

# **GINA Patient Guide**

#### YOU CAN CONTROL YOUR ASTHMA

## YOU CANNOT CURE ASTHMA, BUT YOU CAN CONTROL ASTHMA.

People with asthma can have normal, active lives when they learn to control their asthma.

When your asthma is under control:

- You can work, play, and go to school.
- You can sleep well at night.
- You can avoid most asthma attacks.







All over the world, many people have asthma.



#### PEOPLE HAVE ASTHMA FOR MANY YEARS.

People with asthma can have trouble breathing.

They have asthma symptoms and asthma attacks that come and go.

These are signs of an asthma attack.







Some asthma attacks are mild.

People can die from a bad asthma attack.



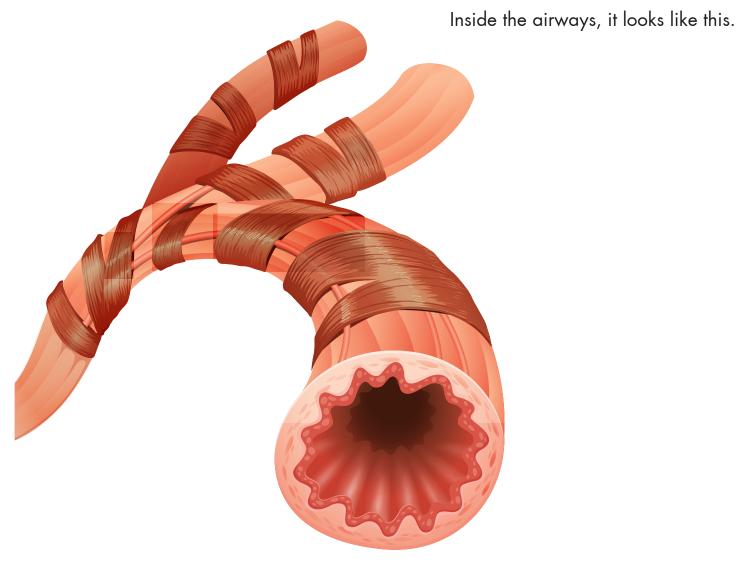
People with asthma may wake up at night because of coughing or trouble breathing.

#### ASTHMA IS A DISEASE OF THE AIRWAYS IN THE LUNGS .

You can get asthma at any age. Asthma is not a contagious disease.

You can not catch asthma from other people. Asthma is not caused by one single factor. There are different types of asthma. In some types of asthma, several family members may have asthma, but this is not seen in some other types of asthma.

Airways carry air to the lungs. Airways get smaller and smaller like branches of a tree. When asthma is under control, the airways are clear and air flows easily in and out.



# WHEN ASTHMA IS NOT UNDER CONTROL, THE WALLS OF THE AIRWAYS IN THE LUNGS ARE ALWAYS THICK AND SWOLLEN. AN ASTHMA ATTACK CAN HAPPEN EASILY.

During an asthma attack, less air can get in and out of the lungs.

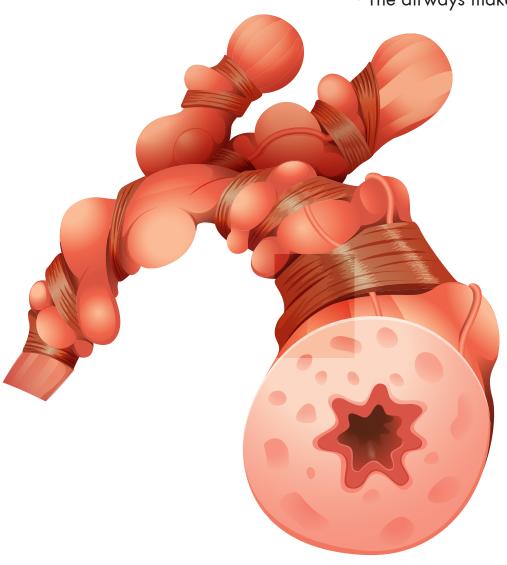
People cough and wheeze. The chest feels tight.

During an asthma attack, it looks like this inside the airways of the lungs.

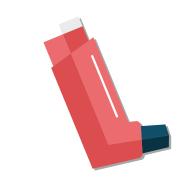
· The sides of the airways get even more swollen.

· The airways get squeezed.

· The airways make more mucus than normal.



### HOW TO CONTROL YOUR ASTHMA AND KEEP ASTHMA ATTACKS FROM STARTING:



1. Make sure you know how to use your inhaler correctly, and use it as often as the doctor says.



2. Go to the doctor at least once a year for check-ups, or right away if you have had an asthma attack or flare up of symptoms. Go even when you feel fine and have no breathing problems.



3. Ask for a written asthma action plan so you will know when your asthma is getting worse and how to respond.



4. Stay away from things that start your asthma attacks.

#### MOST PEOPLE WITH ASTHMA NEED TWO KINDS OF MEDICINE.

1. Preventive medicines ("controllers") protect the lungs & keep asthma attacks from starting. They reduce the swelling and mucus in your airways.

Controllers contain a low dose of an inhaled corticosteroid. These medicines are extremely safe as, at usual doses, only very small amounts are absorbed from the lung. They are sometimes combined in the same inhaler with a long-acting reliever-type medicine. Controller medicines are sometimes increased when your asthma symptoms get worse. Your doctor will tell you if your controller inhaler can be adjusted in this way.

- 2. Quick-relief medicines ("relievers") are used to relieve asthma symptoms when they occur. In the past, most reliever inhalers contained only a "bronchodilator" medicine. These relieve your asthma symptoms but they do nothing to reverse the inflammation (swelling) in your airways that is causing the increased symptoms. It's like taking a pain killer for a toothache the pain goes away but you still have a cavity. If your reliever inhaler contains only a bronchodilator medicine, you should also be taking a regular daily controller inhaler to protect you from having asthma attacks.
- 3. Some reliever inhalers contain both a low dose controller AND a quick-relief long-lasting medicine called formoterol. They can be used both to relieve your symptoms and as your controller inhaler taken every day, to protect you from having asthma attacks.
- 4. For people with mild asthma (for example with asthma symptoms a few times a week or less often) taking one of these combination reliever inhalers (controller AND formoterol) whenever you have asthma symptoms gives just as good protection from asthma attacks as taking a regular daily controller. This is a new recommendation in GINA in 2019, based on the results of some large research studies.
- 5. However, if you have more frequent asthma symptoms, or if your reliever inhaler does not contain any controller medicine, it is very important to continue to take a controller medicine every day, even when you feel well.

Ask your doctor which way of using these asthma medicines is available in your country and is best for your asthma.

#### PREVENTIVE MEDICINES FOR ASTHMA ARE SAFE TO USE EVERY DAY.

- You cannot become addicted to preventive medicines for asthma even if you use them for many years.
- Preventive medicine makes the swelling of the airways in the lungs go away.
   They do not become less effective overtime and so you should not be worried about them not working if you take them everyday.



- The doctor will usually tell you to take your preventive medication every day:
  - · If you cough, wheeze, or have a tight chest more than twice a week
  - · If you wake up at night because of asthma
  - · If you have many asthma attacks
  - · If you have to use quick-relief medicine more than twice a week to stop asthma attacks.
- If you are pregnant, do not stop your asthma medication consult your doctor.
   Most asthma medications are safe during pregnancy and keeping your asthma under good control will help protect your child.

Always carry your quick-relief asthma medicine with you when you leave home.



### ASK THE DOCTOR TO WRITE DOWN WHAT ASTHMA MEDICINES TO TAKE AND WHEN TO TAKE THEM.

- The doctor may use an asthma action plan, like the one in this book.
- Use the asthma action plan to know what quick-relief medicines to take when you have asthma symptoms or an asthma attack.
- Use the asthma action plan to help remember what preventive medicines to take every day.
- Use the asthma action plan to see if you should take asthma medicine just before sports or working hard.

• For a more severe asthma attack your doctor may give you a prescription for a short course of corticosteroid tablets. Such a treatment may be lifesaving but it's best to avoid the need by ensuring good day to day





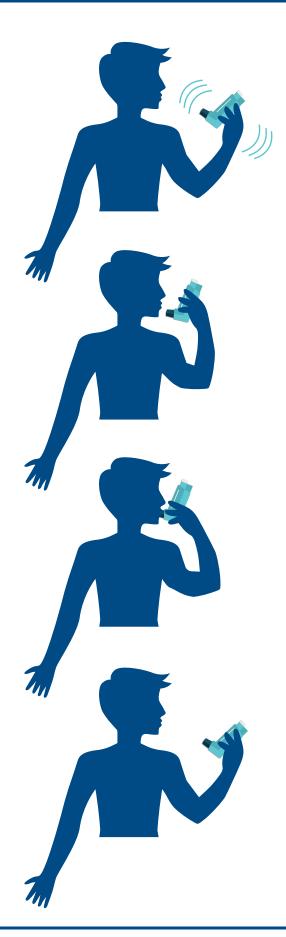
#### AN ASTHMA ACTION PLAN

	Phone:	
Bring this action plan to your doctor/nurse at each visit.	Action plan updated: M / D	/Y
Doctor's Contact Details:	-	
Nurse/Educator Details:	YOUR EMERGENCY CONTACT PERSON	
	Name:	
In an emergency call:	Phone:	
OR CALL AN AMBULANCE IMMEDIATELY.	Relationship:	
You need your reliever inhaler less than 3 times per week, you activities (including exercise)	u do not wake up with asthma and, your asthma does no (If used, peak flow o	· ·
Your controller medication is:	(name)	(strength)
Take: puffs/tablet		
Use a spacer with your controller inhaler		
Your reliever/rescue medication is:	(name)	(strenath)
Take puffs if needed to relieve asthm		(
Use a spacer with your reliever inhaler		
Other medications: (r	ame) (strength)	(how often)
(n	ame) (strength)	(how often)
Before exercise take:(r	ame) (strength) (how ma	any puffs/tablets)
IF YOUR ASTHMA IS GETTING WORSE You need your reliever more often than usual, you wake up to because of your asthma	vith asthma, or you cannot do your normal activities (inclu (If used, peak flow between a	-
Take your reliever/rescue medication:		
Use a spacer with your controller inhaler	. , , , , , , , , , , , , , , , , , , ,	,
Take your controller medication:	(name)	(strength)
Take: puffs/tablet	times EVERY DAY	
☐ Use a spacer with your reliever inhaler ☐ Contact your doctor		
Other medications: (nar	e) (strength)	(how often)
IF YOUR ASTHMA SYMPTOMS ARE SEVERE You need your reliever again more often than every 3-4 hou (if used, Peak Flow underL/min)	s, your breathing is difficult, or you often wake up with as	sthma
Take your reliever/rescue medication:	(name) (strength)	(how often)
Take prednisone/prednisolone:	(name)	(strength)
Take: tablet t		
CONTACT A DOCTOR TODAY OR GO TO THE EMER	, ,	,
Additional comments:		

#### ASTHMA MEDICINE CAN BE TAKEN IN DIFFERENT WAYS.

When asthma medicine is breathed in, it goes directly right to the airways in the lungs where it is needed. Inhalers for asthma come in many shapes. Some are sprays and some are powder.





Remember to breathe in slowly.

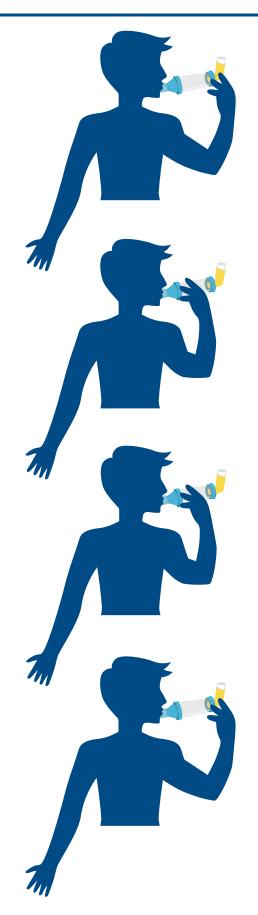
1. Take off the cap. Shake the inhaler.

2. Stand up. Breathe out away from the inhaler.

3. Put the inhaler in your mouth.
As you start to breathe in,
push down on the top of the inhaler
and keep breathing in slowly.

4. Hold your breath for 5 seconds. Breathe out.

### A SPACER OR A HOLDING CHAMBER MAKES IT EASIER TO USE A SPRAY INHALER.



1. Put the spacer into your mouth. Breathe out into the spacer, then press on the top of the inhaler to spray one puff into the spacer.

2. Then take a deep breath to breathe in the air in the spacer. Hold it for 5 seconds.

3. Breathe out into the spacer.

4. Repeat steps 1 to 3 to take the total number of puffs you have been prescribed.

There are many kinds of spacers.

Some have a mouth piece. Some have a face mask.

### MANY THINGS CAN START ASTHMA ATTACKS. THESE THINGS ARE CALLED "TRIGGERS":



ANIMALS
WITH FUR,
if you are
allergic to them



CIGARETTE SMOKE



**SMOKE** 



DUST IN BEDS AND PILLOWS

if you are allergic to house dust mites



DUST FROM SWEEPING



STRONGS SMELLS AND SPRAYS



POLLEN FROM TREES AND FLOWERS

if you are allergic to them



THE WEATHER



RUNNING, SPORTS AND WORKING HARD



**COLDS** 



#### WORKPLACE

Some people find their asthma is made worse from work related exposures. If this is the case for you, talk to your doctor as seeing a specialist may be helpful in this case

Different people with asthma respond to different triggers. Know which ones start asthma attacks for you.

### KEEP TRIGGERS THAT START YOUR ASTHMA ATTACKS OUT OF YOUR HOME.



 No smoking or vaping. Get help to quit smoking or vaping. Smoking damages your lungs and can reduce how well your controller medication works. Vaping can cause acute respiratory problems and its long-term effects are unknown.



 If your asthma attacks are triggered by strong smells or perfume, keep these out of the home. No soap, shampoo, or lotion that smells like perfume.
 No incense.



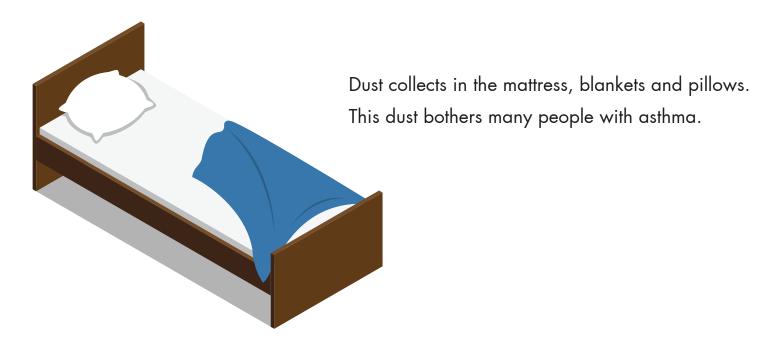
If you are allergic to animals with fur,
 keep them outside, and ask someone else
 to change their bedding or litter.

### CONSIDER MAKING SPECIAL CHANGES TO THE ROOM WHERE THE PERSON WITH ASTHMA SLEEPS.



- Do not let animals on the bed or in the bedroom.
- No smoking or strong smells in the bedroom.





- Consider putting special dust-proof covers with zippers on the mattress, quilt and pillow.
- Do not use a pillow or a mattress made of straw.
- Wash sheets and blankets often in very hot water. Put them in the sun to dry.





- Open windows wide when it is hot or stuffy, when there is smoke from cooking, when there are strong smells and when the floor is being vacuumed.
- If you heat or cook with wood, kerosene or gas, keep a window open a little to get rid of fumes.
- Close windows when the air outside is full of exhaust from cars, pollution from factories, dust, or pollen from flowers and trees.



### PLAN TO DO THESE CHORES WHEN THE PERSON WITH ASTHMA IS NOT THERE:

- Sweep, vacuum, or dust
- Paint
- Spray for insects
- Use strong cleaners
- Cook strong smelling foods.
- Air out the house before the person with asthma returns.



#### REGULAR PHYSICAL ACTIVITY IS GOOD FOR PEOPLE WITH ASTHMA



Running, sports, or working hard can also cause asthma symtoms in some asthmatics.



But these activities are good for you.

Use your controller medication as prescribed to reduce the chance of you getting asthma symptoms when you exercise.



Your doctor may also tell you to take your reliever medication about 10 to 15 minutes before exercise. If you need to take your reliever before, during or after exercise, your asthma may be out of control, consult your doctor to see if you need a medication adjustment.

### WHEN YOU KNOW THERE IS ASTHMA IN THE FAMILY, YOU MAY BE ABLE TO REDUCE THE CHANCE OF YOUR BABY GETTING ASTHMA.

- When you are pregnant, do not smoke.
- Keep tobacco smoke away from the baby and out of your home and car.
- Consider putting a special dust-proof cover on the baby's mattress.
- Avoid using antibiotics for the baby unless your doctor says they are necessary.



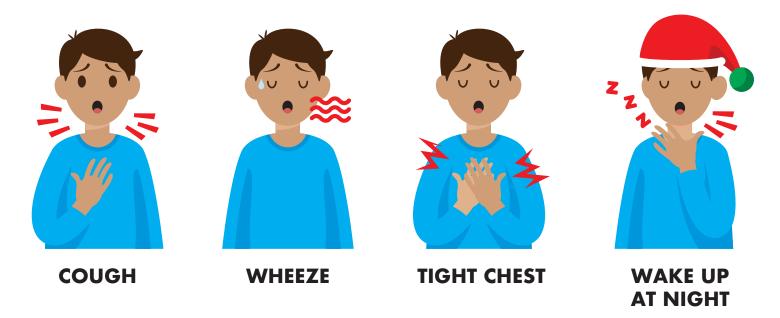
### GO TO THE DOCTOR 2 OR 3 TIMES A YEAR FOR CHECK - UPS. GO EVEN IF YOU FEEL FINE AND HAVE NO BREATHING PROBLEMS.



- Ask questions. Your doctor is your partner in controlling your asthma.
- Tell the doctor about any problems with your asthma or your asthma medicines.
   Asthma may get better or it may get worse over the years, and there are many asthma medicines. The doctor can check how you are taking your inhalers, and whether anything else is making your asthma worse. The doctor may suggest changing the asthma medicine or how much you take.
- It is important to measure your breathing capacity intermittently. This can be done with a simple peak flow meter but it is better to have a simple but more accurate spirometry breathing test done.
- If your asthma control is not good despite you taking your controller medications
  correctly and regularly, your family doctor will likely need to refer you to a specialist.
  There are now some completely new types of asthma medicines given by injection that
  can be very helpful for patients who have frequent asthma attacks which require
  corticosteroid tablets.

### KNOW THE SIGNS YOUR ASTHMA IS GETTING WORSE AND HOW TO RESPOND.

• Be alert for asthma symptoms.

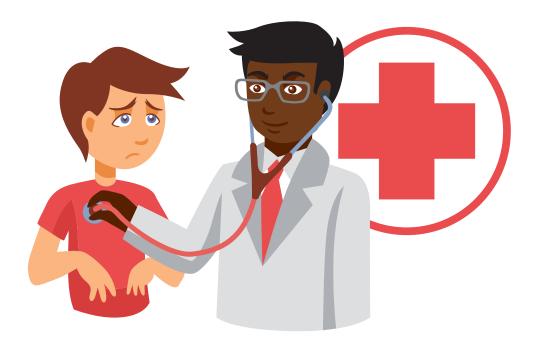


Act fast if an asthma attack starts.

- Move away from the trigger that started the attack, if you know what it was.
- Take a quick-relief asthma medicine.
   Your doctor will tell you which one to use for relief.
- Stay calm for 1 hour to be sure breathing gets better.



### GET EMERGENCY HELP FROM A DOCTOR IF YOU DO NOT GET BETTER OR IF YOUR ASTHMA IS GETTING WORSE FAST.



Get help **straight away** if you see any of these asthma danger signs:

- Your quick-relief medicine does not help for very long or it does not help at all.
   Breathing is still fast and hard.
- It is hard to talk because of your asthma.
- Lips or fingernails turn grey or blue.
- The nose opens wide when the person breathes.
- Skin is pulled in around the ribs and neck when the person breathes.
- The heartbeat or pulse is very fast.
- It is hard to walk.



### BE CAREFUL! USING TOO MUCH QUICK - RELIEF MEDICINE CAN HARM YOU.

If your quick-relief asthma medicine contains only a bronchodilator, it will make you feel better for a little while. It may stop the attack. With some attacks, you may think you are getting better but the airways are getting more and more swollen. Then you are in danger of having a very bad asthma attack that could kill you. An action plan will tell you how safe is it to increase your controller treatment to stop asthma symptoms from progressing to a more severe asthma attack.

If your quick-relief asthma medicine contains only
a bronchodilator and you need it more than twice
a week to stop asthma attacks, this means you need
a regular preventive (controller) for asthma or that
your maintenance medication should be revised by
your doctor.

If you need quick-relief medicine more than
 4 times in 1 day to stop asthma attacks,
 you need help from a doctor today.



### A PEAK FLOW METER CAN BE USED AT A CLINIC OR AT HOME TO MEASURE HOW WELL A PERSON IS BREATHING.



- It helps the doctor decide if someone has asthma.
- It helps to see how bad an asthma attack is.
- It helps the doctor see how well asthma is controlled over time.
- It helps you to know what your best readings are when you are well.
- It helps you to tell if your asthma is controlled.

If a peak flow meter is used every day at home, people can find if their asthma is getting worse even before they start to wheeze or cough. Then they will know when more asthma medicine is needed.

There are many kinds of peak flow meters.

#### HOW TO USE A PEAK FLOW METER



Slide the little marker down as far as it will go.
 This sets the meter to zero.



2. Stand up.

Take a big breath with your mouth open.
Hold the meter in one hand.

Keep your fingers away from the marker.



Quickly close your lips firmly around the tube.Do not put your tongue in the hole.

Blow one time as fast and hard as you can.



The marker will go up and stay up.
 Do not touch the marker.
 Find the number where the marker stopped.



5. Write the number on a piece of paper or on a chart.



6. Blow 2 more times.Push the button down each time.Write the number down each time.

7. Write down the highest of the 3 numbers. This is your peak flow.

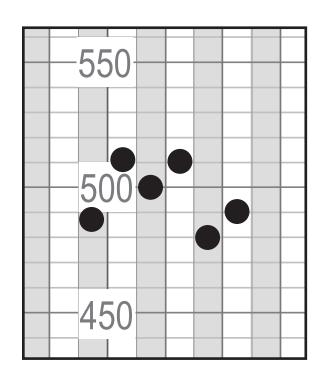
© 2006 Woolcock Institute of Medical Research https://woolcock.org.au/s/Woolcock-peak-flow-chart.pdf

#### HOW TO USE THIS PEAK FLOW CHART.

- Write the start date at the top of the page.
   Each page can hold 8 weeks of peak flow readings.
- 2. For each day (e.g. Su for Sunday), there is a white column for your morning peak flow and a grey column for your evening peak flow.
- 3. Each morning and evening, use a black pen to record the highest of three peak flows. See the previous page for how to measure your peak flow
- 4. You can use the boxes at the bottom to record how many times you have used quick-relief asthma medication.

#### **NOTES:**

- · Always take the peak flow chart with you when you visit your doctor
- · If you miss measuring your peak flow, don't make up a number, just leave a gap.
- Write on the chart if your asthma medicine changed, or you had a cold, or had an asthma attack



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Visit the GINA Website at www.ginasthma.org

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