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Asthma in Children

Asthma may last through your child's life. Things such as smoke, pollen, mold, cold air, pet dander, and dust mites may trigger asthma attacks.

Asthma can make lung and airway infections like bronchitis and pneumonia worse. Even mild asthma may cause long-term changes to your child's airways and lungs.

Asthma causes swelling and irritation in the airways. It can make airway muscles tighten, making it hard for your child to breathe. This is called an acute asthma episode, or an asthma attack. Asthma attacks may happen every now and then, or, in severe cases, every day.

Even though asthma can't be cured, there are treatments to help control it.

What are the symptoms?

When your child has asthma, your child may:

- Wheeze. This is a loud or soft whistling noise when breathing in and out.
- Cough a lot. This is the only symptom for some children.
- Feel tightness in the chest.
- Feel short of breath. Your child may have rapid, shallow breathing or trouble breathing.
- Have trouble sleeping because of coughing and wheezing.
- Get tired quickly during exercise.

Your child may start having symptoms soon



after being around things like pollen or cigarette smoke. This is an early phase response. Or symptoms may start several hours later. This is a late phase response. A late phase response can make it harder to know what things cause your child's symptoms.

Symptoms of asthma can be mild or severe. Your child may have symptoms every day, just now and then, or somewhere in between.

Many children have symptoms that get worse at night. These include a cough and shortness of breath.

Exams and tests

Your child's doctor may use:

• **Spirometry.** Doctors use this test to diagnose and monitor asthma.

- Peak expiratory flow (PEF). This shows how much air your child quickly exhales while breathing out as hard as possible.
- An exercise or inhalation challenge. This measures how much and how quickly your child can inhale and exhale after exercise, after exposure to a material that may cause symptoms, or after taking a medicine.

Treatment

Asthma is treated with self-care and medicine to help your child breathe easier.

Medicines used to treat asthma include:

- Controller medicines. These medicines prevent asthma attacks, help stop problems before they happen, and reduce inflammation in your child's lungs. These things help control your child's asthma.
- Quick-relief medicines. These medicines are used when symptoms can't be prevented and need to be treated fast. They help relax the airways and allow your child to breathe easier.
- Oral or injected corticosteroids. These medicines may be used to treat asthma attacks.

Treatment also includes things you can help your child do to manage asthma, like avoiding things that might trigger symptoms and following an asthma action plan.

When to call a doctor

Call 911 if your child is still having severe trouble breathing.

Call your doctor right away if:

- Your child's symptoms do not get better after following their asthma action plan.
- Your child has new or worse trouble breathing.
- Your child's coughing and wheezing get worse.
- Your child coughs up dark brown or bloody mucus (sputum).
- Your child has a new or higher fever.

Call your doctor if:

- Your child needs to use quickrelief medicine on more than 2 days a week within a month (unless it is just for exercise).
- Your child coughs more deeply or more often, especially if there is more mucus or a change in the color of the mucus.
- Your child's PEF has been getting worse for 2 to 3 days.



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