



Emergency and Community Health Outreach

Questions & Sample Answers ECHO Program #13 – Asthma & Respiratory Diseases

(Taping Date: Tuesday, September 27—3:00-8:00 pm)

1. What is asthma, and how does a person get it?

Answer:

Asthma is a disease that affects your lungs. It is the most common long-term disease of children. It causes repeated episodes of wheezing, breathlessness, chest tightness, and nighttime or early morning coughing. We know that family history contributes to susceptibility, but in most cases we don't know what causes asthma to develop. Over 300 million people have asthma worldwide – about 15 million in the US. In Minnesota, about 11.2% of adults have been diagnosed with asthma at some point in their lifetime, with the highest rates in the Twin Cities metro area.

2. How do I know if a family member or friend has asthma?

Answer:

Anyone who experiences a frequent or nighttime cough when not sick, shortness of breath, or wheezing should be seen by a doctor to determine if it is asthma. The doctor will ask questions about your symptoms, when you experience them and for how long, and the doctor might test your lungs using spirometry. This requires you to breathe very hard and fast into a tube and a machine records how your lungs are doing.

The doctor can also provide you with an asthma action plan. An asthma action plan uses the colors of a stoplight – green, yellow, and red – and tells you and your caregivers what to do when you have trouble with your asthma. Often, doctors will give patients a peak flow meter to measure how well they are breathing.

[Show the two types of asthma action plans and the sample peak flow meter provided]

The green, yellow, and red zones of an asthma action plan correspond to different peak flow values. There are many different types of peak flow meters and asthma action plans, but they all work the same way.

3. If my son/daughter is diagnosed with asthma, will he/she ever grow out of it?

Answer:

No. People with asthma will always have lungs that are sensitive to asthma triggers. Symptoms of asthma can get better as your child ages, but your child will always have asthma and should take care to avoid asthma triggers and have medicine on hand.

4. What medicines are used to treat asthma—and are they safe?

Answer:

Everyone with asthma should have a medicine that treats asthma symptoms after they have started. This is often called a "reliever" medicine or a "rescue" medicine. Many people with asthma also need to take a **daily** medicine called a "controller" medicine. This medicine prevents asthma symptoms by

ECHO #13 (Asthma) Q & A: Final September 12, 2005 Page 1 of 3 preventing swelling in the airways of the lungs. Most asthma medicine is inhaled either through an inhaler *(show different types of inhalers)* or with a machine that vaporizes liquid (called a nebulizer) which can then be inhaled.

[If you have time, you can add this part--]

Some types of inhalers should be used with a spacer. This allows more medication to reach the lungs and can reduce side effects from the medicine. The best type of spacer is a valved holding chamber *(show sample)*. All asthma medicines are safe when prescribed by a doctor.

5. Should people with asthma limit their activities to avoid asthma symptoms?

Answer:

If someone is experiencing asthma symptoms, cough, shortness of breath, or wheezing, they should limit their activities and take their medications. But everyone with asthma should be able to participate in all activities. By taking medication as the doctor instructs and by avoiding triggers, people with asthma can be as active as anyone else. There are Olympic athletes who have asthma. If you have asthma, share your goals with your doctor and together you can work to control your asthma and achieve your goals.

6. Do people die from asthma?

Answer:

Though it is very rare, people do die from asthma. In fact, just last month, a 13-year old boy in Minnesota died from asthma. Asthma symptoms can get worse very quickly for some people. It is important to know what to do when an asthma episode begins and to know how to prevent asthma episodes.

Some signs of a life-threatening asthma episode are—

- the person's nails or the area around the lips turn blue or ashy
- they are having difficulty speaking, walking or drinking
- they are making a lot of effort to breathe
- the muscles show in the neck and throat or the ribs show through the chest
- the nostrils are open very wide to breathe
- they are very scared, confused, or not totally conscious.

If you observe a person with these symptoms, call 911 and get the person to care immediately. Anyone with asthma should create a plan with their healthcare provider about what to do when an asthma flare-up begins.

7. What are the most common asthma triggers? How can they be avoided?

Answer:

Asthma triggers are different for every person. But when we look across the whole population, several things are most common. The number one asthma trigger is viral infections, like the common cold. The best way to avoid getting such infections is to wash your hands often during the day. Other common triggers are ragweed, which comes out in late summer and early fall; and dust mites, which live wherever there is dust. Mold, cockroaches, and perfumes can also bring on asthma symptoms. If ragweed is a trigger, avoid it by limiting outdoor play during late summer and fall. Keep windows closed as much as possible in the house. Dust mites can be controlled by keeping humidity low inside your home, using mattress and pillow covers, and washing your bedding.

8. Is there a connection between tobacco smoke and asthma?

Answer:

Tobacco smoke is a very strong trigger for people with asthma. Research studies have shown that people with asthma should not be around smoke at all. Even if someone is not smoking, the smoke and the odor linger on clothes, upholstery, and in the air. Just by smelling the smoke, a person with asthma can begin experiencing symptoms. Doctors and other health care providers can help people to quit smoking.

Smoking can also to lead to other chronic lung conditions other than asthma. Chronic Obstructive Pulmonary Disease (COPD), which includes emphesema, chronic bronchitis, and bronchiectasis, is a common disease caused primarily by smoking. In this condition, the lungs are permanently damaged by the tobacco smoke. A person with the disease will have a harder and harder time breathing and may eventually require a constant supply of oxygen. Anyone who smokes is at very high risk of developing COPD or lung cancer.

HOSTS: If you have time left, you can also ask the following question--

9. I've heard people say that asthma is an emotional or psychological problem. Is this true? Answer:

No. Asthma is a physical disease of the lungs and not related to any psychological or emotional problem. However, stress or strong emotions can be asthma triggers, causing asthma symptoms to get worse. This is because of how strong emotions like laughing or crying or shouting affect your breathing. And stress can make many health conditions worse because it affects every part of your body.