Helping Your Child Breathe Easier With Asthma
Foreign Language Lines

Call if you need help and need to speak with someone in one of these languages:

العربية (Arabic) 1-877-652-3046
Bosanski (Bosnian) 1-877-652-3069
كوردی – بادینانی (Kurdish-Badinani) 1-877-652-3046
كوردی – سۆرانی (Kurdish- Sorani) 1-877-652-3046
Soomaali (Somali) 1-877-652-3054
Espanol (Spanish) 1-800-254-7568
Người Việt (Vietnamese) 1-800-269-4901
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**About your benefits:**  
Your health plan may have limits on the care and services you receive. If you go over your plan’s limits, you may have to pay for care or services yourself. Services, programs or therapies listed here are not always covered by your benefits. Always check your plan to learn what is covered or what you may have to pay for yourself. If you have questions, call the Customer Service number listed on your member ID card.
What is asthma?

More than 6 million children in the U.S. have asthma. If your child has asthma, you probably have a lot of questions. You want to know what you can do to make your child feel better.

What is asthma? Asthma is a lung disease that makes airways in the lungs extra-sensitive to certain things, called “triggers.” Triggers can cause the airways in the lungs to narrow and make it hard to breathe.

Asthma is a chronic disease, which means your child will always have it. The good news is there are many things your child can do to live and breathe easier with asthma.

Why asthma makes it hard to breathe
Asthma makes the airways in the lungs very sensitive. Asthma “triggers” make it harder to breathe by:
• making the airways in the lungs swell
• making extra mucus (a thick liquid) in the lungs
• tightening the muscles around the airways in the lungs

You can control your child’s asthma
Sometimes it might feel like you don’t have much control over your child’s asthma. But there are things you can do. You and your child are the most important parts of successfully treating his or her asthma.
What are asthma symptoms?

Asthma makes it harder for your child to breathe. Symptoms can be mild or severe, and include:

• wheezing
• coughing, especially at night
• shortness of breath (feeling like you can’t get enough air into the lungs)
• tightness in the chest
• waking up at night because of these symptoms

When symptoms are severe, it is called an asthma flare up or attack.

Most people can take a quick-relief medicine to feel better and breathe easier when they are having an asthma attack. Work with your doctor on a plan to control your child’s asthma – and asthma attacks.
Why is controlling asthma important?

You can live without food or even water for a few days. But no one can live without breathing even for a few minutes.

Working with your doctor on a plan to control your child’s asthma – and following that plan – is very important. Remember, asthma is a serious disease. But your child can live a normal, active life with the right treatment.

Each person’s treatment for asthma is different. Make sure you talk with your doctor about your child’s personal plan to control asthma.

Controlling asthma can help your child:

- Feel better and breathe easier
- Avoid missed days of school
- Do more activities with family and friends
- Prevent asthma from getting worse
- Avoid trips to the emergency room or hospital
- Prevent permanent lung damage
Your doctor is your partner in better health.

Your doctor has a very important role in keeping your child healthy. It’s up to you to help your doctor by talking about:

- All of your child’s asthma symptoms
- How often he or she has asthma symptoms
- When your child has asthma symptoms
- If your child has gone to the emergency room because of asthma
- All the medicines your child takes for asthma and other medical conditions
- If your child needs to avoid certain foods, drinks or other medicines
- Asthma treatment goals – Do you want your child to have fewer asthma attacks? Does your child want to be more active without asthma symptoms?

Tell your doctor as much as you can about your child’s asthma symptoms and health. This will help your doctor create a treatment plan that’s right for your child.
What kinds of medicine will my child have to take?

Taking medicine is an important part of controlling asthma. Your doctor will probably prescribe two types of medicine for your child:
• Long-term control medicine
• Quick-relief medicine

**Take long-term control medicine every day.**
Long-term control medicine helps prevent asthma attacks and symptoms. Your child will need to take this medicine every day. *Even if he or she feels better, your child needs to take this medicine every day.*

**Do not use long-term control medicine to treat an asthma attack.** These medicines do not act fast enough to help your child breathe during an asthma attack.

**Use quick-relief medicine when your child has asthma symptoms.**
Quick-relief medicine helps quickly open airways in the lungs when your child is having asthma symptoms or an asthma attack. Your child should only take this medicine when he or she is having symptoms or an asthma attack – or when your doctor tells you.
Talk to your doctor if your child is using quick-relief medicine every day.
Using quick-relief medicine every day may mean your child’s asthma is not under control. Your doctor needs to know if your child’s medicines are not working.

Remember: Always keep medicines out of the reach of children. Check with your doctor before giving your child any other medicines.
How to take asthma medicines

Most asthma medicine is inhaled. It comes in a special container called an inhaler.

Your child might need to use special tools like a spacer or nebulizer to take asthma medicine. A nebulizer makes asthma medicine a mist so it’s easier to breathe in. A spacer makes it easier to breathe in medicine from an inhaler.

Ask your doctor to show you and your child how to use a nebulizer or a spacer.

If your child uses an inhaler, practice using it at the doctor’s office to make sure they get it right.
How to use an inhaler

Most inhalers work the same way:
1. Take off the cap and shake the inhaler.
2. Breathe out as much air as you can.
3. Hold the inhaler or spacer in or near your mouth. Your doctor can show you how.
4. Start to take a big breath in.
5. As you breathe in slowly, press down on the inhaler.
6. Keep breathing in for 3 to 5 seconds.
7. Hold your breath for 10 seconds or as long as you can.
8. Breathe out.
9. If your doctor says you need to take more than one puff from your inhaler, wait one minute between puffs.

Track Your Puffs.

An inhaler has enough medicine for a certain number of puffs – or times you can use it. Keep track of how many puffs are left each time your child uses the inhaler. That way you’ll know when it’s time to start using a new one.
How can my child feel better and breathe easier?

Nearly 23 million Americans have asthma. More than 6 million of those people are children. There are lots of things your child can do to control asthma and breathe easier.

Successful asthma treatment requires you and your child to be involved with an asthma action plan.

Follow the Asthma Action Plan
Work with your doctor to develop your child’s personal asthma action plan. The action plan will tell you:
• How and when your child will take asthma medicine
• How to monitor your child’s asthma
• What to do if asthma symptoms get worse

Take medicines as directed.
Your child needs to take medicines exactly how and when the doctor says – even if your child is feeling better. If your child stops taking medicines because he or she is feeling better, your child could have an asthma attack.
Have regular check-ups with your doctor.
Be sure your child goes to all check-up appointments. These visits help your doctor see how your child’s asthma treatment is working. **Always tell your doctor if your child is having trouble following the treatment plan, or if symptoms are getting worse.**

Keep track of asthma symptoms.
Your child only sees the doctor once in a while. Keep track of your child’s asthma symptoms between doctor visits, so the doctor can see how the treatment is working. If your child’s symptoms are not getting better, your records will help your doctor adjust the treatment plan.
Using a Peak Flow Meter to monitor breathing.

A Peak Flow Meter can help you see how well air is moving in and out of your child’s lungs. If your child uses a meter regularly and tracks results, you can get a good picture of how well asthma treatment is working. Ask your doctor how often your child needs to check peak flow.

Using a Peak Flow Monitor is easy.
- Make sure the meter marker is on 0 or the lowest number.
- Stand or sit up straight.
- Inhale as deeply as you can.
- Blow into the meter as hard and as fast as you can.
- The force of your breath will move the marker to your “score.”

Your doctor will help you understand what your child’s score means, and how your child needs to take medicine based on his or her scores.

Personal Best

The highest peak flow score your child can get when his or her asthma is under control is called their “personal best.” A high score means air is moving well through the lungs. Knowing your child’s “personal best” score is an important part of seeing how well your child’s asthma is controlled.
What “zone” is your child in?

Using a Peak Flow meter to track breathing “zones” can help you see how well your child’s asthma is under control.

Your child is in the Green Zone when asthma is under control:
• No coughing, wheezing or shortness of breath during the day.
• Your child can do normal activities.
• Peak flow score is 80 percent or better of personal best.

Your child is in the Yellow Zone when asthma is getting worse:
• Coughing, wheezing or shortness of breath.
• Your child wakes up at night because of asthma.
• Your child can do some, but not all, normal activities.
• Peak flow score is 50-79 percent of personal best.

When your child is in the Yellow Zone, your doctor may have your child take other medicines to get asthma under control.
Your child is the Red Zone when:
• He or she is very short of breath.
• Quick-relief medicine is not helping.
• Your child can’t do normal activities.
• Symptoms are the same or get worse after 24 hours in the Yellow Zone.
• Peak flow score is less than 50 percent of personal best.

If your child is in the Red Zone, it could be an asthma attack. Have your child take quick-relief medicines just like your doctor says. If the medicine doesn’t work in the time it should, call your doctor.
Controlling asthma at school

A lot of your child’s day is spent in school. Your child should have his or her quick-relief medicine or inhaler at all times – even at school.

Under Tennessee law, children with asthma can have and take inhaled medicine at school.

To make sure your child can have his or her inhaler at school, you need to:

• Give the school permission in writing that your child can have and use an inhaler at school.
• Give the school a note from your doctor that says:
  — Your child has asthma
  — Your child knows how to use an inhaler
  — The name and purpose of the medicine
  — The medicine dosage
  — When the child needs to use his or her inhaler during the day – and special times your child needs to use his or her inhaler
  — How long your child will be taking this medicine

You need to give all of this information to your child’s school every school year.
Missing school because of asthma.

Children in the U.S. miss a total of 12.8 million school days each year because of asthma. If your child’s asthma is under control, symptoms shouldn’t keep him or her home.

There are times when it’s a good idea to keep your child home from school.

Think about keeping your child home from school if:
• Your child’s asthma symptoms are getting worse:
  — Coughing, wheezing or short of breath.
  — Waking up at night because of asthma symptoms.
  — Able to do some, but not all, normal activities.
  — Peak flow meter scores are 50-79 percent of personal best
• Your child has a fever over 100°F by mouth (101°F rectally), or if your child feels flushed, hot and “achy.”
• Your child has a sore throat, productive cough, or swollen, painful neck glands.

Not sure if you should send your child to school? Call your doctor. You can also call Nurseline at 1-800-262-2873 for advice. Nurseline gives you free access day or night to a nurse who can help you with health questions and advice.

Sources: Centers for Disease Control and Prevention, www.cdc.gov; Asthma Initiative of Michigan – www.getasthmahelp.org
Warning signs of an asthma attack

Warning signs are clues an asthma attack might happen. It’s important to know your child’s warning signs to help prevent asthma attacks.

If your child’s asthma symptoms are getting worse, it’s a warning sign of an asthma attack. Your child might have other warning signs like:

— Coughing at night
— Having a cold or the flu
— A fever
— Stuffy or runny nose
— Itchy throat
— Sneezing and watery eyes
— Pale face

— Dark circles under the eyes
— Tightness in the chest
— Weakness or feeling more tired than usual
— Headache
— Restlessness

Talk with your doctor about your child’s warning signs. It’s important to know what to do when they happen.

Asthma leads to nearly two million trips to the emergency room each year. Asthma is the third cause of hospitalizations for children.

What to do during an asthma attack

Controlling your child’s asthma every day helps prevent asthma attacks. Even when your child’s asthma is under control, he or she could have an asthma attack.

If your child has an asthma attack:

- Have your child take quick-relief medicine as directed by your doctor.
- If the medicine doesn’t work in the time it should, call your doctor.

Most of the time, using quick-relief medicines as your doctor says will help an asthma attack.

Need advice? Call Nurseline.
Nurses are available 24/7 to give you advice or answer health questions.

The nurse can even help you decide when to go to the emergency room.

Call Nurseline for free, anytime at 1-800-262-2873.
When to go to the emergency room

Call 9-1-1 if:
• Your child has trouble walking or talking.
• Your child is doubling over.
• Your child’s lips or fingernails are blue or gray.
• Your child’s breathing is very slow.

It’s important that anyone who takes care of your child knows when they should call 9-1-1.

What are asthma triggers? How can I avoid them?

Triggers are common things that can make asthma worse. Helping your child avoid asthma triggers can help him or her have fewer asthma symptoms.

• **Pet Dander**
  — If possible, find new homes for pets with fur or feathers.
  — Make sure pets stay out of the room where your child sleeps.
  — Keep pets away from carpets and fabric-covered furniture.
  — Bathe your pet once a week.
  — Use a HEPA (high-efficiency particulate air) filter in your home’s heating and cooling system.

• **Dust Mites**
  — Use dust-proof covers on your child’s mattress and pillows.
  — Wash your child’s sheets and blankets every week in hot water. Water temperature must be at least 130° F to kill dust mites.
  — Use a dehumidifier or central air conditioning to reduce the humidity in your house to 30-50 percent.
  — Don’t allow your child to sleep or lie on fabric-covered cushions.
— Remove carpets from your child’s bedroom.
— Keep stuffed toys out of your child’s bed, or wash them weekly in hot water.

• **Cockroaches**
— Never leave food or garbage out. Store food in tightly closed containers.
— Keep your kitchen clean.
— Use a pest control service, poison baits, powders, gels and paste to get rid of cockroaches. Make sure you place these in places where children and pets can’t get to them.
— Avoid using bug sprays. If a spray is used, have your child leave the room until the odor is gone.

• **Mold**
— Fix leaky faucets, pipes and other problems that allow water to get inside your home.
— Clean damp areas like shower stalls and sinks at least once a week.
— Clean moldy areas with a cleaner with bleach.
— Run an exhaust fan or open the bathroom window when taking showers or baths.
— Keep your child out of damp places in your home, like the basement.
More asthma triggers and how to avoid them

• **Pollen and Outside Mold**
  — Keep your windows and doors closed during allergy season.
  — Have your child stay indoors as much as possible during allergy season.

• **Secondhand Smoke**
  — Your smoking can make your child’s asthma worse. If you smoke, quit. Ask your doctor if you need help quitting. Ask family members to quit smoking too.
  — Avoid secondhand smoke. Don’t allow smoking in your home or car, and sit in the non-smoking section of restaurants.

**Other Asthma Triggers**
• **Smoke, Perfume and Sprays** – Make sure your child avoids fireplaces, wood burning stoves and kerosene heaters. Keep your child away from strong odors, perfumes, hair spray and paints.
• **Vacuum cleaning** – Vacuum at least once a week.
• **Cold air** – Have your child wear a scarf over his or her mouth and nose when it’s cold out.
• **Dried fruit and shrimp** – Certain foods contain substances called “sulfites” that can make asthma worse. Check food labels and avoid foods that contain “sulfites” or “metabisulfites.”
• **The flu** – Make sure you and your child get a flu shot every year.

*Sources: Department of Health and Human Services – www.hhs.gov; National Heart, Lung and Blood Institute – www.nhlbi.nih.gov*
Should my child exercise?

Getting exercise is important to living a healthy life. Your child can live an active life with asthma. Being fit makes the lungs work better, so a little exercise can mean fewer asthma symptoms.

Activities and sports that require short bursts of activity are good for people with asthma.

The American Academy of Allergy, Asthma and Immunology recommends the following activities and sports for people with asthma:

- Swimming
- Walking
- Leisure biking
- Hiking
- Baseball
- Football
- Golf
Exercising Do’s and Don’ts

• Talk to your doctor before your child starts exercising.
• Make sure your child drinks water before, during and after exercise.
• Use a quick-relief or other medicine before exercising as directed by your doctor.
• Make sure your child warms-up and cools-down. He or she shouldn’t suddenly start or stop exercising.
• Have your child exercise indoors when possible.
• Monitor your child’s breathing during exercise.

Source: American Academy of Allergy, Asthma & Immunology – www.aaaai.org
Key points to help your child breathe easier

Taking an active role in your child’s asthma treatment can help him or her breathe easier and have fewer asthma symptoms.

Remember these tips to help successfully treat your child’s asthma:
• Make sure your child takes asthma medicines every day. And exactly as your doctor says.
• Keep track of your child’s asthma symptoms.
• Use a peak flow meter to track how well your child is breathing.
• Take your child to all check-ups with the doctor.
• Let your doctor know if your child’s symptoms get worse.
• Encourage your child to get active. Walking, swimming and hiking are good exercise for people with asthma.
• Make sure your child avoids asthma triggers as much as possible.
Notes and Questions to Ask the Doctor
Sources: American Academy of Allergy, Asthma & Immunology – www.aaaai.org
Asthma Initiative of Michigan – www.getasthmahelp.org
American Lung Association – www.lungusa.org
Centers for Disease Control and Prevention – www.cdc.gov
Department of Health and Human Services – www.hhs.gov
U.S. Environmental Protection Agency, www.epa.gov
We do not allow unfair treatment in TennCare. No one is treated in a different way because of race, color, birthplace, religion, language, sex, age, or disability. Do you think you’ve been treated unfairly? Do you have more questions or need more help? If you think you’ve been treated unfairly, call the Family Assistance Service Center for free at 1-866-311-4287. In Nashville, call 743-2000.

Need help in another language? You can call for language assistance. BlueCare members call 1-800-468-9698. TennCareSelect members call 1-800-263-5479. Interpretation and translation services are free to TennCare members.