Asthma

WHAT IS ASTHMA?
Asthma is a common medical condition that affects the small airway passages of the lungs. During an asthma attack, the lining of the airways swell, there is a build-up of mucus (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. Factors that may ‘trigger’ an attack include smoke, cold air, viral infections (colds and flu), allergies and exercise. People who have asthma or hay fever can also get severe asthma symptoms (thunderstorm asthma) when large amounts of grass pollen in the air combine with a particular type of thunderstorm during grass pollen season (October-December).

HOW COMMON IS ASTHMA?
More than 600,000 Victorians have asthma including one in four children, one in seven teenagers and one in 10 adults. Thunderstorm asthma events are uncommon.

WHAT ARE THE SYMPTOMS OF ASTHMA?
An asthma attack can develop suddenly over minutes or slowly over days. 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 you can lead a normal, active life. Medications are mostly taken through a metered dose inhaler (MDI) or a ‘puffer’. Spacers are often used to give puffer medication. 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. Reliever inhaler devices are blue in colour. Brands include Ventolin, Asmol, Airomir, Bricanyl and Atrovent. These are usually only used when needed, such as before or during sport or during an asthma attack.
- **Preventers** prevent attacks by reducing airway inflammation. These need to be taken every day, even when you don’t have any symptoms. Brands include Pulmicort, Flixotide, QVAR, Alvesco, Tilade, Intal inhalers and Singulair tablets
- **Symptom controllers** are long-acting relievers which help to keep the narrowed airways open for longer (up to 12 hours). These do not help during an attack. Brands include Serevent, Oxis and Onbrez.
- **Combination inhalers** contain a preventer and symptom controller in the same device. They prevent asthma symptoms and should be used every day, even when you don’t have any symptoms. Brands include Seretide, Symbicort, Breo Ellipta, DuoResp Spiromax and Flutiform.

EMERGENCY TREATMENT
While in the emergency department or urgent care centre, you will 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 larger doses of Ventolin.
You may also have been given a steroid medication such as prednisolone, which reduces the swelling in the airways. This is given as a tablet or syrup and takes about four to six hours to work. This medication is normally given for a few days after a sudden attack or at other times depending on your symptoms. Other steroids (such as hydrocortisone or dexamethasone) may have been given intravenously (into a vein) if your condition is more serious because they usually work faster.

It can often take several hours to assess how your asthma attack is responding to treatment. This period of observation is important to make sure you are safe to continue your treatment at home.

**HOME CARE**

In most cases you can treat your asthma at home.

- Take your asthma puffers as directed. Know how to use your puffer and/or spacer correctly. Always carry your puffer with you, even when you are feeling well.
- Stay active and healthy. Ask your doctor for advice about exercise.
- Identify your personal trigger factors and try to 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 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.

**Seeking help**

If you have difficulty breathing or your asthma gets worse, follow your personal 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 triple zero (000).

See your local doctor within 48 hours of leaving hospital, especially if you are not sure about whether you are getting better.

You should see your local doctor when you are well because this is the best time to work out an Asthma Action Plan. Ask your doctor about the ‘Asthma Cycle of Care’ initiative.

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.

* Calls from mobiles may be charged at a higher rate.

**WANT TO KNOW MORE?**

- Ask your local doctor or healthcare professional.
- Contact the Asthma Foundation Victoria on 1800 278 462 or www.asthma.org.au.
- Contact Quit for help to stop smoking on 137 848 (Quitline) or www.quit.org.au.
- Visit the Better Health Channel at www.betterhealth.vic.gov.au for more information on thunderstorm asthma.