

# Asthma

## Emergency Department factsheets

### 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 mucus/phlegm and the muscles around the airways tighten. This causes a narrowing of the airways (*bronchoconstriction*) which may make it difficult to breathe.

### Why do people get asthma in the first place?

The causes of asthma are not fully understood, but there is often a family history of asthma, eczema or hay fever. Asthma can begin at any age and can change over time.

### What triggers asthma?

People with asthma have sensitive airways and many have known factors that may 'trigger' an attack including:

- colds and flu (especially in children)
- pollens, moulds and grasses
- animal hair and dander (skin flakes)
- dust mites
- cigarette and bush fire smoke
- changes in air temperature and weather
- exercise (this can be managed)
- medications e.g. ibuprofen, aspirin and some blood pressure medications
- some chemicals e.g. perfume, cleaning agents, nail polishes strong smells and aerosol sprays
- some emotions e.g. laughter, grief, stress.

### 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 out)
- difficulty breathing
- tightness in the chest.

### Treatment

With the right Asthma Action Plan, 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 ensure puffer medication reaches the right place. They are often used for children but are helpful for adults too. There are different medications to treat asthma.

- **Relievers:** Short acting bronchodilators relax the airway muscles and therefore 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*, or *Qvar*.
- **Symptom controllers:** These 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*.

Medications often come as combination inhalers to give you the benefit of prevention and long acting control in one inhaler. Some people are also prescribed different therapies including oral (tablet) medication.

## 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 larger 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.

## Getting ready to go home

Before you leave hospital it is important that you know how to use your medications and spacer (if needed), and how to recognize your asthma symptoms. Even if you have been using inhalers for some time, it is useful to have your doctor or nurse to check that you are using them correctly. Your health-care professional will give you individual Asthma Action Plan so that you know what to do when you get symptoms.

## Action steps at home

- Take your asthma puffers as directed.
- Carry your inhalers with you at all times.
- Monitor your asthma. Learn to use a peak flow meter to check your breathing.
- Know your asthma triggers and avoid them.

- Have regular check-ups with your local doctor.
- Stay active and healthy. Eat nutritional foods and get regular exercise, avoid smoking.
- Review your Asthma Action Plan at least yearly.

### Do not:

- Stop your medication unless your doctor advises you to.
- Smoke.

## Seeking help

In a medical emergency, go to the nearest hospital emergency department or call an ambulance (dial 000). For other medical problems see your local doctor or health-care professional.

13 HEALTH (13 43 25 84) provides health information, referral and teletriage services to the public in all parts of Queensland and is available 24 hours a day, 7 days a week, 365 days a year for the cost of a local call\*.

\*Calls from mobile phones may be charged at a higher rate. Please check with your telephone service provider

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.

## Want to know more?

Asthma Australia for information and videos on symptoms, triggers, diagnosis and treatment.

[www.asthma.org.au](http://www.asthma.org.au)

Quit for help to stop smoking

Phone: 13QUIT (13 78 48)

[www.quit.org.au](http://www.quit.org.au)

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