



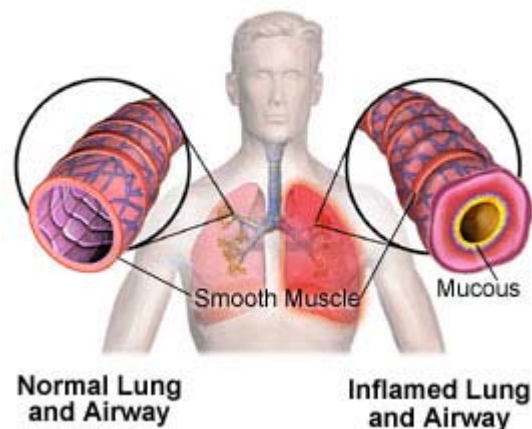
Patient Name: Samantha May
Caregiver Name: Brenda Casey, RN

ASTHMA

GENERAL INFORMATION:

What is it?

- Asthma (AS-muh) is a long-term illness that causes the airways of the lungs to be irritated, make mucus, and to swell. You may have some airway swelling all the time, even when you feel OK. Your airways may also become smaller causing you to have breathing problems or to wheeze. Wheezing is a loud noise you hear when you breathe in or out. An asthma attack happens when your airways narrow making it hard to breathe. Asthma attacks are also called flare-ups, exacerbations (eks-as-sir-BA-shuns), or episodes (EP-uh-sodes).
- There is no cure for asthma, but over time and working with your caregiver, it can be controlled. Medicines can control the airway swelling. You will learn to stay away from things that bother your airways, such as tobacco smoke. Your asthma may change with time. You may get new allergies or your asthma may get better or worse. Your treatment plan may need to be changed if your asthma changes. Controlling your asthma will let you keep doing your usual activities. Asthma can be managed and you should be able to live a normal life.



Causes: The following may be possible causes of an asthma attack.

- Air pollution.
- Animals.
- Cold weather.
- Dust.
- Exercise.

- Foods.
- Lung infections.
- Molds.
- Pollens.
- Smoke.
- Stress.

Signs and Symptoms: Most people with asthma have warning signs before symptoms appear. The warning signs are not the same for everyone. Your own warning signs may even be different from time to time. By learning what your warning signs are, you can start treatment sooner. This may keep you from having a serious asthma attack. Following are some of the warning signs of asthma or signs of an asthma attack.

- Breathing faster than normal.
- Breathing trouble.
- Cough which may be worse at night or early morning.
- Drop in peak flow reading.
- Fast heartbeat.
- Head "stopped up."
- Itchy, scratchy, or sore throat.
- Short of breath.
- Tight feeling in the chest.
- Tired.
- Wheezing.

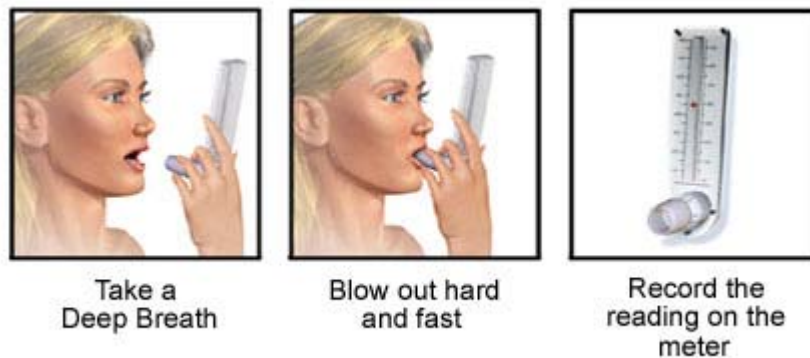
What are the 4 levels of asthma?

- **Intermittent (in-ter-mit-unt):** This is the least serious level of asthma. At this level a person has asthma symptoms no more than 2 times a week. He will also not be awakened at night with asthma symptoms more than 2 times a month. An asthma attack may last from a few hours to a few days. A person at this level will not have symptoms between asthma attacks. Between asthma attacks the peak expiratory (eks-PIE-ruh-tor-e) flow or "PEF" is normal. The PEF is a measure of airflow to your lungs. A peak flow meter is used to get a PEF reading. The PEF reading will vary by less than 20%.
- **Mild persistent (per-SIS-tunt):** A person at this level has asthma symptoms more than 2 times a week but not every day. He will have nighttime asthma symptoms more than 2 times a month. An asthma attack may slow his daily activities. The PEF reading will vary by 20% to 30%.
- **Moderate persistent:** A person at this level has asthma symptoms every day. He will use a short-acting inhaled asthma medicine every day. He will have nighttime asthma symptoms about once a week. Asthma attacks may happen at least 2 times a week and last for many days. At this level, asthma attacks get in the way of a person's daily activities. The PEF reading may vary by more than 30%.
- **Severe persistent:** This is the most serious level of asthma. A person at this level has asthma symptoms all the time. These symptoms limit a person's physical activity. Asthma attacks are

common as well as nighttime symptoms. The PEF reading may vary by more than 30%.

Care: You and your caregiver will make a plan to treat your asthma. You may need any or all of the following to control your asthma:

- Allergy testing.
- Medicine to control the swelling of your airways. Following are the 2 groups of asthma medicines.
 - **Long-term control medicines.** These medicines are taken every day to control persistent asthma by decreasing inflammation (in-fluh-MA-shun). Inflammation is when your airways swell and tighten. This group of medicines may also keep airway swelling from starting. Inhaled steroid (STAIR-oid) medicine is used to decrease the inflammation. This medicine is put into an inhaler through which you breathe.
 - **Quick-relief medicines.** These medicines are taken to quickly open your airways and to treat other symptoms. These symptoms may be cough, chest tightness, wheezing, or shortness of breath. Quick-relief medicines are bronchodilators (bron-ko-DI-la-ters). Bronchodilators relax muscles that have tightened around the airways. This opens the airways to help you breathe easier.
- **Correct use of a peak flow meter.** A peak flow meter is a device that measures how well air moves out of your lungs. A peak flow meter is used to check your asthma the way that a blood pressure cuff is used to check blood pressure. The peak flow meter can be used to learn if there is narrowing in your airways days before you have asthma symptoms. Using the peak flow meter **correctly** will help you better monitor and manage your asthma. Ask caregivers for the peak flow meter CareNotes™ handout.



- Learn to watch for signs that your asthma is getting worse and what to do to stop an asthma attack.
- You can usually care for yourself at home during an asthma attack. If your breathing does not get better with medicine or treatments, you may need to go into the hospital. Treatment may include oxygen, medicine, or breathing treatments.

Coping: You may feel scared, confused, and anxious because of your asthma. You may blame yourself and think you have done something wrong. These feelings are normal. Talk about them with your caregiver or with someone close to you. Ask your caregiver about support groups for people with asthma. Such a group can give you support and information. Call or write the following groups for more information:

- American Academy of Allergy, Asthma, and Immunology
 611 East Wells Street
 Milwaukee, WI 53202
 Phone: 1-800-822-ASMA
 Web Address: <http://www.aaaai.org>

- American College of Allergy, Asthma, and Immunology
85 West Algonquin Road, Suite 550
Arlington Heights, IL60005
Phone: 1-800-842-7777
Web Address: <http://allergy.mcg.edu>
- Asthma and Allergy Foundation of America
1233 20th Street NW, Suite 402
Washington,, DC 20036
Phone: 1-800-727-8462
Web Address: <http://aafa.org>
- National Asthma Education and Prevention Program
National Heart, Lung and Blood Institute
National Asthma Education and Prevention Program
P.O. Box 30105
Bethesda, MD20824-0105
Phone: 1-301-592-8573
Web Address: <http://www.nhlbi.nih.gov/health/infoctr/index.htm>
- National Jewish Medical and Research Center
1400 Jackson Street
Denver, CO80206
Phone: 1-800-222-LUNG
Web Address: <http://www.nationaljewish.org/main.html>

CARE AGREEMENT:

You have the right to help plan your care. To help with this plan, you must learn about your health condition and how it may be treated. You can then discuss treatment options with your caregivers. Work with them to decide what care may be used to treat you. You always have the right to refuse treatment.

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Hours of Operation: 8:00am - 6:00pm M-Th, 8:00am - 3:00pm Friday.
Please call (408) 267-4000 during business hours.
Please call (408) 267-3489 after-hours in case of an emergency.

The Grover Medical Group: Dr. Judith Burmeister, Dr. Mark Kleid, Dr. Jeff Levin, Dr. Calvin Madison