

Asthma

RFQs

- How often do you use your blue inhaler?
- Have you ever been admitted to hospital with asthma?
- When was the last time that you took oral steroids for your asthma?
- Do you smoke?
- Do you use a spacer (eg aerochamber) with your inhalers?
- Does your asthma affect your activities, or your sleep?
- Have you coughed up blood, had a fever, or lost weight (or has his growth been affected)?

Provide

If you are getting no asthma symptoms then it would be worth reducing the dose of your brown inhaler by 25-50% each 3 months. You can always restart them if your symptoms come back.

But please don't use the long acting relievers on their own, without a preventer, that would be dangerous.

You have a self management plan here. It tells you to use your 3 day course (or more if appropriate) of steroids if your peak flow number drops below ... (60% of normal). Please let us know when you do this, we may suggest a change to your regular treatment.

Your self management plan reminds you what to do if your asthma gets worse. But don't hesitate to call us if you are concerned, or to come and see our asthma nurse or the emergency doctor. Has the asthma nurse made sure that you know how to use your inhalers with the little spacer device (e.g. the aero chamber)?

Yes, since you are a smoker and your symptoms have come on relatively late in life, you may have COPD, Chronic Obstructive Pulmonary Disease. COPD is where the small airways are damaged, usually by smoke. COPD makes you prone to getting wheezy and unwell with mucky phlegm, particularly when you get colds. Shall I treat you with a course of steroid tablets and antibiotics for now? We should do a special blowing test called a spirometry test in 6 weeks time. We should probably also arrange a chest X-ray. How does that sound?

You probably have exercise induced wheeze, rather than asthma. Use your reliever before exercise (salbutamol via an aerochamber), but if you are exercising more than 4 times per week we should probably give you a preventer too.

Safety net:

If you are needing to use your blue inhaler more often than 3 times a week, including during exercise (unless you have *only* exercise-induced wheeze rather than asthma), you should see our asthma nurse, this may mean that your asthma is not well enough controlled.

If you are more breathless than usual, please check your peak flow (best of 3). Then check your self management plan, it will tell you if you need emergency treatment, oral steroids, or to see the doctor or asthma nurse.

Since you have had oral steroids before, I would suggest that we give you a back up course of emergency steroids. You can start them (after breakfast, eg 6 tablets per day for 3 days) if your peak flow is (60% below the predicted number for your age and height) and see the doctor urgently, to check your chest, and (s)he can give you more emergency steroids.