



Asthma

Q & A with Linda Haynes, nurse practitioner

Ms. Haynes: Hi, I'm Linda Haynes. I'm the asthma nurse practitioner with the asthma action team at Boston Children's Hospital Primary Care Center.

Q : What is asthma?

Ms. Haynes: Asthma is a disease of the airways. Air enters and exits the lungs through the airways. With asthma, you get swelling, mucus and inflammation in the lining of the lungs. You also get muscle spasm on the outside of the lungs that makes it difficult to breathe.

Q : How can I tell if my daughter has asthma?

Ms. Haynes: The symptoms of asthma include cough, shortness of breath, wheezing, and difficulty breathing, especially at night. Asthma is diagnosed based on clinical history. This is a history of your child's symptoms and a history of illnesses that your child's had in the past. There are some tests that may help your provider monitor the progress of your child's asthma. This can include pulmonary function tests.

Q : What kinds of things make asthma worse?

Ms. Haynes: Common asthma triggers include allergens such as pollen, pets, weather changes—either being too hot or too cold—dust mites, and strong irritants such as cigarette smoking or chemicals in the home.

Q : Is there a cure for asthma?

Ms. Haynes: The goal of asthma treatment is to reduce inflammation in the lungs and maintain lung function over time. There is no cure for asthma, but some studies show that adolescents may have fewer asthma symptoms as they approach the teenage years. It's difficult to predict which children will have fewer asthma symptoms, so it's important to maintain control for every child with asthma. This is done by reducing asthma triggers and using proper medications that decrease inflammation in the lungs.

Q : What medications are used to treat asthma?

Ms. Haynes: There are two main types of asthma medications. There's controller medications, which are taken every day. They decrease inflammation in the airways and soothe the lining of the lungs. There are also reliever medications, which are taken when a child is having acute asthma symptoms, like coughing or wheezing. These medicines work very quickly—usually within about five minutes—but only last between four and six hours. They do nothing to control the inflammation. It's important that a child with asthma have both these types of treatments.

Q : How can I tell if my son is having a real problem with his asthma?

Ms. Haynes: Signs of worsening asthma can include cough, particularly cough at night, wheezing, shortness of breath or chest pain, or your child needing their rescue inhaler more than twice a week. If your child is having any of these symptoms, they should be seen by their medical provider to talk about their asthma control.

Q : I've heard people talk about asthma action plans. What are those?

Ms. Haynes: The asthma action plan is a recipe that you and your doctor create in order to better care for your child's asthma. It details what medications are used on a daily basis in order to reduce and control asthma symptoms. The asthma action plan is broken into three zones. The green zone means your child is having no asthma symptoms: no cough, no wheeze and no difficulty breathing at night. The yellow zone is when your child is beginning an asthma flare. Asthma flare symptoms can include cough, wheeze, chest tightness, or difficulty breathing, especially at night. You may need to increase medication during the yellow zone and use your reliever or rescue medicine at this time. If your child has been in the yellow zone for more than three days, you should be seeking appropriate medical care. In the red zone, your child's asthma is getting worse fast. He may have continuous coughing, chest pain, or difficulty breathing, including using the muscles in the chest to breathe. It's important that you get emergency medical care at this time. You need to notify your doctor right away, or go to the hospital.

Q : Can my daughter still play sports and be active?

Ms. Haynes: Children with asthma can do anything that other children can do. They may need to slow down during acute asthma flares, but children should stay active and exercise to keep their lungs and bodies strong.

Q : How do we work with our school to address my son's asthma?

Ms. Haynes: Here are some tips to make sure that your child is well cared for at school. Your child should have a copy of the asthma action plan and their medications available with the school nurse. You should also encourage your child to speak up if they're having asthma symptoms and tell the teacher or the nurse if they're not feeling well.

Q : I don't want my son to feel different from other kids because of his asthma. What can we do to help?

Ms. Haynes: You can protect your child from being stigmatized because of their asthma by making it part of their everyday routine. You can also point out the many role models with asthma, including music stars like Selena Gomez, sports figures like Kristi Yamaguchi, or past presidents like Bill Clinton. There are also a wealth of Web activities for kids with asthma, including the ones on this website. It's important for children to feel safe and empowered to control their asthma. For younger kids, this may involve books or TV programs like Arthur that talk about asthma. For older children, school-age kids, this may involve knowing their asthma action plan, knowing the names of their medications, or how to use their inhalers.

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