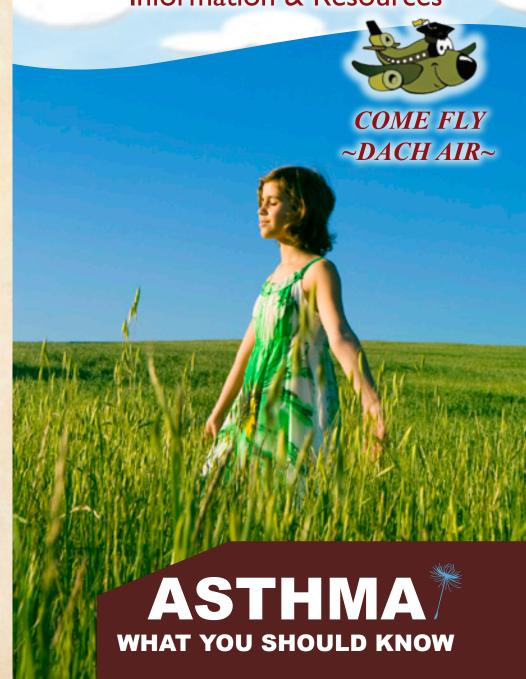


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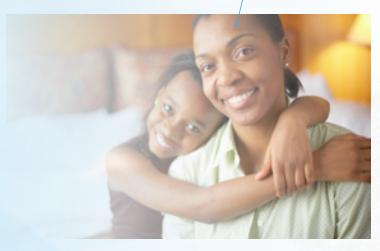
> CRDAMC HO 8 Revised 01 April 2010



Darnall Area Comprehensive
Healthcare Asthma
Information & Resources



What Everyone Should Know About Asthma...



Information provided is based on the 2007 NHLBI Guidelines for the Diagnosis and Management of Asthma as well as the 2004 Update to Managing Asthma During Pregnancy.

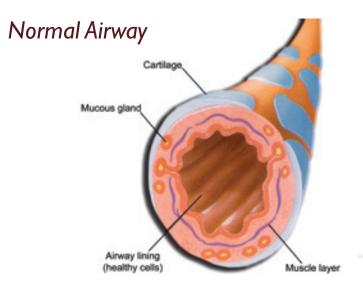
What is asthma?

Asthma is a chronic (life-long) disease of the airways. Asthma can make it hard to breathe when the person is around triggers. It can be mild, moderate or severe and can be controlled but not cured.

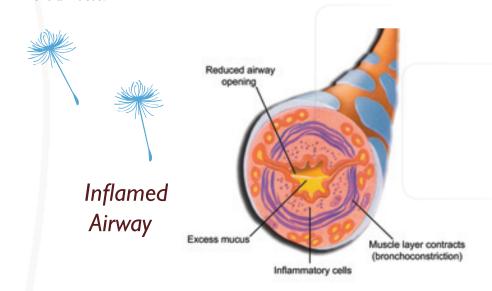
What causes asthma?

Doctors do not yet know what causes asthma, but it seems to run in families. Most people with asthma also have allergies and many have the dry, flaky skin condition called eczema.

This booklet describes several things a person with asthma can do to have better asthma control and improved quality of life. Some of these self-management skills include taking medications as prescribed, monitoring peak flow and/or symptoms, following an asthma action plan, and seeing a health care provider regularly. People with asthma should not smoke and should avoid second-hand smoke as both are known to make asthma worse.



Inflammation, broncho-constriction and excess mucus: The swelling happens over time and even with medicine, takes some time to go away. The muscle tightening can happen very rapidly and is relieved quickly with proper medication. Drinking lots of water is the best way to handle the extra mucus.



Know Your Triggers

Asthma triggers are things that make asthma flare-up or worsen. Everyone's triggers are a little different. Below are some common triggers and ways to help control their effects.

TRIGGER	CONTROL
Allergens: • Pollen	Keep windows closed, use AC/heat to filter air; change/clean filters at least monthly
Dust mites	Use dust mite-proof covers for pillows, vacuum frequently, remove stuffed
Mold Animal dander	animals and rugs (if able) Run a dehumidifier, clean
,a. Sanso.	frequently • Keep pets out of the house or at least out of the bedroom; bathe animal weekly
Irritants: Cigarette smoke Chemicals/paints Strong odors	Stop smoking! Wear mask Open windows
Weather: • Weather changes/very cold	Wear scarf over nose/ mouth Get flu shot yearly
Respiratory infections	Wash hands/cover mouths
Exercise • Sports/Vigorous activity	Warm up/take medicine
GERD • Reflux/acid stomach	Ask health care provider

Recognize Early Warning Signs

Just as triggers are different for each person, so are early warning signs. Some of the most common are listed below.

Runny nose and eyes	Trouble breathing
Cough	Itchy skin
Sneeze	Tired, weak feeling
Neck & throat tightness	Sick to the stomach
Ear pain	Chest tightness
Sore throat	Chest pain
Headache	Neck pain

Take Your Medication as Prescribed

There are two basic types of asthma medications. While EVERYONE with asthma should have a reliever, most people with asthma will need to take both types of medicine for good control.

Other types of controller medicines are available and your health care provider may give you one. It is VERY important to understand all medications. You should know why you are taking it, what it will do for you, what side effects might occur, when to take it and when to stop taking it.

Pregnancy is not the time to stop your asthma medicine without talking to your provider. According to the experts, "it is safer for pregnant women with asthma to be treated with asthma medications than for them to have asthma symptoms and exarbations" (attacks). Remember, if you cannot breathe, neither can your baby!

CONTROLLER	RELIEVER
Action - prevents and reduces swelling inside the airways (inhaled steroid)	Action - relieves muscle tightness around the airways
Needs time to work; prevents attacks	Works very quickly; relieves attacks
Must be taken every day to be effective - even when feeling fine	Take when needed to relieve signs/ symptoms of an attack





Most asthma medications are taken using a metered dose inhaler (MDI). It is very important to use inhalers properly, but few people can do so without a spacer. Spacers attach to the MDI and hold the medication until you are ready to breathe it in. They are required for infants and young children (0-5 years with mask) and all others, including adults (6 year and up without mask)

To use an MDI with or without a spacer:

- I. Shake well.
- 2. Hold upright, remove the cap and make sure the opening is clear
- 3. Attach to spacer. (Highly recommended)
- 4. Take a deep breath in and out.
- 5. Hold the spacer/inhaler with lips sealed around the mouth piece.
- 6. Press down on inhaler and breathe in slowly over 3-5 seconds.
- 7. Hold breath for ten seconds.
- 8. Exhale through pursed lips.
- 9. Wait one minute and repeat if ordered.

To use an MDI with spacer and mask: Follow I-3 as above, than:

- 4. Place spacer with mask over nose and mouth, with a tight seal
- Press down on inhaler and breathe in normally for 5-6 breaths
- 6. Pull away and wait one minute and repeat if ordered



Monitor Breathing with a Peak Flow Meter

Peak flow numbers tell you how well you are breathing. They will often drop before signs/symptoms are noticed. Your personal best is the number you get when feeling well. The best way to determine your personal best is to check peak flow readings for 2 to 3 weeks when not having any signs or symptoms. To use a peak flow meter:

- Stand up
- · Take a big, deep breath
- · Close your lips tightly around the mouth piece
- Blow out hard and fast (all the air in I second)
- Check the reading
- Repeat twice
- Record the best of the three in your peak flow chart/diary

Try to always use the same peak flow meter. Check twice a day, in the morning and at night or follow the directions of the health care provider. Write down any symptoms or extra medication needed as well. Bring your meter and chart to all asthma appointments.

Follow Your Asthma Action Plan

An action plan explains what to do when feeling well and when signs and symptoms are noticed. Action plans are set up like stoplights with green, yellow and red zones. The zones are based on the personal best peak flow and/or warning signs and symptoms. Catching an asthma attack early in the green or yellow zones allows you to take action at home, helping to avoid a visit to the clinic or emergency room.

Get Educated!

DACH AIR, the Darnall Asthma Program, offers age specific patient education classes as listed below. The program coordinator can be reached at 288-8136. Self-referrals are always welcome! Classes are held at CRDAMC.

Wee Wheezers

(Caregivers for infants to 5 years of age) ***** Please arrange for childcare for class time. *****

Peds Class

(6 to 10 year olds and their caregivers)

Peds Class

(11 to 14 year olds and their caregivers)

Adult Class

***** Please arrange for childcare for class time. *****

Please call to confirm class dates, times and location.



What happens during an asthma attack?

During an asthma attack, three things happen: the airways swell (inflammation), tiny muscles around the airways tighten (broncho-constriction) and extra mucus is made.

Bring the following information back to your provider and to Asthma Education Class...

My asthma triggers are:	
My early warning signs are:	
My medications are:	
Important Phone Numbers:	
My health care provider/clinic is:	
Phone number:	

CRDAMC Appointments: 288-8888 CRDAMC Main Pharmacy: 288-8800 Refill Pharmacy: 288-8911/8912

www.crdamc.amedd.army.mil

Other Resources

Army Wellness Center
Tobacco Cessation
"Stop Smoking" Program
288-8488
www.crdamc.amedd.army.mil

The Asthma & Allergy
Foundation of America
1125 15th St. NW, Suite 502,
Washington D.C. 20005
1-800-727-8462
www.aafa.org

National Asthma Education & Prevention Program NHLBI Information Center, P.O. Box 30105 Bethesda, MD 20824-0105 www.nhlbi.nih.gov

The American Lung Association I-800-586-4872 www.lungusa.org

