

## Data Protection - Looking after and sharing information about your child

We have a duty of care to help patients and families understand how information about them is kept and shared and we include the following information in all our patient leaflets:

Information is collected about your child relevant to their diagnosis, treatment and care. We store it in written records and electronically on computer. As a necessary part of that care and treatment we may have to share some of your information with other people and organisations who are either responsible or directly involved in your child's care. This may involve taking your child's information off site. We may also have to share some of your information for other purposes; such as research etc. Any information that is shared in this way will not identify your child unless we have your consent. If you have any questions and/or do not want us to share that information with others, please talk to the people looking after your child or contact PALS (Patient Advice and Liaison Service) on 0121 333 8403.

### Further information

We hope this leaflet will help you to understand how to care for your child at home.

If you feel you need more information to have any concerns please speak to

..... On:

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### Useful contacts

Asthma UK, 18 Mansell Street, London, E1 8AA  
[www.asthma.org.uk](http://www.asthma.org.uk) Telephone: 0300 222 5800

NHS Free Smoking Helpline  
[www.nhs.uk/smokefree](http://www.nhs.uk/smokefree)

Telephone: 0300 123 1044

This leaflet has been written by the Asthma Steering group at Birmingham Children's Hospital in conjunction with City and Sandwell Hospitals and Heart of Birmingham Primary Care Trust.

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Advice Sheet for

# Asthma/ Wheeze

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## Information for Parents: Asthma/ wheezing

Your child has been diagnosed as having virus induced wheeze or asthma and this leaflet explains the basic facts about both. Please read the leaflet and if you have any questions ask your child's GP (family doctor), nurse or hospital doctor.

### What is virus induced wheeze?

Wheezing is a musical, whistling sound heard during breathing. It happens when our airways, these are the small breathing tubes that carry air in and out of our lungs, become narrowed. A common cause for this is viral infections and your child might have repeated episodes of wheezing whenever they get a cold. At least 1 child in 7 will have wheezing at some point during the first 5 years of their life.

### How is it treated?

Most children who only wheeze with viral infections only need treatment during the acute attack, usually with inhalers or nebulisers. Some children might need inhaled treatment between attacks as well.

### Does this mean that my child will develop asthma?

Diagnosing asthma in very young children can be difficult because there are a number of different illnesses such as bronchiolitis; virus induced wheeze as well as asthma that cause wheezing. Many of these children will not go on to develop asthma, so your child's doctor will not want to use the term 'asthma' at this stage. There are some risk factors such as parental history of asthma, history of eczema and/or food allergies in children, exposure to cigarette smoke etc that might make your child more prone to developing asthma later.

The pattern of symptoms that develops over time will show whether your child has asthma, therefore regular review with your child's doctor will help clarify the diagnosis.

## What is asthma?

Asthma is a common condition that affects 1 in 11 children in the UK. It affects the airways – the small breathing tubes that carry air in and out of our lungs. The airways become inflamed when they come into contact with 'triggers' and there is:

- Swelling of the airway wall.
- An increase in mucus.
- Tightening of the airway muscles.

### What causes asthma?

Asthma can start at any age. It is difficult to know what causes asthma, but so far we know that the following increase the chance of your child having asthma:

- History of asthma in parents.
- Eczema, food allergies or hay fever in your child.
- Exposure to cigarette smoke.
- Boys are more likely than girls to have childhood asthma.

### What are the symptoms of asthma?

- Cough and/or wheeze – worse at night or with activity or colds.
- 'Tight chest'.
- Shortness of breath.

### What are the triggers?

Anything that irritates the airways and causes symptoms of asthma.

Common triggers include:

- Infections such as colds and flu.
- Cigarette smoke.
- Exercise.
- Weather changes.
- Emotions, e.g. excitement and stress.
- Pollen, house dust mites and animal fur.

## How is asthma treated?

Asthma can be controlled well by managing triggers and regular monitoring and treatment with inhalers and medications.

### Relievers and preventers

*Relievers* – usually come as blue inhalers. Use at the start of asthma symptoms or before activity such as games/PE at school. They relax the muscles around airways making it easier to breathe. They work within 5-10 minutes and effects can last up to 4 hours.

*Preventers* – these usually come as brown, red or orange inhalers. They contain low dose steroids which reduce swelling and inflammation in the airways when they come across a trigger. They work over a period of time and should be taken every day even if your child is well.

Remember to use your spacer!

### Other medications

If asthma symptoms cannot be controlled with the above inhalers, your child's doctor may add other inhalers or medications.

*Steroid tablets* – short courses of steroids are sometimes needed in the treatment of asthma to control a severe attack or if symptoms are not controlled by other medicines. If they are needed over a long period, your child's doctor will explain the reason, any possible side effects and if monitoring is needed.

### Whether your child has wheeze or asthma, make sure that

- You have been given a written action plan.
- You have been taught/know how to use the inhalers.
- Your child takes the prescribed treatment.
- You organise a review with your child's doctor or nurse if you have any concerns.
- Your child's school/nursery/childcare know about their wheeze/asthma and have a spare inhaler and spacer (if used).