

Asthma action plan

How to regain control when symptoms worsen

by **Dr. Abraham Born**

LIVING WITH ASTHMA teaches you how to avoid the many things that might trigger an attack. You also develop a medication regimen that allows you to function normally and relieve symptoms when they occur. But the fear of a severe attack that causes chest tightness and choking and requires an emergency department visit never really disappears. Your best defense: be prepared. Establish a treatment plan and learn to recognize when your asthma control is slipping away.

Many people with asthma succeed in finding and maintaining strategies that keep their asthma under control. Control should never be taken for granted. Asthma exacerbations occur when the frequency and severity of symptoms and attacks worsen and require urgent medical intervention. Your medication may not be as effective as usual and you may not even realize that your breathing is worsening until you suffer a severe attack.

Be prepared!

Although asthma can't be cured, you can reduce the number of asthma attacks by reducing your exposure to triggers (see Triggers box), reviewing your medication schedule with your doctor and establishing an action plan that allows you to recognize and deal with exacerbations. It's important to review your plan often and discuss it with your physician and family. Even though 59% of people have an action plan, only 11% remember what to do during a flare up of asthma symptoms.

If exacerbations aren't addressed, a severe asthma attack (see below) could become life threatening. If you think your asthma might be getting worse, talk to your physician. There are tools and strategies that can help you monitor your symptoms and your response to medication so you know if extra measures are needed. ▶

COMMON TRIGGERS

- Household dust
- Mold
- Grass
- Tree and flower pollen
- Perfumes
- Inhaled primary and second hand smoke
- Cats, dogs and other household pets
- Smog and air pollution

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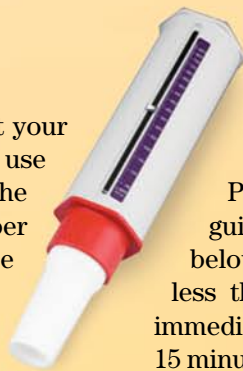
AN ASTHMA ATTACK

Symptoms are caused as the airways become inflamed and narrow. They include:

- Shortness of breath
- Wheezing
- Chest tightness
- Coughing
- Chest pain

Measure your lung function

Peak flow meter readings can warn you that your asthma is worsening. The device is simple to use and costs about \$20. When you blow into the mouthpiece with maximum effort, a number appears indicating your airway performance at that moment. Regular use and recording of these readings allows you to notice changes in your lung function. A drop of 50% or more from your baseline or normal value is considered a severe attack.



An action plan

If your asthma control is deteriorating, you'll want to establish a clear action plan before you suffer a major attack.

When an attack strikes, follow these steps to help relieve symptoms and monitor your response to medication:

Step 1. Remove the offending stimulus, like smoke, dust or the household pet that's causing the attack.

SIGNS OF EXACERBATIONS

- You need extra medication to control your asthma
- An asthma attack has brought you to the emergency department
- You've had complications caused by your medication
- Low oxygen due to asthma has caused disturbances like extra heart beats or mental confusion

Step 2. Administer your medications.

Step 3. Assess how well they worked to improve your symptoms.

Try keeping a small notebook with you, and make notes on what factors may have caused your attack, how many puffs you took on your bronchodilator and how many minutes passed before you felt better.

Regain control


Most asthma exacerbations are relatively mild and can be treated with your inhaled medications or a short course of oral corticosteroids. It's essential to follow up with your physician after a severe attack as he or she can guide you on how to re-establish asthma control. Most likely, your daily dose of inhaled corticosteroids as well as the dose and frequency of inhaled bronchodilators will be increased gradually. Your bronchodilator technique may also need correction.

How to know?

Many people cannot objectively assess their asthma severity, so it's best to rely on your Peak Expiratory Flow (PEF) values. Canadian guidelines suggest that when you get a reading below 25% of your best PEF measure, or a value of less than 100 mL/min, you should seek attention immediately. A PEF less than 40% or 200 L/min, five to 15 minutes after using your inhaler signals an obstruction of the airway or respiratory muscle weakness and will likely require hospital admission. The hospital staff's decision to admit you will depend on a number of factors, including your response to emergency treatment, past exacerbation severity, caregiver availability and supervision, and your home environment.

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Knowledge is the best medicine

It's easy to underestimate the severity of your asthma condition, so use the resources around you to ensure ongoing control. Contact your family physician after severe attacks and keep a record of your lung function and response to medication. A recent Canadian study showed that nearly half of people with poorly controlled asthma who used inhaled steroids didn't understand the role of their medication, and 32% of those who used short-acting bronchodilators misunderstood the quick-relief action of these meds. A certified asthma educator (CAE) can help you understand asthma and stay on top of your symptoms. 

ARE YOU HIGH-RISK?

You're considered a high-risk patient if you...

- Are frequently admitted to the hospital
- Often show up at the ER.
- Have a recent steroid tablet prescription
- Have multiple asthma medications,
- Have had a life-threatening asthma attack
- Use inhaled short acting beta-agonists excessively (more than two puffs, four times a day)