

Oxford University Hospitals **NHS**
NHS Foundation Trust

Children's Emergency Department
John Radcliffe Hospital

Asthma

Information for parents and carers



What is asthma?

Asthma is a condition that affects the airways, by narrowing the small tubes that carry air in and out of the lungs. This can cause your child to become breathless or wheezy. It is usually caused by a something that irritates your child's airway; this is called a 'trigger'. This could be:

Irritants: tobacco or wood smoke, chemicals

Allergies: pollen, animals, house dust mites

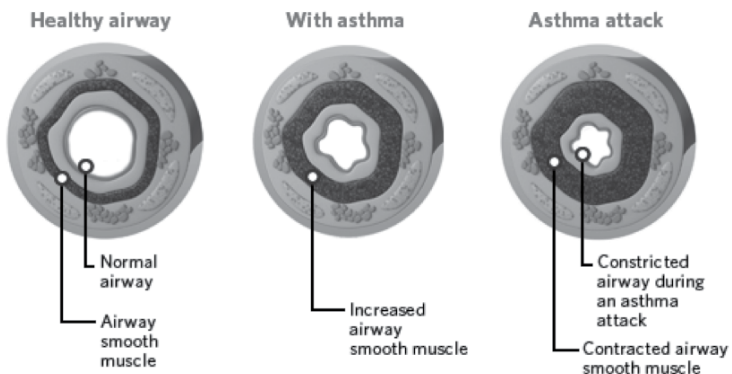
Viral infections: especially in the winter time.

What is a wheeze?

A wheeze is a high-pitched whistling sound that occurs when the smaller airways are narrowed.

What happens to the airway during an asthma attack?

When the airway comes into contact with a trigger the muscle around the walls of the airway tightens, so that the airway becomes narrow. This narrowing makes it difficult for the air to move in and out of the lungs and causes the wheezing noise when your child breathes.



How is asthma treated?

Relievers

Every child with asthma should have a reliever (blue) inhaler.

As soon as your child becomes wheezy, starts coughing excessively or is short of breath, they need to use their reliever inhaler.

Relievers relax the muscle surrounding the airway and make it easier to breathe.

Preventer

A preventer inhaler (usually brown) protects the lining of the airway, and can stop triggers from causing an asthma attack.

Children with asthma need to use their preventer inhaler every day.

It can take up to 14 days to start noticing the improvements from using a preventer. This is why it needs to be used regularly, even if your child's symptoms seem to get better.

Other treatments

Montelukast (Singulair) are preventer tablets. They contain no steroids and are usually prescribed if the inhalers aren't working and also for chronic asthma.

The tablets can be dissolved in water and usually need to be taken in the evening. Asthma is usually worse at night, so taking the tablets in the evening relieves symptoms during the night, as well as the following day.

Prednisolone is a short course of steroid tablets that may be prescribed by a doctor when they think that your child's asthma symptoms are likely to become worse. They normally need to be taken once a day for three days. Your child may be given a course of these tablets to keep to hand if their doctor feels that you and your child are confident and experienced enough to know when an episode of asthma (worsening of breathing) might be coming on. This may include symptoms of chest tightness, wheezing or shortness of breath.

Using a spacer

All inhalers should be delivered using a spacer, as this is the most effective way of giving the medication. The nurses in the hospital will show you how to use this. Please ask if you have any questions about using the spacer before you go home.

Before you use the spacer and inhaler, check the expiry date on the inhaler and make sure the spacer is clean. If the inside of the spacer is not clean this will affect how well it will work.

How do I give my child their inhaler?

Your child may need lots of positive encouragement when they first start to use the spacer. You may want to make it into a game, or use a small reward to encourage them.

1. Sit your child in an upright position, as this will help them to breathe in the inhaler medicine.
2. Shake the inhaler and push it into the port on the end of the spacer. Hold the spacer away from your child's face.
3. If you are using a spacer with a face mask you will need to fit this over your child's nose and mouth. You will need to make sure that there are no gaps, as these will let the inhaler gases escape before they can be breathed in.

If your child is not keen to have the mask of the spacer placed over their nose and mouth, or they need help to use the spacer, you may want to sit them upright on your lap. You can then hold the inhaler end of the spacer in one hand and the mask end with the other.

Some spacers come with a mouthpiece instead of a mask. These are usually for older children who are able to breathe in and out just through their mouth.



4. Press the top of the inhaler firmly again and release, this will administer one puff into the spacer. Allow your child to breathe in and out with the spacer mask still on their face, so that they breathe in the inhaler medicine. If your child is using a mouthpiece, they will need to breathe in and out through their mouth, keeping their lips sealed around the mouthpiece. You may have been taught by your child's nurse to count 10 breaths per puff, but if this is difficult for your child to do when you are back at home then the recommendation is at least 5 breaths; this will still give your child a good amount of the medicine.
5. Remove the spacer mask from your child's face or the mouthpiece from their mouth. Shake the spacer and attached inhaler, to get it ready for the next dose.
6. Put the spacer mask back on to your child's face (or get them ready with the mouthpiece) and administer the next puff.
7. Repeat the process until your child has had the prescribed amount of puffs.

If the spacer makes a whistling noise, this means your child is breathing too quickly. Encourage them to take slower, deeper breaths to make sure they receive a sufficient dose of their medicine. It may help if you breathe with them, so they can copy you.

Cleaning the spacer

This only needs to be done once a month.

Remove the inhaler port and soak both parts of the spacer and the mask or mouthpiece in warm soapy water for 15 minutes. Rinse with hot tap water and leave to air dry in an upright position. Do not put any parts of the spacer in the dishwasher as this will damage it.

What should I do if my child's symptoms get worse or they have an asthma attack at home?

Give them 10 puffs of the blue inhaler. If this has no effect or they need it again within 4 hours you must seek medical attention.

If you are very concerned about your child's breathing, call 999.

How do I give the prednisolone?

The staff who see your child in hospital will explain how to give them this medication.

The tablets are usually ones that dissolve in water, to make giving the medicine easier. Please read the Medicine Information Leaflet which will come with the medication.

Prednisolone tablets:

Give mg/..... tablets once a day for days

If your child is still wheezy after they have finished this course of tablets, please arrange for them to see their GP.

Please refer to your child's personal asthma plan for further advice.

If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call **01865 221 473** or email **PALSJR@ouh.nhs.uk**

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September 2016

Review: September 2019

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Photos courtesy of Asthma UK

