

Asthma in Children

Title: Asthma Center

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What is asthma?

Asthma is a lung condition that causes coughing and shortness of breath. Asthma causes the lining of the airways to swell and the muscles around the airways to tighten. Asthma also causes mucus to form in the airways, plugging the airways. Asthma is a very serious illness for children, and the cause of many emergency room visits and hospital stays. It also causes children to miss school when attacks are severe.

Who is at risk for asthma?

Children are more at risk for asthma if they:

- live in a city
- are exposed to second hand smoke
- have one or both parents with asthma, and
- are obese.

What are the symptoms?

Most children with asthma are diagnosed before age 5. There may be early warning signs before more serious symptoms occur. Your child may complain about having trouble breathing or you may notice changes in your child's breathing. Infants will have rapid breathing and a rattling cough. A child with asthma may have more colds than other children. When the child gets a cold, it usually goes right to their chest. Sometimes the only symptom of an asthma attack is a steady cough. The cough may only occur at night. Your child may have asthma if he or she coughs repeatedly, clears his throat often, or sounds wheezy when exhaling. Other symptoms include shortness of breath and chest tightness. A child can have asthma and not wheeze.

Asthma attacks can occur quickly and cause mild discomfort. They can last from a few minutes to hours, or even days. Other times attacks may be very severe and life-threatening that cause breathing to stop. Asthma attacks may be caused by allergic reactions to common substances. House dust mites, cockroaches, mold, and animal dander are the main triggers of asthma attacks. Exercise, respiratory infections, cold air, tobacco smoke, strong odors, pollution, and certain drugs can cause an attack. Avoiding the triggers can often prevent attacks.

How is asthma treated?

With treatment and control of the environment most serious problems can be prevented, and the

child can live a normal life. Together you, your child, and provider can work to gain control of the symptoms by developing an asthma management plan. The plan includes controller medicines to help prevent an asthma attack, and also medicines to take when symptoms increase. These are called quick relief or rescue medicines and are only taken when symptoms start. The asthma treatment plan will include information on when to call the provider and the use of any specific devices such as a peak flow meter, inhaler, or a nebulizer.

Ask your provider for a written asthma plan. Children may be embarrassed about taking their medicine at school. Work with your child's teacher, school nurse, and coach to make sure your child takes his medicine. The child will be able to take part in school activities when he takes his medicine as prescribed.

What can I do to help my child?

You can also help your child by:

- Having your child exercise to strengthen the heart and lungs
- Learn what triggers your child's asthma
- Reducing allergens and other triggers of the asthma such as dust, smoke, and pet dander
- Keeping the child away from pollens during allergy season
- Never allowing smoking in the house
- Practicing frequent hand washing, and
- Having the child get a flu shot every fall.

When should I call my child's health care provider?

A health care provider should be called if the child with asthma has the following symptoms:

- Breathing very fast or breathlessness
- Loud wheezes when breathing
- Only being able to talk in single words rather than sentences
- Anxious, agitated, or scared look
- Heart beating fast, or
- Peak flow rate is in the red zone.

More severe symptoms that require emergency treatment include:

- Blue or grey lips or fingernails
- Nostrils flare when breathing in
- Infant stops feeding
- Unusually pale or sweaty
- Trouble walking or stops playing
- Vomiting
- Cannot stop coughing.

Asthma can be treated, but cannot be cured. The good news is that for many children the symptoms get better as they reach their teen years.

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