

# Controlling Your Asthma



**the asthma foundation**  
Better respiratory health for New Zealanders

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# Controlling your asthma

## How does asthma affect you?

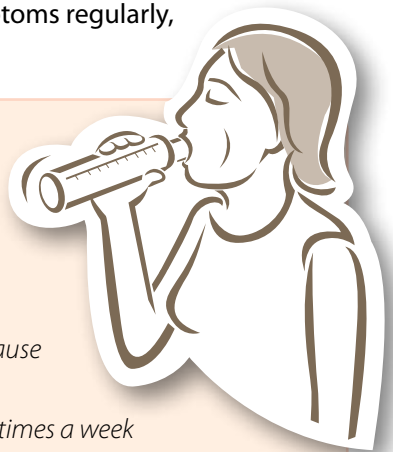
*Asthma affects people in different ways.*

*Some people have asthma symptoms most of the time and forget how it feels to be well. Others have episodes of asthma every few weeks.*

If you experience any of the following symptoms regularly, then your asthma is not under control.

### SYMPTOMS

- Wheeziness
- Coughing
- Having a tight chest
- Waking at night with coughing or wheezing
- Finding it hard to exercise or hurry because of asthma symptoms
- Using your blue inhaler more than 3-4 times a week
- Tiredness



This booklet will teach you how to take control over your asthma. When your asthma is controlled, it won't slow you down, keep you awake or make you afraid.

# STEPS TO ASTHMA CONTROL

There are seven simple steps for controlling your asthma. You will learn about each of them in this booklet:

1 Step one: Know your symptoms and understand YOUR asthma

2 Step two: Know how your medicines work

3 Step three: Take your preventer and symptom controller every day

4 Step four: Know your triggers and avoid them where possible

5 Step five: Use a peak flow meter and/or a symptom diary

6 Step six: Understand and follow a Self Management Plan

7 Step seven: Keep in touch with your doctor



## 1

# Know your symptoms and understand your asthma

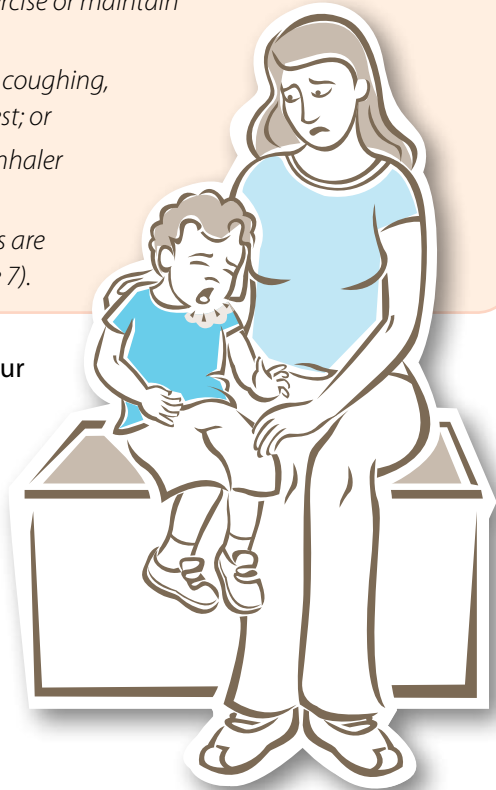
*Asthma can sneak up on you slowly. It is very important to recognise early symptoms so that you can prevent an attack.*

Some early warning signs

**WARNING SIGNS**

- You are more aware of your asthma during the day; or
- It is more difficult to exercise or maintain your daily activities; or
- You wake at night with coughing, wheezing or a tight chest; or
- You need your reliever inhaler more often; or
- Your peak flow readings are up and down (see page 7).

The longer that you ignore your asthma, the harder it is to treat. If you treat your asthma early, you may be able to stop further swelling of your airways. Use your Self Management Plan to help guide your treatment (see page 8).



## 2

# Know how your asthma medicines work

*Asthma medications include preventers, relievers, symptom controllers and prednisone tablets.*

### How do preventers work?

Your preventer is your most important medication, because it treats the inflammation inside your airways, and reduces the likelihood of an asthma attack.

Preventers work slowly. It will take from two weeks to three months for you to appreciate the full benefit of the medicine. Your preventer will help control your asthma for the months ahead. You need to take it regularly, usually twice a day **every day** to get this effect.

Examples of preventer medicines are Beclazone, Flixotide and Pulmicort.

### How do relievers work?

A reliever brings short term relief to your asthma. It relaxes the tight bands of muscle around your airways. This helps air flow in and out more freely.

Take your reliever when you feel tight in the chest or you are coughing or wheezing.

See your doctor or asthma nurse if you are using your reliever more than 3–4 times a week, as this indicates your asthma is not under control. Some examples of reliever medication are: Bricanyl, Respigen, Salamol and Ventolin.



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## How do symptom controllers work?

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A symptom controller is a long acting reliever. It is taken twice a day to keep the airway muscle relaxed and it lasts twelve hours. Symptom controllers are used in addition to the preventer inhaler. They DO NOT replace preventers, which MUST be taken at the same time. Some examples of symptom controller medicines are Foradil, Oxis and Serevent.

Symptom controllers help people who wake with asthma at night or who have difficulty when exercising. They should not be used for immediate or emergency use. A reliever may still have to be used occasionally.

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## How do combination inhalers work?

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Combination inhalers contain both preventer and symptom controller medicine in one device. They should be taken regularly as prescribed. Symbicort may be used in an emergency situation. Examples of combination inhalers are Seretide, Symbicort and Vannair.

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## How do prednisone tablets work?

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Prednisone medicine is used in severe episodes of asthma. It works slowly over several hours to reverse the swelling of the airways.

Prednisone needs to be continued for several days after your asthma symptoms settle to make sure that the swelling doesn't return.

Your doctor may use your peak flow record and symptom diary as a guide to reduce and stop the prednisone tablets. If you stop too early your asthma may get worse again.

A short course of prednisone is safe with no lasting side effects. Discuss possible short-term side effects and any other concerns with your doctor. Some people notice a change in mood, energy level or appetite. The side effects of prednisone are usually mild.

If you need prednisone tablets more than twice a year, your asthma is not under control. Talk to your doctor about your options. You may need to review your Self Management Plan or visit a specialist.

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## Take your preventer and symptom controller every day

*If you are prescribed preventer medication, you **MUST USE YOUR PREVENTER INHALER EVERY DAY**, even if you feel fine and are not wheezing.*

REMINDERS

Take your preventer and symptom controller at the same time every day to help you remember. Some good reminders are:

- before brushing your teeth, so that you can gargle with water afterwards; or
- mealtimes or tea and coffee breaks; or
- when your alarm clock buzzes in the morning

Always clean your teeth or rinse your mouth after taking preventer medication.



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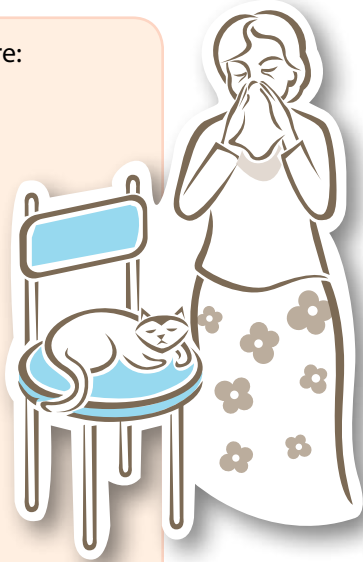
## Know your triggers and avoid them where possible

*A trigger is something that makes your asthma worse. Asthma is easier to handle when you can identify your triggers and avoid them where possible.*



Some common asthma triggers are:

- *Cigarette smoke*
- *Colds and flu*
- *Weather changes*
- *Strong emotions*
- *Allergies – dust mites, pets, pollens, etc.*
- *Exercise – People often have asthma when they exercise especially if the air is dry, cold or they are unfit. However when people are active they usually find they have less asthma and can control it better in time.*

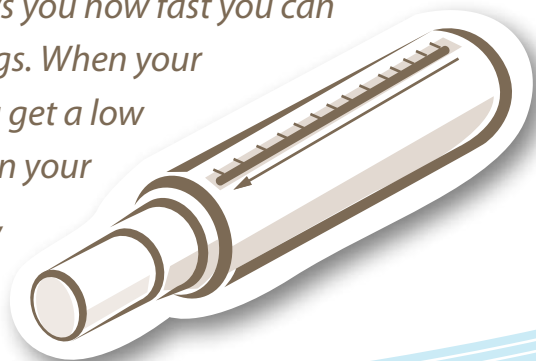


Some triggers are easily avoided and others take a bit of planning. For extra tips, read the booklet *Triggers in Asthma* (available from your local Asthma Society, doctor or nurse.)

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Use a peak flow meter and/or a symptom diary

*A peak flow meter shows you how fast you can blow air out of your lungs. When your airways are swollen you get a low peak flow reading. When your airways are not swollen, the reading increases.*



You can use regularly recorded readings along with your symptoms to decide when to change your treatment. Your Self Management Plan will guide you. Get to know your best peak flow rate and try to maintain it.

You can get a peak flow meter free from your doctor.

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## Understand and follow a Self Management Plan

*A Self Management Plan teaches you how to change your treatment to control your symptoms.*

Research shows that people who follow Self Management Plans control their asthma better than people who don't.



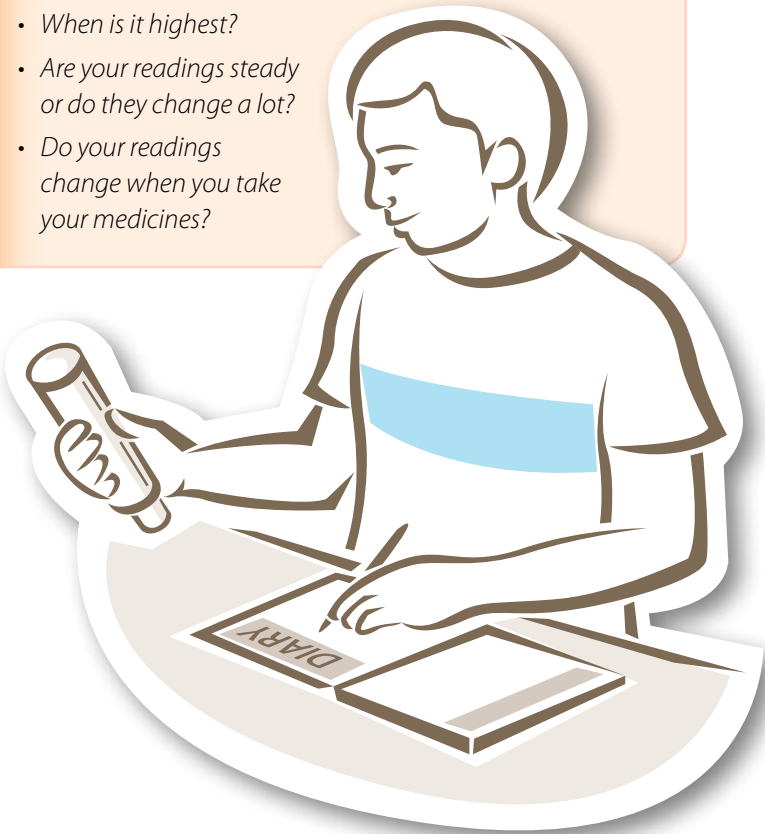
## Preparing for a Self Management Plan

Before you use a Self Management Plan you need to know your asthma well. Keep a two – three week diary of your asthma symptoms and medicine use. Record your results in the morning and in the evening.

### RECORD SYMPTOMS

1. Record your symptoms and peak flow readings.  
You may begin to see a pattern.

- *What time of day is your peak flow reading lowest?*
- *When is it highest?*
- *Are your readings steady or do they change a lot?*
- *Do your readings change when you take your medicines?*



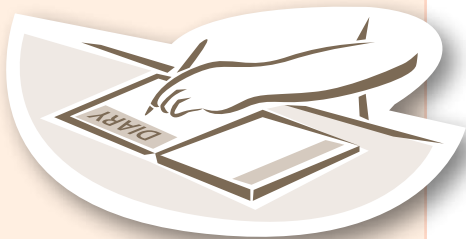


## 2. Record your medicine use and any extra information.

For example:

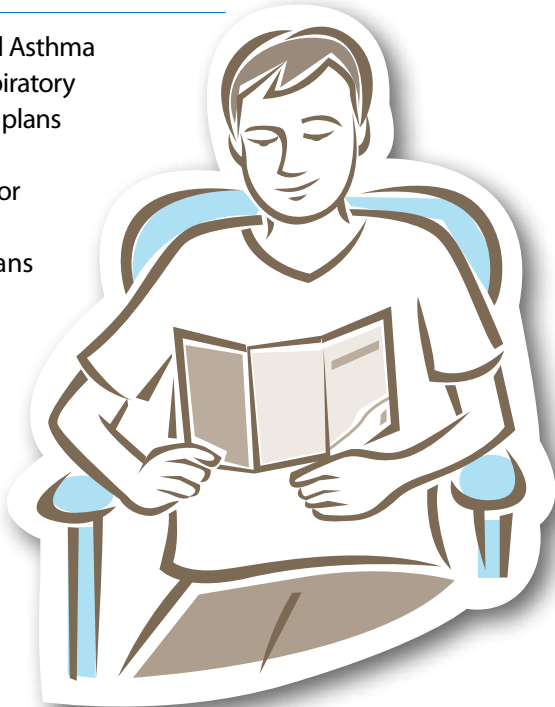
- *How many puffs per day?*
- *Any tablets?*
- *How do you react to these medicines?*

When you show your doctor or asthma nurse your diary, they will write a plan to maximise the benefits of your medicine.



## Ask for a Self Management Plan

Contact your doctor, nurse, local Asthma Society, or the Asthma and Respiratory Foundation on 04-499-4592. All plans must be signed by a doctor and reviewed regularly (once a year or more often for children after a growth spurt). Child Asthma Plans are also available for young children. COPD Management Plans are available for people with Chronic Obstructive Pulmonary Disease.



## 7 Keep in touch with your doctor

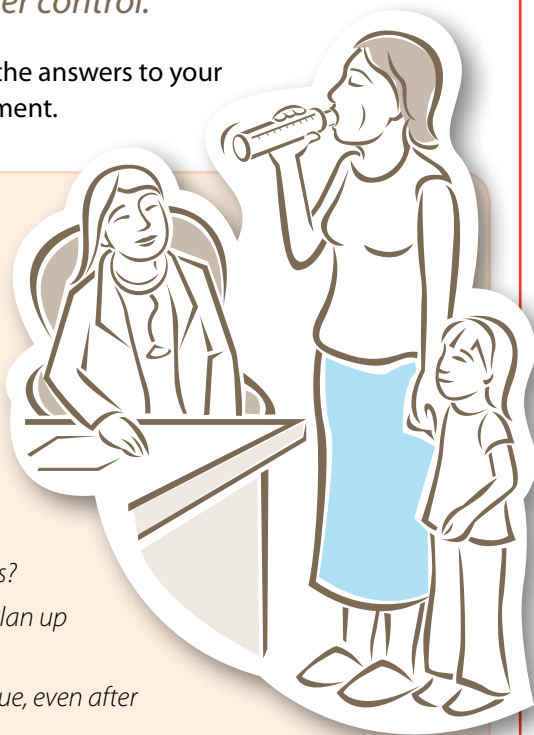
*Many people with asthma only visit the doctor when they are unwell. You should also visit your doctor while you're well to discuss the pattern of your asthma, what triggers it and how to keep it under control.*

It is a good idea to write down the answers to your questions during your appointment.

### THINGS TO REVIEW

Other things you can review are:

- *What times should I take my medication?*
- *How many puffs should I take?*
- *Can I alter these doses as I learn to control my asthma better?*
- *Might there be side effects?*
- *Is my Self Management Plan up to date?*
- *Checking inhaler technique, even after years of use.*
- *Using a spacer with your Metered Dose Inhaler so that 50% more medicine will reach your lungs.*



Ask your doctor if the practice nurse or asthma educator can also offer assistance. Your local asthma society has free information and support services.

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### 🌀 Taking control feels good

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Work through the seven simple steps and take charge of your health. Don't let poor health control your life.





# Your local affiliated Asthma Societies

