



Asthma Triggers

Asthma is a common lung condition in children. Although there is no cure, asthma can be controlled. Asthma attacks, also called asthma episodes, can be mild, moderate or life-threatening. Asthma attacks cause breathing problems and you may notice wheezing, coughing and/or chest tightness. Asthma attacks start when the airways (lungs) are bothered by something. These things are called **asthma triggers**. Each child's triggers are different. Ask for a written asthma plan from the doctor to learn how to control asthma and avoid triggers. Below are some common triggers and tips to avoid them.

SMOKE

Smoke can trigger an asthma attack. Avoid being close to smoke from cigarettes, pipes, cigars, fireplaces, grills and burning wood. Do not allow smoke in the home, car or near the child.

COLDS AND FLU

Practice good hand washing to help prevent colds and illness. Children age 6 months and older who have asthma, and those caring for children with asthma, should get a flu shot each year.

EXERCISE

Being active is important to staying healthy. Talk to the doctor about steps to prevent an asthma attack during exercise, sports and gym class. The child may need to use asthma medicine before exercise. Exercise indoors when smog or pollen levels are high or in cold weather. Include time for warm-up and cool-down activities.

WEATHER

Rain, wind, cold temperatures or sudden weather changes can trigger an asthma attack. Have the child wear a scarf over his mouth and nose when it is cold outside.

PETS

Keep pets out of the bedroom and classroom, or outdoors if possible. Keep pets away from furniture, carpet and stuffed toys. Keep pets and floors clean. Vacuum carpets and rugs often.

ROACHES AND PESTS

Store food in airtight containers. Clean all food crumbs and spills right away. Keep a lid on trash cans. Keep counters, sinks, tables and floors clean.

ODORS

Do not spray or use products with strong odors near the child. Avoid perfumes, air fresheners, cleaning products, art supplies and paint.

MOLD

Wash mold off of surfaces. Fix leaky plumbing. Keep indoor humidity between 30 percent to 60 percent in homes and schools.

DUST MITES

These are tiny bugs you can't see that can live anywhere. At home, wash sheets and blankets in hot water each week. Put dust-proof covers on mattresses and pillows. Keep stuffed toys off the bed. At home and school, keep furniture clean. Vacuum carpets and rugs often. Use wood or vinyl flooring if possible.

AIR POLLUTION

Spend less time outdoors when smog levels are high. Parents, teachers and coaches should be aware of a child's response to smog and signs of any breathing trouble. Do your part to help clean the air. Walk, bike, carpool or take the train or bus to events. Avoid idling—turn off cars, trucks and school buses when not moving.

USING A METERED DOSE INHALER (MDI)

- A child **always** needs fast, easy access to quick-relief medicine because no one knows when an asthma attack will happen. It can happen at home, at school, on a school bus, during field trips, at sports practice, etc.
- Make sure the school has quick-relief medicine for the child. If the child carries an inhaler each day, keep a backup inhaler at school in case the other one is lost, forgotten at home or empty.
- Make sure the inhaler has medicine in it. Even if the MDI puffs when pressed or you shake it and feel something inside after all doses have been used, it may be out of medicine and have just the propellant left. Know how many puffs (doses) are in the inhaler. Ask the child daily if the medicine was used. Count puffs used and keep a log. Get a new inhaler when doses left are low. Check expiration dates and replace when needed.

HOW TO USE THE MDI

1. Stand up or sit up straight.
2. Take off cap and shake the inhaler.
3. Hold the inhaler as instructed by the doctor in one of these ways:
 - A. **Spacer/Holding Chamber.** This is the **preferred** way. It helps more medicine reach the airways where it is needed to work.
 - B. **Open Mouth.** Inhaler is held 1 to 2 inches in front of the mouth (about the width of two fingers).
 - C. **In the Mouth.** A and B are best. If the child is unable to use these, the doctor may have the child use this method.



A. Spacer/Holding Chamber



B. Open Mouth



C. In the Mouth

4. Breathe out all the way.
5. Slowly start to breathe in, and press down on the inhaler at the same time. Breathe in slowly and deeply to fill the lungs.
6. Hold breath for five to 10 seconds.
7. If the child is to take more than one puff, allow one minute between puffs and shake the MDI before each puff.
8. Rinse the mouth after using any inhaled steroid medicine.

A Children's Healthcare of Atlanta pediatric advice nurse is available 24 hours a day at 404-250-KIDS. In case of an urgent concern or emergency, call 911 or go to the nearest Emergency Department right away.

This general information diagnosis and treatment of your child.

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TIPS TO CONTROL ASTHMA

- Ask the doctor for a written asthma management/emergency plan. Share the plan with the school and all who may care for the child.
- Learn the child's triggers and take steps to avoid them.
- Ensure that the child has fast, easy access to quick-relief medicine **at all times**.
- Parents, teachers and coaches can take a class to learn more about asthma management.
- If quick-relief medicine is used more than twice a week, it may be a sign that asthma is not under control. Talk to the doctor.

TOOLS FOR SCHOOLS

Help improve air quality in your school. The *Indoor Air Quality Tools for Schools Kit* is available from the U.S. Environmental Protection Agency (EPA). Call the EPA at 800-438-4318 or visit www.epa.gov/iaq for more information.

TO LEARN MORE

Go to www.choa.org/asthma to learn more about asthma. For additional information, visit the following:*

- www.nhlbi.nih.gov
- www.epa.gov
- www.lungusa.org
- www.schoolasthmaallergy.com
- www.cleanaircampaign.com