

## MEDICINES ON DISCHARGE

It is important your child takes the medicines the doctor has prescribed. To keep them safe, for next few days, they will need to take:

**Salbutamol (blue inhaler) with a spacer**

Day	Number of puffs	How often
Day of discharge	10 puffs	Every 4 hours
1	10 puffs	Every 6 hours
2	10 puffs	Every 8 hours

**After this, please use your wheeze plan.**

*Barts Health NHS Trust (2017)*

**Prednisolone (oral steroid):**

Day	Time	Dose

**Regular preventative treatment:**

Name	Dose	How often

**It is very important to make an appointment with your GP two days after being seen in hospital. This is to make sure your child is recovering well.**

### DO

- See your GP in two days
- Keep the wheeze plan somewhere safe, or take a picture on your smartphone
- Keep a blue inhaler and spacer with you all the time. You might need it again.

### DON'T

- Throw away your child's blue inhaler or spacer
- Stop the preventer medicines before seeing a doctor
- Be scared to ask questions if you are worried or want to know more.

## ASTHMA PLANS

You will be given an asthma plan on discharge from the hospital, which tells you when to use the medicines.

When your child is unwell, or you are worried, you can use the asthma plan to know what to do. If you haven't been given one yet, please ask your nurse or doctor.

## MORE INFORMATION

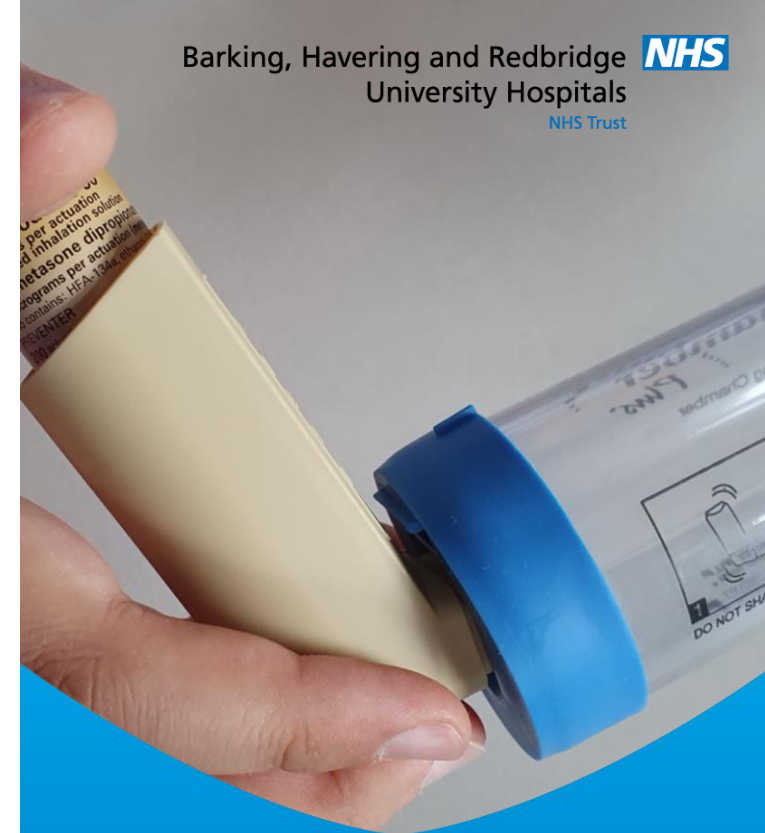
**Asthma UK** has a lot of information that will help you to learn about, and deal with asthma and wheeze. They have a helpline, a website and a Whatsapp helpline: [www.asthma.org.uk](http://www.asthma.org.uk)  
0300 222 5800 | Whatsapp: 07378 606728

## STOP SMOKING:

Smoking around children can cause and worsen breathing problems. For support stopping, visit [stopsmokinglondon.com](http://stopsmokinglondon.com) or call 0300 123 1044 to find out what support is available in your area.

**If you would like this information in an alternative format, or if you need help with communicating with us, please let us know. You can call us on 01708 435 454 or email [bhrut.pals@nhs.net](mailto:bhrut.pals@nhs.net). If you are deaf or unable to communicate with us using telephone or email, we have a text service which can be contacted on 07800 005 502.**

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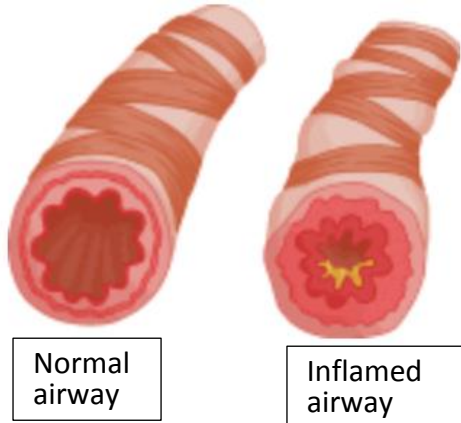


**YOUR CHILD HAD AN  
ASTHMA ATTACK  
AND WAS SEEN IN  
HOSPITAL**

## WHAT IS ASTHMA?

If you have asthma, it means that the smaller airways (breathing tubes) in your lungs are **inflamed**, meaning they are red and sore inside.

When the airways are inflamed, this can cause you to cough, to wheeze (a whistling noise when breathing) or can make breathing harder.



If this worsens, it can lead to an **asthma attack**. During an asthma attack, the breathing tubes have become more swollen, red and sore inside. The tubes have also become tight because the muscles around them are squeezing them from the outside.

Both these things make the space inside the airway smaller and this means the air needs to **squeeze through**, making a wheeze sound. Some people also feel 'tight' or can't catch their breath.

We call things that make this worse '**triggers**', because they can cause the breathing tubes to become more inflamed. **Triggers** are different

for everyone, but could be things like colds, the weather, exercise, dust, pollens, cigarette smoke or air pollution.

## WHAT DOES THIS MEAN FOR MY CHILD?

This means your child will need to take some medicines for as long as they are diagnosed with asthma. Having asthma can be difficult at first, or if things are not under control, but it can be managed easily for most people by taking these medicines in the right way. There are different kinds of medicines that children with asthma should use, to keep them well. They are called preventers and relievers.

## WHAT ARE PREVENTERS?

Preventer medicines work on the lining of the breathing tubes, to help keep the inflammation under control. This means that they help to stop the redness and soreness which causes the symptoms. It is really important to take the preventer every day, even when you feel well. A preventer is usually an inhaler (sometimes called a puffer) which is usually brown or purple. These must be taken through a spacer unless you are told otherwise. Some preventers are taken by mouth and these are usually a chewable tablet.

## WHAT ARE RELIEVERS?

Reliever inhalers work on the muscles around the airways (breathing tubes) to open the tubes. They work by telling the muscles to relax, which opens the tubes and makes it easier for air to pass through.

This is the medicine that will work quickly when your child is unwell with their asthma. Reliever inhalers are usually blue.

There are lots of different medicines for asthma. Check with your healthcare professional if you are concerned.

## WHY ARE SPACERS SO IMPORTANT?

When we spray inhalers, the medicine comes out very fast. Spacers are tubes that help slow down the medicine. This means we can breathe it into the smaller airways in the lungs, where it needs to work.

## HOW TO USE THE SPACER:

- 1 Shake the inhaler
- 2 Get a good seal with the face (using a mask, or in the mouth using a mouthpiece)
- 3 Spray the inhaler once
- 4 Watch for five good breaths in and out OR count ten seconds
- 5 Wait 30 seconds, and repeat until you have completed your puffs.

Spacers should be taken apart and washed about once a month, in hot soapy water, just like your dishes. They should be left to drip-dry, never dry the spacer using a cloth.

