early morning tightness wheeze or cough
- frequently needing your blue inhaler
- frequent exercise induced cough or wheeze

Reassess and monitor your child regularly (symptoms may start or get worse in the evening)
- please follow traffic light advice above.

REMEMBER ALWAYS HAVE YOUR BLUE INHALER AND SPACER WITH YOU
IMPORTANT: ASTHMA/WHEEZE CAN BE LIFE THREATENING

The Children and Young People Urgent Care Advisory Group is made up of child health specialists from across the NHS and partner agencies such as the Local Authority and is led by NHS Buckinghamshire Clinical Commissioning Group. We are a cross-organisational and multi-specialist group working to improve child health.

This leaflet has been produced after careful consideration of the evidence available including but not exclusively from NICE, SIGN, EBM data and the NHS.