





Children's Health Fund

Co-founded in 1987 by singer/songwriter Paul Simon and pediatrician/child advocate Irwin Redlener, MD, the Children's Health Fund (CHF) is committed to providing health care to the nation's most medically underserved children through the development of innovative pediatric programs and the promotion of guaranteed access to high quality health care. To date, the programs in CHF's National Network have completed more than a million health care visits to at risk children and families in rural and urban areas.

Childhood Asthma Initiative

In December of 1997, the Children's Health Fund (CHF) launched the Childhood Asthma Initiative (CAI). The goal of CAI is to empower families to successfully manage childhood asthma. The program's original target populations were homeless families served by the New York Children's Health Project (NYCHP) and medically underserved housed community residents utilizing the South Bronx Health Center for Children and Families (SBHCCF). Both NYCHP and SBHCCF are flagship programs of CHF and comprise the Division of Community Pediatrics at the Children's Hospital at Montefiore in New York. Through the dissemination of this asthma guide, CAI now reaches thousands of families across the country.

Leadership Support for the Childhood Asthma Initiative is provided by Schering-Plough Foundation

To request the Family Asthma Guide, please contact:

Children's Health Fund 212-535-9400

www.childrenshealthfund.org

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Look for this symbol in this guide for tips on **what YOU can do** to help control your asthma and reach your goals.





Did you know?

There are even Olympic athletes with asthma!

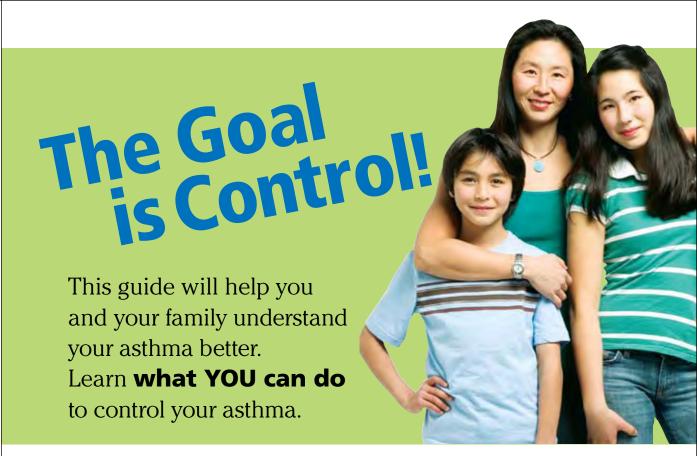




Be on the track team

What do you like to do?

People with asthma do all of these things. With good asthma control, you can too. Different people need different plans. Work with your doctor or nurse practitioner to make a plan that is right for you. Don't let asthma hold you back!





- You can play and exercise without problems
 You can sleep well through the night
- No missed school because of asthma
- No hospital stays
- Few or no emergency room visits
- Few or no side effects from medicine

What are YOUR goals for asthma control?

1

2

3

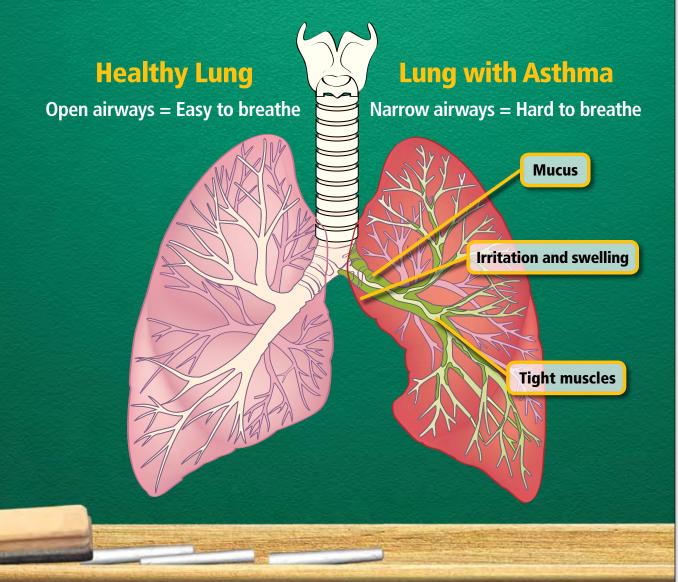
What is Asthma?



Asthma is a disease of the lungs. It makes the small airway tubes get narrow so it is hard for air to get in and out.



When your airways are too narrow you get asthma symptoms and it is hard to breathe.



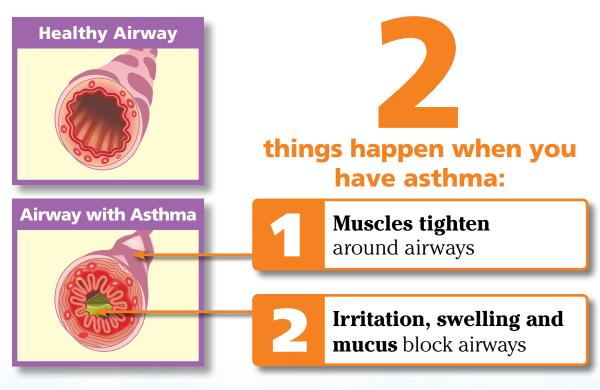
WHAT IS ASTHMA?

Asthma is a lung disease that makes it hard to breathe.

Asthma is a disease with symptoms that come and go. Some people get fewer symptoms as they get older. You may not have symptoms for a long time but they can come back at any time. Be ready to act quickly.

Some people with asthma only have symptoms when they get a cold or exercise. Other people have symptoms every day. Some people are worse at certain times of the year.

Asthma can't be cured, but you CAN work with your doctor or nurse practitioner to have fewer symptoms. Learn what to do to take control!





Asthma can be controlled. You can learn to manage your asthma to keep your lungs healthier.

ASTHMA SYMPTOMS

What does asthma feel like?

Asthma is not the same for everyone. You may have some or all of these symptoms with your asthma.

Cough

With asthma you may cough a lot, even when you don't have a cold. The cough may last a long time. It may wake you up at night. You may cough when you play or exercise.

Wheezing

Wheezing is a whistling sound when you breathe. This is the air trying to go through narrow airways.

Out of breath

When you feel out of breath you may have trouble breathing or feel like you can't get enough air. You may need to breathe faster than normal.

Chest tightness

Chest tightness is when your chest feels tight or heavy. Your chest may hurt or feel like something is squeezing or pressing on it. You may feel like it is hard to get air in and out of your lungs.

Fatigue/tiredness

Fatigue or tiredness is when you get tired more easily than usual.



Know your symptoms so you can act quickly when they begin. Make a plan with your doctor or nurse practitioner. Acting early can keep symptoms from getting worse.

ASTHMA CATEGORIES

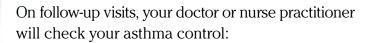
How bad is my asthma?

Your doctor or nurse practitioner will classify your asthma based on how often you have symptoms, or how sick you get. The categories are:

Intermittent Mild Moderate Persistent Persistent Severe Persistent



A person who sleeps
well can do better at
school. If you wake up
at night coughing a lot,
your asthma is
not in control.







This is the goal for everyone.

Not well controlled

Some symptoms

Talk to your doctor. Your plan may need changes to get your asthma well controlled.

Very poorly controlled

A lot of symptoms

Talk to your doctor. Your plan may need changes to get your asthma well controlled.

Ask your doctor or nurse practitioner how well you are doing.



Talk to your doctor or nurse practitioner to make sure you are on the right medicines, especially when your symptoms change.



Asthma Attacks

An asthma attack is when your asthma symptoms get out of control and make you sick. Signs of a serious asthma attack can include:

Cough, wheezing, or chest tightness

Breathing hard and fast

Ribs may show more than normal when you are breathing in Lips or fingernails may turn blue

May not be able to walk or talk well

If this happens, get help immediately.

For more on asthma attacks, see page 24.

What is a Trigger?



WHAT IS A TRIGGER?

Triggers are things that can affect your asthma.

An asthma trigger is something that makes your asthma symptoms start up or get worse. Different people have different triggers.



COMMON TRIGGERS

INDOOR

- Dust / dust mites
- Cats, dogs, or other animals
- Rats or mice
- Cockroaches
- Mold

OUTDOOR

- Pollen
- Plants, flowers, grass, or trees
- Changes in weather or seasons

IRRITANTS

- Cigarette smoke
- Strong smells (like cleaning products or perfumes)
- Air pollution or smog

OTHER

- Stress or worry
- Colds or sickness
- Exercise or play
- Food allergies
- Cold air

What are YOUR asthma triggers?

1

2

3



TRIGGER CONTROL

What can I do about my triggers?

Think about what triggers your asthma. Try to avoid your triggers. You can plan ahead for when you know you will be around them.

IN THE HOUSE

DUST

- Dust often, but not when people with asthma are home.
- Avoid cloth curtains or carpet when you can. If you have them in your house, clean them often.
- Keep fewer stuffed animals. If you have them, wash them often. Do not sleep with stuffed animals.
- · Wash sheets and bedding often.
- Use special covers for your mattress and pillow to control dust mites.

MOLD

- · Mold likes to grow in warm, moist places.
- Make sure there is no standing water in the house (under the refrigerator, in plants, in the bathroom).
- Fix leaks so that there is no water damage on the walls, floor, or ceiling. Water damage allows mold to grow.

PESTS

- Use baits or traps instead of sprays to kill pests. Be sure to keep out of children's reach.
- · Bug sprays can trigger asthma attacks.
- Don't leave food on the counters or in the sink. This can bring mice or roaches into your home.
- Fix holes around pipes and in the walls where pests may enter.

SMELLS AND ODORS

- $\boldsymbol{\cdot}$ Sprays and cleaning products with strong smells can bother people with asthma.
- · Lemon, baking soda, and vinegar are safer for cleaning.
- Air fresheners, candles, and perfumes can also trigger asthma symptoms.
- People with asthma should not smoke or be around smoke.

OUTSIDE

If you have allergies to plants or pollen, know what months are worst for you. Plan ahead. Talk to your doctor or nurse practitioner about using an allergy medicine.





ALLERGIES

Is my asthma worse because of allergies?

An allergy is when your body reacts to something that is harmless to most people. An allergy can cause a rash, hives, itchy eyes, runny nose, sneezing, or coughing. People with asthma may have allergies that can make their asthma worse.

Some people are allergic to dust mites, pollen, mold, rats, mice, cats, dogs, cockroaches, or even foods. Allergies can make asthma harder to control.

People with allergies may need to take allergy medicines.
Controlling your allergies may help you control your asthma.

How do I know if I have allergies?

There are different ways to test for allergies. One way is with a blood test. Another way is with a skin test. Your doctor or nurse practitioner may do these tests in his or her office or they may send you to a special doctor called an allergist.





Talk to your doctor or nurse practitioner to see if you need to be tested for allergies.

What Medicine Should I Take?

There are 2 kinds of medicine to treat asthma

RELIEVERS

Relievers work to relax tight muscles around the airways. Use your reliever medicine for quick relief of asthma symptoms.

CONTROLLER

Controllers work to reduce irritation, swelling, and mucus that block airways. If you are on a controller medicine, use it every day to prevent asthma symptoms. Ask your doctor or nurse practitioner if you need a controller medicine.

Healthy Lung

Open airways = Easy to breathe

Lung with Asthma

Narrow airways = Hard to breathe

Tight muscles



Extra mucus

Irritation and swelling

Everyone who has asthma should have a reliever medicine. People who have asthma symptoms often should also be on a controller medicine.

ASTHMA MEDICINES

RELIEVERS

Everyone with asthma should have a reliever medicine

Relievers are also called rescue medicines. They can come as an inhaler or go in a nebulizer machine.

What do relievers do?

- They relax the muscles around the airways.
- These medicines work right away.

When should I use my reliever?

- Only when you need it.
- For quick relief.
- When you are having symptoms (cough, wheezing, chest tightness, out of breath, fatigue/tiredness).
- Before exercise or activity, if needed.
- About half an hour before you are going to be around one of your triggers.

My Reliever (s):

CONTROLLERS

Some people with asthma also need a controller medicine

Controllers can come as an inhaler or go in a nebulizer machine.

What do controllers do?

- They reduce irritation, swelling, and mucus in the airways.
- These medicines take time to work.

 Don't expect to feel different right away.

When should I use my controller?

- EVERY DAY (as directed by your doctor or nurse practitioner).
- They help your lungs stay healthier and stronger.
- If used every day, you will have fewer symptoms over time.
- If used every day, they will help when you are around one of your triggers.

My	Control	ller ((S)):
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Important!

- When you have symptoms or an asthma attack, use your reliever for quick relief.
- If you are on a controller, use it every day, even when you are not having symptoms.
- If you are on a controller, you should also have a reliever. You will still need your reliever when you have symptoms.

MEDICINE TIPS

Talk to your doctor or nurse practitioner if your medicine is making you feel bad or sick. You might be having side effects. You may need to change to a different medicine.



Rinse your mouth after using inhaled controller medicines.

If you are on a controller, use it every day. Make taking your controller part of your regular routine.

Always use a spacer with your inhalers. More medicine gets into your lungs, so less gets on the inside of your mouth.



Don't run out of medicine!

Plan ahead.

Make sure to get your refills before you run out of medicine.

Check the date on your medicine.

Do not use it if it is too old.

Check that you have your medicine when you are going to be away from home.

RELIEVERS



Albuterol Sulfate solution



Proventil HFA (Albuterol)



Ventolin HFA (Albuterol)



ProAir HFA (Albuterol)



Maxair Autohaler



Xopenex solution

CONTROLLERS



Pulmicort Turbuhaler



Pulmicort Respules



Qvar 40 HFA



Qvar 80 HFA



Symbicort 80/4.5



Advair Diskus



Advair HFA 115/21 inhaler



Singulair 4 mg



Singulair 5 mg



Singulair 10 mg



Flovent HFA 44



Flovent HFA 110



Flovent HFA 220



Flovent Diskus 50



Azmacort Inhaler

ORAL STEROIDS



Prelone Syrup (Prednisolone)



Orapred Syrup (Prednisolone)



Prednisone Tablet



Oral steroids are strong medicines taken by mouth. They are usually used for very short periods of time. They can help when your asthma is out of control and you are very sick.

ALLERGY MEDICINES



Rhinocort Aqua



Nasonex



Flonase



For some people, controlling their allergies helps control their asthma.
Ask your doctor or nurse practitioner if you need any allergy medicines.



Nasacort



Zyrtec solution (Cetirizine HCl)



Zyrtec tablets (Cetirizine HCl)



Claritin Syrup (Loratidine)



Claritin Tablets (Loratidine)

USING AN INHALER

How do I use an inhaler?

INHALER



· Sprays a mist of asthma medicine that you breathe in



SPACER



 Allows medicine to go deep into your lungs instead of just into your mouth



MASK



- · Covers mouth and nose
- Used with spacer and inhaler for younger children



INHALER

- 1. Shake inhaler.
- **2.** Connect it to the spacer (with or without mask).
- **3.** Put end of spacer in your mouth or mask over your nose and mouth.
- **4.** Press down on inhaler.
- **5.** Breathe in deeply and hold it for 10 seconds. If you can't do this, take 4 to 6 deep breaths.
- **6.** If your doctor or nurse practitioner said to take 2 puffs, then wait 1 minute and repeat steps 1 to 5.

DRY POWDER INHALERS

There are other kinds of inhalers that have powder inside, instead of mist. Ask your doctor or nurse practitioner if you are not sure what kind you have.

- 1. Do not shake.
- **2.** Make sure you hold inhaler or disk right side up.
- **3.** Twist or click dose counter.
- **4.** Hold inhaler to mouth.
- **5.** Breathe in hard, deep, and fast.
- **6.** Hold breath for 10 seconds.
- 7. Be sure to breathe out from your nose. You don't want to lose any powder from your mouth.



Bring your inhaler with you when you see your doctor or nurse practitioner. Ask them to watch you use it. You can make sure you are doing it right.

USING A NEBULIZER

What is a nebulizer?

It is a machine that makes liquid medicine into a mist. You breathe the mist into your lungs.

How do I use a nebulizer?

1. Attach plastic tubing to the nebulizer machine.

2. Connect the other end of the tube to the medicine cup.

3. Put your medicine in the medicine cup. **-**

4. Attach mask or mouthpiece to medicine cup.

5. Put mask over mouth and nose, or use mouthpiece.

6. Be sure not to breathe through your nose if you use the mouthpiece.

7. Turn on the machine.

8. Take slow, deep breaths.

9. Keep doing this, until all the medicine is gone from the cup and there is no more mist.

10. Clean the mask, mouthpiece, tubing, and medicine cup after use so that bacteria won't grow.

You should always use the mask instead of the mouthpiece for babies and small children. They need the mask to get enough medicine into their lungs.



A treatment usually takes 5-10 minutes Sit with the medicine cup upright during your treatment. This way, the medicine

doesn't spill out.

Parents' tip

Nebulizer treatments can be scary for young children. Try to calm them. Give them something else to think about, like a favorite book.



PEAK FLOW AND SPIROMETRY

What is a peak flow meter?

It is a small, hand-held plastic tool used to measure how air flows from your lungs. High numbers mean better airflow. Low numbers mean your asthma is getting worse.

- Your doctor or nurse practitioner will help you practice. Find out your personal best number.
 Do this on a day that you feel well. This is your goal for when you do it at home.
- At home, check your peak flow to see how you are doing. When you get sick, your numbers will get lower. This is a sign for you to take action.
- If you feel well, high peak flow numbers show you and your doctor that your medicines are working.

What is spirometry?

This is a breathing test to see how well your lungs are working. For this test, you breathe into a mouthpiece connected to a computer, called a spirometer. Some

doctors or nurse practitioners may have this machine in their office. Others will send you to a special lung doctor called a pulmonologist.

HOW DO I DO IT?

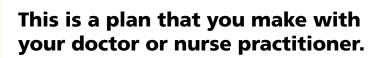
- 1. Stand up straight.
- **2.** Make sure the pointer is at the bottom of the numbered scale.
- **3.** Take a deep breath.
- **4.** Place the mouthpiece in your mouth and close your lips around it.
- **5.** Blow out as hard and as fast as you can, in one quick blow.

Repeat steps 1-5 two more times. Write down the highest number. This is your peak flow number.





Talk to your doctor or nurse practitioner to see if you need a peak flow meter and when to use it.



• It helps you to know what to do when you have asthma symptoms.

• It reminds you to take your controller medicines every day, even when you are feeling well.

• It helps you decide when to use your reliever medicines.

 It helps you to know when you need to see your doctor or nurse practitioner.
 It can help you decide when to go to the emergency room.

Your asthma plan has all your information on one page. You can carry it with you. Give a copy to your school or people who help to take care of you.

Keep your asthma action plan up to date with all of your medicines. Keep it where you can see it every day.



Family Asthma Guid

ne Goal is Contro

ASTHMA ACTION PLAN

Everyone should have an asthma action plan! Your doctor or nurse practitioner will help you fill out a form like this one.

Patient Information	Doctor or Practitioner Information		
Patient	Doctor		
Date of Birth	Nurse Practition	ner	
Parent/Guardian	Date filled out		
Phone	Phone		
GO! GREEN ZONE	ZONE Take these medicines every day!		day!
Peak Flow: fromto	Medicine	How Much	How Often
You have ALL of these:			
 Breathing is easy No cough, wheeze or trouble sleeping Energy level is normal 			<u> </u>
No cough with play or exercise	Comments		
• Peak Flow number is in your Green Zone	Comments		
WARNING! YELLOW ZONE	Take green a	and yellow zone	medicines!
Peak Flow: fromto	Medicine	How Much	How Often
You have ANY of these:			
 Having trouble catching your breath Coughing, day or night 			
· Mild wheeze · Fatigue			
· Chest feels tight	Comments		
· Peak Flow number is in your Yellow Zone			
DANGER! RED ZONE	Take red zon	e medicines & ca	all a doctor now!
Peak Flow: fromto	Medicine	How Much	How Often
GET HELP NOW!			
 Green and yellow zone medicines are not helping Breathing is hard and fast. Can't catch a breath 			
· Ribs may show when breathing in			
Nose opens wide when breathingChest feels tight or hurts	Comments		
· May not be able to talk or walk well			
· Lips or fingernails may turn blue · Peak Flow number is in your Red Zone	Get HELP from a doctor or nurse practitioner NOW! Do NOT Wait! If you cannot reach the doctor, call 911 or go to an EMERGENCY ROOM right away.		
Write down the triggers that make your asthma worse	:		

BE READY!

Let your school, daycare or babysitters know about your medicine plan and triggers. Carry inhalers and spacer, or leave them with the school nurse. You never know when you will need them!



School Medication Form - With this form, you will be able to keep your asthma medicine in the nurse's office or carry it yourself, if you are old enough.

Have an emergency plan Share it with your family, school, daycare or babysitters. These are things you may need if you have to go to the emergency room: Important contact phone numbers Letter from your parent giving permission for you to get care A copy of your insurance cards



Trust yourself. If you feel like your asthma is acting up, take action! Talk to your doctor or nurse practitioner if you think your medicine or plan isn't working.

PHONE NUMBERS/APPOINTMENTS



+	MY DOCTOR or NURSE PRACTITIO	ONER	
	Name		
	Address		
~~ Ⅰ	Phone number		
	Name		
	Address		
	Phone number		
	Name		
	Address		
	Phone number		
	MY PHARMACY		
	Name		
	Address		
	Phone number		
	MY SCHOOL/SCHOOL HEALTH OFFICE		
	Name		
71216	Address		
	Phone number		
		MY APPOINTMENTS:	
OCAL ASTUI	MA RESOURCES		
OCAL ASTRI	WIA RESOURCES		
emembe	r: In an Emergency call 911		

NATIONAL ASTHMA RESOURCES

National Heart Lung, Blood Institute (NHLBI)

National Asthma Education Program Information Center

P.O. Box 30105

Bethesda, MD 20824-0105

Phone: 301-592-8573 TTY: 240-629-3255 www.nhlbi.nih.gov

American Academy of Allergy, Asthma, and Immunization (AAAAI)

555 East Wells Street, Suite 1100 Milwaukee, WI 53202-3823 Phone: 800-822-2762

www.AAAAI.org

American Lung Association (ALA)

61 Broadway, 6th Floor

NY, NY 10006 Phone: 800-586-4872 www.lungusa.org

Consortium on Children's Asthma Camps

490 Concordia Ave St. Paul, MN 55103 Phone: 651-227-8014 www.asthmacamps.org

Asthma & Allergy Foundation of America (AAFA)

1233 20th Street, NW., Suite 402

Washington, DC 20036 Phone: 800-727-8462

www.aafa.org

The Allergy & Asthma Network/Mothers of Asthmatics Inc. (AAN/MA)

2751 Prosperity Ave., Suite 150

Fairfax, VA 22031

Phone: 800-878-4403 or 800-315-8056

www.aanma.org

Centers for Disease Control and Prevention (CDC)

1600 Clifton Rd. Atlanta, GA 30333 Phone: 800-232-4636 TTY: 888-232-6348 www.cdc.gov/asthma

American Academy of Pediatrics (AAP)

141 Northwest Point Boulevard Elk Grove Village, IL 60007-1098

Phone: 847-434-4000 National Headquarters,

llinois

Phone: 202-347-8600 Washington, DC Office

www.aap.org



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