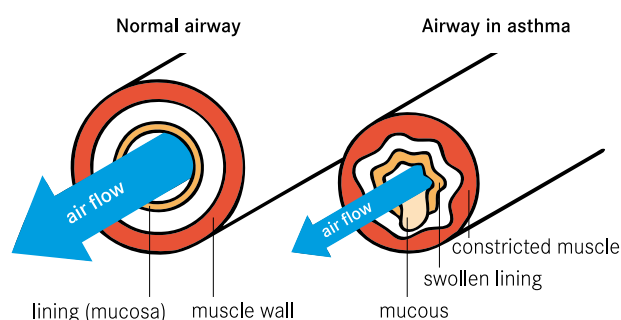


# Asthma

## What is asthma?

Asthma is a common medical condition that affects the small airways of the lungs. During an asthma attack, the lining of the airways swell, there is a build up of mucous (*phlegm*) and the muscles around the airways tighten. This causes a narrowing of the airways (*bronchoconstriction*) and makes it difficult to breathe.



## What causes asthma?

People with asthma have sensitive airways. The exact cause of asthma is still unknown. Factors that may 'trigger' an attack include cigarette smoke, viral infections (colds and flu), allergies and exercise.

## Who gets asthma?

More than 600,000 Victorians have asthma including one in four children, one in seven teenagers and one in ten adults. There is often a family history of asthma. About 600 Australians die of asthma each year.

## What are the symptoms of asthma?

An asthma attack can develop suddenly over minutes or slowly over days. Typical symptoms include:

- coughing
- wheezing (a whistle in the chest when breathing)
- difficulty breathing
- tightness in the chest.

## Treatment

With the right medication and regular check-ups, asthma can be managed so that you lead a normal, active life. Medications are mostly taken through a *metered dose inhaler* (MDI) or a 'puffer'. *Spacers* or *space chambers* are used to give puffer medication to children. They come in different shapes and sizes, depending on a person's age, size and needs.

There are different medications to treat asthma.

- **Relievers** – rapidly open the narrowed airways. These include *Ventolin*, *Bricanyl* and *Atrovent*. These are only used when needed, such as before or during sport or during an attack.
- **Preventers** – prevent attacks by treating inflamed airways. These need to be taken every day. They include *Pulmicort*, *Flixotide*, *Tilade* or *Intal*.
- **Symptom controllers** – help to keep the narrowed airways open for longer (up to 12 hours). These **do not help** during an attack. They include *Serevent*, *Oxis*, and *Foradil*.

## Emergency treatment

While in the emergency department, you may have been given reliever medicine to help open your airways. You may feel 'shaky' and your chest may feel like it is pounding – these are the normal side effects of large doses of *Ventolin*.

The reliever medication may have been given through a spacer or *nebuliser*. A *spacer* or *space chamber* is a clear tube that you press the puffer into. A spacer makes sure the drug goes deep into your lungs where it is needed. They are easy to use at home and are portable.

You may also have been given a steroid medication called *prednisolone*, which reduces the swelling in the airways. This is given as a tablet or syrup and takes four to six hours to work. This medication is normally given for a few days during an acute attack, depending on your needs. Other steroids (such as *hydrocortisone* or *dexamethasone*) may have been given *intravenously* (into a vein) if your condition was serious, as they work much faster.



# Asthma

## Home care

In most cases you can treat your asthma at home.

- **Take your asthma puffers as directed.** Know how to use your puffer or spacer correctly. Carry your puffers with you at all times.
- **Monitor your asthma.** Learn to use a peak flow meter to check your breathing.
- **Stay active and healthy.** Ask your doctor for advice about exercise.
- **Identify trigger factors** and try avoid them.
- **Follow an Asthma Action Plan.** This plan could save your life by preventing asthma attacks, warning you when your asthma is getting worse and teaching you what to do. Ask your local doctor for an Asthma Action Plan that is right for you.
- **Have regular check-ups** with your local doctor.

### Do not:

- stop your medication unless your doctor advises you to
- smoke or expose children to smoky environments.

### Notes:

## Seeking help



If you have difficulty breathing or your asthma gets worse, follow your own Asthma Action Plan.

If you do not improve after taking reliever medication and have difficulty breathing or speaking, are pale and sweaty or turn blue around the lips, **call an ambulance** (or have someone call for you) **by dialling 000**.



See your local doctor or health care professional **within 48 hours of leaving hospital**, especially if you are not getting any better.

You should see your local doctor when you are well as this is the best time to work out an Asthma Action Plan. Ask your doctor about the 'Asthma 3+ Visit Plan'.



For health advice from a Registered Nurse you can call **NURSE-ON-CALL 24 hours a day** on **1300 60 60 24** for the cost of a local call from anywhere in Victoria.\*

**NURSE-ON-CALL** provides access to **interpreting services** for callers not confident with English. Call **1300 60 60 24**.

\*Calls from mobile calls may be charged at a higher rate



## Want to know more?

- Ask your local doctor or health care professional.
- Contact the **Asthma Foundation Victoria**  
Phone 1800 645 130  
[www.asthma.org.au](http://www.asthma.org.au)
- Contact **Quit** for help to stop smoking  
Call Quitline on 131 848  
[www.quit.org.au](http://www.quit.org.au)
- Visit the **Better Health Channel**  
[www.betterhealth.vic.gov.au](http://www.betterhealth.vic.gov.au)

If you would like to receive this publication in an **accessible format**, please phone 9096 8064 or email [edfactsheets@dhs.vic.gov.au](mailto:edfactsheets@dhs.vic.gov.au)

June 2008. Also available online at [www.health.vic.gov.au/edfactsheets](http://www.health.vic.gov.au/edfactsheets)

Disclaimer: This health information is for general education purposes only. Please consult with your doctor or other health professional to make sure this information is right for you.