

Breathe Well, Live Well®

The Guide To Managing Your
Asthma At Home And Work





The Guide to Managing Your Asthma at Home and Work

This Book Belongs To:

Today, I am taking action to get control of my asthma.

1-800-LUNGUSA (1-800-586-4872)
Lung.org

Breathe Well, Live Well is based on an asthma self-management program that was shown to be effective through a study conducted by William C. Bailey, M.D., and other asthma researchers at the University of Alabama at Birmingham. Breathe Well, Live Well was developed through Grant/Cooperative Agreement U58/CCU222370 from the Centers for Disease Control and Prevention (CDC). This publication is supported by the Cooperative Agreement 5UE1EH000763 from the CDC. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the CDC.

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55 W. Wacker Drive, Suite 1150, Chicago, IL 60601

Ways to Get Involved and Support the American Lung Association

For more information on any of the following ways to get involved or support the American Lung Association, call 1-800-LUNGUSA (1-800-586-4872) or visit **Lung.org**.

e-Newsletters

Stay informed about developments in lung health, research and educational resources by signing up for the American Lung Association's *Lung News Monthly*. Visit **Lung.org/sign-up**.

e-Advocacy Network

The American Lung Association Action Network is a dynamic communications hub allowing volunteer advocates from coast to coast to immediately contact their decision makers—via emails and phone calls—on issues that are key to the American Lung Association's mission: To save lives by improving lung health and preventing lung disease. Sign up for the American Lung Association Action Network by going to **Lung.org/advocate**.

Bike, Walk and Climb for Lung Health!

In communities like yours, you can join fundraising activities that support the vital work of the American Lung Association. Participate in a LUNG FORCE Walk with your family, friends or colleagues. If you're looking for more of a challenge, join a Fight For Air Climb where you can walk, run or race up hundreds of steps in some of our nation's tallest buildings. Or, dust off your bicycle and pedal your way around the countryside on a Bike Trek. For more information about events visit **Lung.org/events**. Get everyone involved; you'll have fun while doing something truly meaningful for so many people.

Planned Giving

What will your legacy be? A gift through your will or living trust will allow your faithful support to continue when you can no longer give to your American Lung Association. Perhaps you would like to increase your retirement income from under producing stocks or certificates of deposit?

A charitable remainder trust can provide additional income for your golden years, tax advantages and a gift to the

Lung Association. Find out more by visiting **Lung.org/planned-giving**.

Honor a Loved One Today

Pay tribute to someone you care about with a gift in honor or memory of a loved one with lung disease. Your support helps protect lung health for generations to come. To learn more, visit **Lung.org/honor**.

Donate Online

It's easy to donate online. Visit **Lung.org/donate** to make a donation to help all Americans breathe easier.

Get Your Workplace Involved

Workplace giving practices like payroll deductions and matching gift opportunities signify your organization's support of employee philanthropic activities and double your support for the larger non-profit community. Visit **Lung.org/corporate-wellness** for more information.

Vehicle Donation Program

This innovative program allows people to donate their used or unwanted vehicles to local Lung Associations in order to generate funds to assist in financing local programs that help to prevent lung disease and promote lung health.

To find out about a vehicle donation program in your area, visit **Lung.org/vehicle-donation** or call 1-800-586-4227 to speak with a vehicle donation specialist.

Volunteer

Every day, volunteers for the American Lung Association fight for air by helping teens and adults quit smoking, teaching children how to better manage asthma, helping adults cope with COPD and other lung diseases and serving in leadership capacities in communities across the nation. More than 429,500 volunteers help to raise funds for lung disease research and fight for tougher air quality standards and

smoke-free public places so that all Americans can breathe easier. Sign up at **Lung.org/volunteer** to give your time and expertise to our programs and services dedicated to serving your community.

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Use This Guide If...

- | | |
|--|---|
| • You want to know more about your asthma. | • You think you might be losing control of your symptoms. |
| • Your asthma is keeping you from doing things you want to do. | • Your asthma is well controlled, and you want to keep it that way. |

Who's in Control? You or Your Asthma?



If you're not 100 percent sure the answer is you, Breathe Well, Live Well®: The Guide to Managing Your Asthma at Home and Work can help change your outlook.

The concept of Breathe Well, Live Well is simple. By getting support and learning self-management skills, you can control your asthma so your asthma doesn't control you. In fact, many people are able to manage their asthma well enough that they can live as if they don't have the disease.

Your Asthma Today

Before getting started, use one or both of these methods to get an idea of how well-controlled your asthma is as of today.

Quick Quiz > Is My Asthma Under Control?

1.	I have symptoms more than two days per week.	Yes	No
2.	I wake up at night with trouble breathing one to three times per week.	Yes	No
3.	My asthma makes it hard to do daily activities.	Yes	No
4.	I use my quick-relief inhaler more than two days per week.	Yes	No
5.	I have had two or more asthma episodes that required treatment with oral corticosteroids in the past year.	Yes	No
6.	I went to the emergency room or was hospitalized for asthma in the past year.	Yes	No

If you answered yes to one or more of these questions, there are things you can do to control your asthma better. This guide can help.

Another Quick Check: The “Rules of Two”[®]

If any of these statements are true for you, your asthma may be out of control:

- I take my quick-relief inhaler more than TWO times per week.
- I wake up at night with asthma symptoms more than TWO times per month.
- I refill my quick-relief inhaler more than TWO times per year.

Adapted from Rules of Two, a federally registered service mark of Baylor Health Care System.
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Taking Control Through Asthma Self-Management

Asthma self-management means doing everything you can do to control your asthma. This guide breaks the process down into five easy to follow steps—each a section in this workbook:

1. Understanding your asthma
2. Building your asthma support team
3. Taking asthma medicines
4. Using tools for daily self-management
5. Following good health habits

Just remember, reading Breathe Well, Live Well isn't enough. You also need to put what you learn into action every day!

Setting Your Goals

People with asthma are always amazed at how much their day-to-day lives can improve when they learn asthma self-management. Write down some things you would like to do, but feel you can't because of asthma. Common goals are spending more time outdoors, coughing less and taking less medicine. What are yours?

My Goals

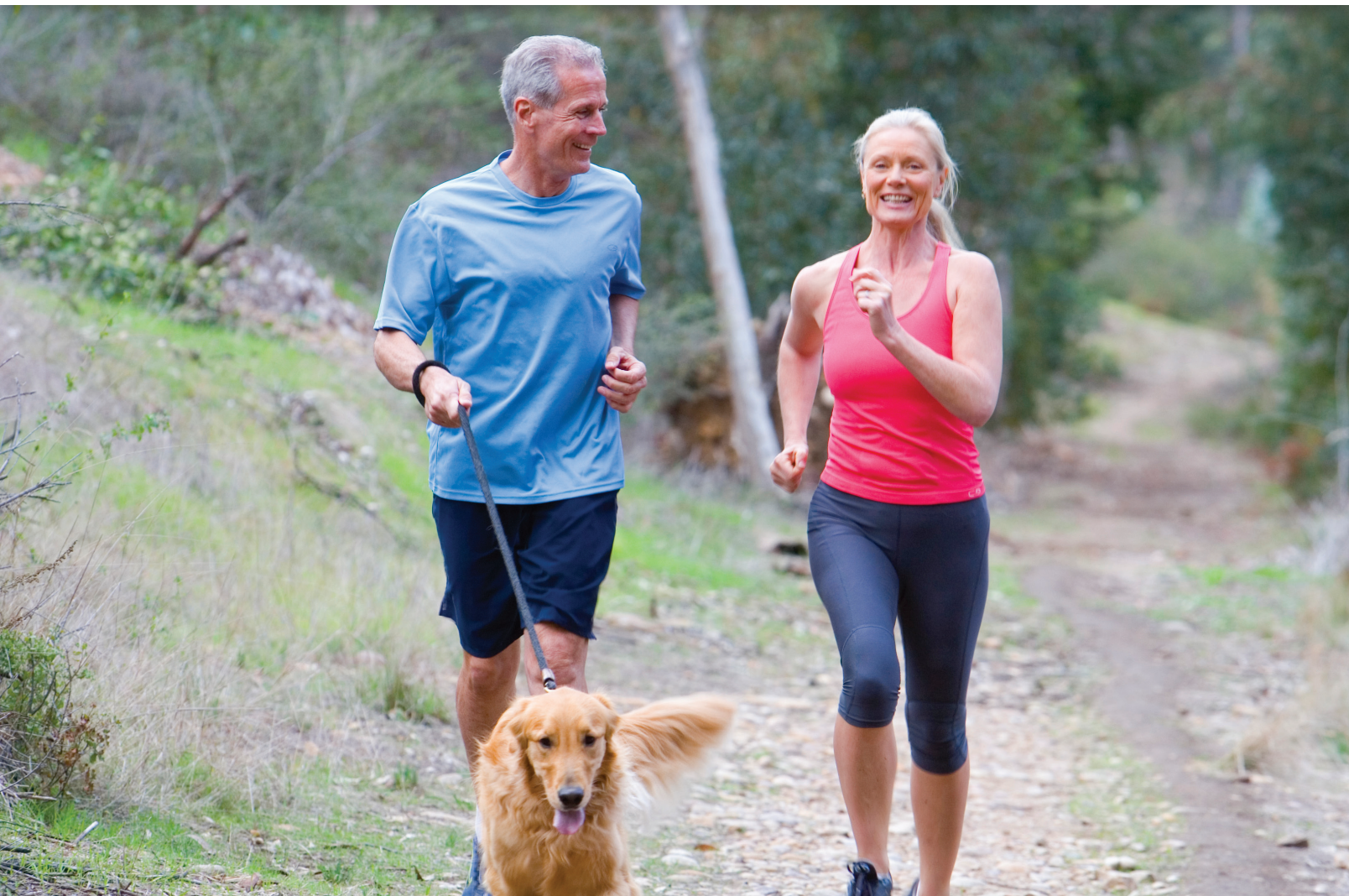
1. _____
2. _____
3. _____
4. _____
5. _____

**Use your goals as motivation
to take control!**

Understanding Your Asthma

SECTION

1



You're living with asthma, so you know breathing can be hard. But do you know why? The first step in taking control of your asthma is being able to answer this question. Once you know how and why your symptoms are triggered, you can find ways to stop your symptoms before they start.

In Section 1, you'll learn about:

- What asthma is, including common symptoms
- What happens during an asthma flare-up
- Why you need to know and avoid your triggers
- Special considerations when treating your asthma
- How to use what you learn to take control

What Is Asthma?

Asthma is a lung disease that makes it hard to breathe. When you have it, your airways are always a little swollen (inflamed). Because of this, they are also easily irritated by things in the environment called asthma triggers. Asthma triggers are different for everyone and can be anything from allergies to strong smells and even stress.

Asthma...

- Cannot be “caught” from someone else.
- Is a chronic condition. This means you will always have asthma.
- Can be treated but cannot be cured.
- Can be controlled with self-management.

You may go a long time without being bothered by asthma, but it can still get out of control at any time. And when it does, asthma can be serious—even life-threatening.

Common Asthma Symptoms

- Wheezing sound when you breathe caused by limited space in the airways for air to move in and out.
- Shortness of breath as air gets trapped in the lungs making it harder to move it in and out of the body.
- Frequent cough due to irritation to the lining of the lung.
- Chest tightness caused when muscle bands that surround the airways tighten. It may make it feel like there is a weight sitting on your chest.



Asthma at Work: Your Symptoms

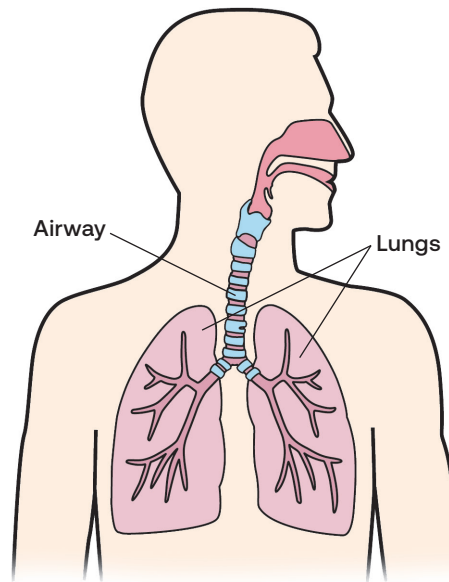
Do you sometimes feel like you’re allergic to work? If you have a tight feeling in your chest and start coughing as soon as you walk in the door, it could be a sign something work-related is one of your triggers—especially if you feel better after you leave. Of course, it’s not always easy to tell. Sometimes, symptoms won’t start until a few hours after exposure. They might even keep you up at night. To help figure out if work is the problem, your healthcare provider may have you keep track of your symptoms for a few weeks to look for clues.

Things I’ve noticed: _____



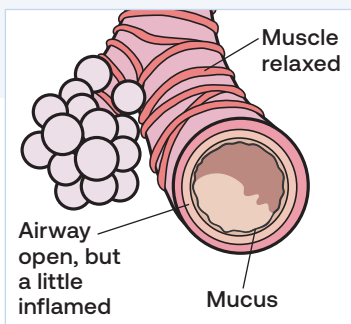
What Is an Asthma Flare-Up?

When you breathe in an asthma trigger, you can feel short of breath or like you can't get a full breath of air. This can lead to an asthma flare-up, also known as an asthma episode, or "attack."



Breathing With Well-Controlled Asthma

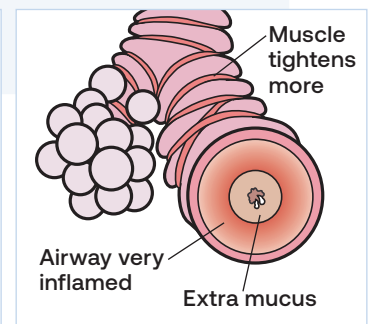
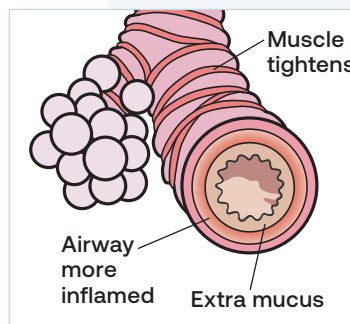
- Easy to take in a breath
- Muscles on outside of airways are relaxed
- Small amount of mucus is present in airways to trap irritants so you can cough them out



VS.

Breathing During an Asthma Flare-Up

- Airways become more inflamed
- Muscles around airways tighten
- Extra mucus is produced
- Airways narrow
- Breathing becomes more difficult
- Action must be taken to relieve symptoms



VideoConnect

Watch our "What Is Asthma?" animation to learn more. You can view it online at [Lung.org/what-is-asthma](https://lung.org/what-is-asthma).

Knowing Your Triggers

Asthma triggers are the things that cause asthma symptoms and flare-ups. Not sure what your triggers are? Think about asthma flare-ups you've had in the past. Ask yourself:

- When did my asthma start getting out of control?
- Where was I?
- What allergens or conditions were present?
- What was I doing?
- What mood was I in?

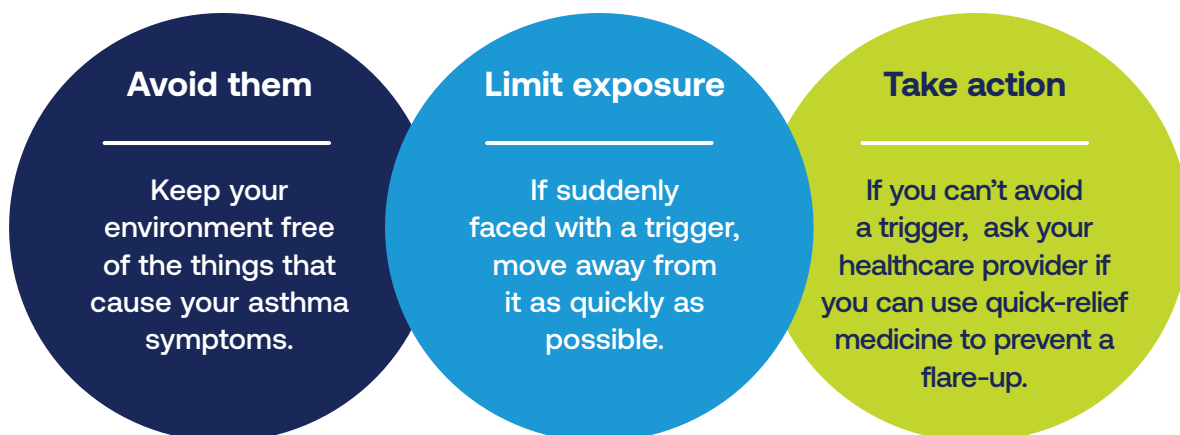
Once you know what triggers cause your symptoms, you can take action to avoid them. You'll learn more about this in Section 4.



My Triggers

- | | |
|--|---|
| <input type="checkbox"/> Smoking and secondhand smoke | <input type="checkbox"/> Respiratory infections |
| <input type="checkbox"/> Wood smoke and fires | <input type="checkbox"/> Physical activity/exercise |
| <input type="checkbox"/> Outdoor air pollution | <input type="checkbox"/> Strong emotions (e.g., stress, crying and even laughing) |
| <input type="checkbox"/> Dust and dust mites | <input type="checkbox"/> Cold air/extreme heat |
| <input type="checkbox"/> Cockroaches | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Pets, animal dander | _____ |
| <input type="checkbox"/> Mold and mildew | _____ |
| <input type="checkbox"/> Pollen | <input type="checkbox"/> I'm not sure |
| <input type="checkbox"/> Strong odors (e.g., hairspray, air fresheners, cleaning products) | |

3 Ways to Deal With Your Triggers





Asthma at Work: Common Triggers

Some triggers are more common in the workplace. These include:

- Cleaning products
- Damp indoor environments and mold
- Environmental tobacco smoke
- Gases, fumes and vapors
- Pests (e.g., dust mites, cockroaches, mice)
- On-the-job stress
- Scented personal products (e.g., hairspray, perfume, air fresheners)
- Temperature extremes
- Physical exertion
- Workplace dusts

Prevention

Certain chemicals or allergens have been identified by the Association of Occupational and Environmental Clinics as being known to cause asthma. Whenever possible, employers should avoid using these chemicals or take steps to protect team members from exposure. Know your rights and speak up! Your supervisor or a union representative can help.

My workplace triggers or concerns: _____

Special Asthma Considerations

Do you fall into one of these categories? Talk to your healthcare provider about the best strategies for you.

I Have, or Think I Have, Allergies

The same pollen, dust, animal dander or other irritants that make your eyes itch and nose run can also trigger your asthma symptoms. If you think you have allergies but aren't sure, ask your healthcare provider if you should be tested. If you have known allergies, ask your healthcare provider if you should have allergy shots as part of your asthma treatment.

Things I can try: _____

I Have Acid Reflux

Ongoing problems with acid reflux (when stomach acid and food move up from the stomach into the esophagus) can cause asthma symptoms, especially at night. Reflux can also cause symptoms even when you are doing everything you can to control them. That's reason enough to ask your healthcare provider what you can do to get relief. Some recommendations include avoiding certain foods and drinks, waiting two to three hours after a meal before lying down or using pillows to raise your head up while you are sleeping.

Things I can try: _____

I Have, or I Am at Risk of, COPD

Over time, if asthma is not well controlled, the airways in the lungs can be permanently damaged called "airway remodeling." This can put you at risk of chronic obstructive pulmonary disease (COPD). COPD is similar to asthma, but if you have COPD, you suffer with symptoms most days. COPD also gets worse over time, requiring more and more effort to get air into and out of the lungs. You may need to breathe prescribed oxygen for all or part of the day. If you have COPD, or are at risk, you need to make sure your asthma is well controlled. Be extra careful to avoid asthma triggers.

Things I can try: _____

I Am Pregnant

If asthma is properly controlled, you can generally expect to do fine during pregnancy. Your symptoms might even improve! You should tell the provider who will deliver your baby you have asthma, and tell your asthma doctor you are pregnant. In most cases, you'll need to keep taking asthma medicine during your pregnancy to ensure the baby gets enough oxygen. Many asthma medicines are safe to use during pregnancy, but talk to your healthcare provider to discuss your specific medicines. It's also important to have asthma medicine with you during labor and delivery. Be sure to discuss this in advance with your healthcare team.

Things I can try: _____

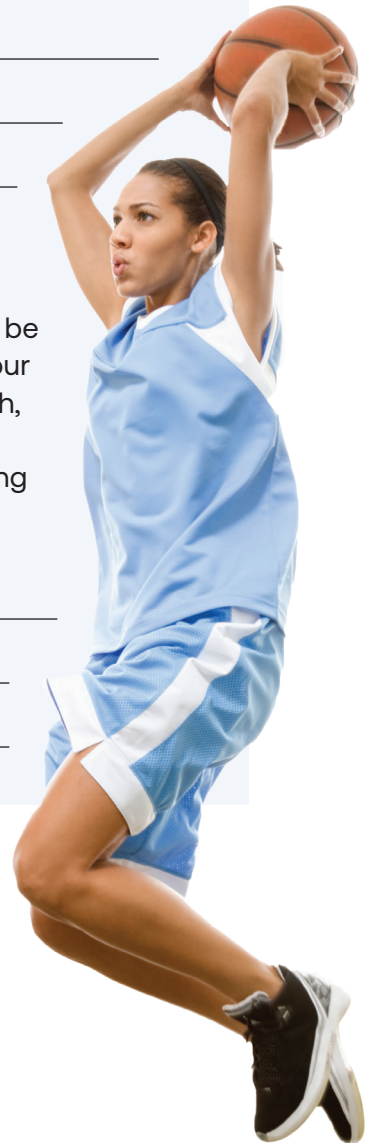
I Have Exercise-Induced Asthma

Although exercise can be an asthma trigger, that doesn't mean you can't be active. In fact, many pro athletes have asthma. As long as you manage your symptoms, you can participate in almost any sport or activity. First, though, ask your healthcare provider if there are any things you should avoid and whether you need to take any medications before exercising. See "Keeping Active Through Exercise" in Section 5 for more on this topic.

Things I can try: _____



Poor asthma management can lead to permanent scarring and damage. This can make it more likely that you can develop more serious lung disease.



Using What You've Learned to Take Control

When you know what to expect from your asthma, what triggers to watch out for and what special strategies to follow, you're in a better position to keep your asthma under control. With well-controlled asthma, you'll be one step closer to meeting the goals you wrote down at the beginning of the book!

Well-Controlled Asthma Means...

Fewer Asthma Troubles

- If your asthma is mild, control may mean your asthma rarely bothers you.
- If your asthma is severe, control may mean having fewer symptoms that keep you from doing what you want to do.

Aside from understanding asthma, keeping it well controlled depends on several things working together:

- Having an asthma support team
- Taking your asthma medicines as directed
- Knowing and avoiding your triggers
- Having an asthma action plan
- Taking good care of yourself

Moving forward, each section in this guide will help you learn new ways of controlling your asthma. Use these skills to reduce your asthma symptoms and to lower your chances of having a flare-up. Then you'll be breathing well more often.

Building Your Asthma Support Team

SECTION

2



Although you are the one person who can truly take control of your asthma, you can't do it alone. For one thing, you're going to need professional help from your healthcare provider or providers. And don't underestimate the role your family, friends, co-workers and employer can play in managing your asthma. Just think about all of the other things in your life they have helped you with!

In Section 2, you'll learn about:

- How to navigate the many types of professional help available
- When to seek urgent help
- How to make the most of your personal connections
- How to approach your employer about your asthma
- How the American Lung Association and other community groups can help

Getting Help From the Professionals

To keep your asthma well controlled, it's important to see your healthcare provider regularly. They can help you track your triggers and symptoms and find the right medicines for you.

There are many types of healthcare providers who treat asthma. Here are some:

- Family doctor or primary care doctor
- Internist
- Nurse practitioner
- Pulmonary specialist
- Physician assistant
- Allergist

It's usually best to choose just one healthcare provider or provider group to see for your asthma. Otherwise, if you change providers a lot, or use only emergency services, it's harder to manage your treatment. It helps to remember asthma treatment may take time to work. Even if you feel like you're not seeing results, better days may be just around the corner.



My Primary Asthma Providers

Name: _____

Phone: _____

After Hours Contact Information:

Name: _____

Phone: _____

After Hours Contact Information:

When Should I Go?



Making the Most of Your Visits

Before you go for an office visit, make it a habit to write down the things you want to talk about. This will make visits more useful for both you and your healthcare provider. Here are some things your provider will want to know...



Asthma at Work: Talking to Your Provider

If you think your workplace may be causing your symptoms, tell your healthcare provider. It will help determine your action plan. Some useful details to share:

- If you cough and wheeze during your work week, but not on your days off
- If your nose and eyes start to feel irritated soon after getting to work
- If your co-workers have symptoms too
- If you work with any chemicals or allergens

Things to tell my doctor: _____

ResourceConnect

For a ready-to-use form perfect for writing down the things you want to talk about at your next appointment, search for “Getting Ready for Your Next Office Visit” at [Lung.org](https://www.lung.org).

What to Expect During Your Visits

Here are some of the tests and treatment discussions you may have during your asthma visit:

- Discussion about triggers and symptoms
- Lung function tests to see how well your lungs are working
- Discussion about your activity level and quality of life
- Discussion about asthma flare-ups and what caused your symptoms to get worse
- Discussion about asthma medicines, including side effects and inhaler technique
- Additional tests such as a blood or allergy test to see what role allergies may be playing in asthma control

Common Lung Function Tests

- **Spirometry:** measures the amount and speed of the air you blow out.
- **Peak flow monitoring:** measures the greatest amount of air you blow out.
- **FEV1 Monitoring:** measures the amount of air you can blow out in one second.
- **FeNO Test:** measures inflammation along with how well you move air in and out of your lungs.

Keep in mind, these are not onetime conversations. You'll need to talk with your provider at least every six months or more often if you are experiencing symptoms or problems with asthma medicines.

Communicating With Your Healthcare Provider

The things your healthcare provider tells you are only useful if you understand them and how they relate to asthma management. Ask as many questions as needed to understand:

- **What you need to do to control your asthma, when to do it and for how long.** After all, you're the one who ultimately is responsible for managing your asthma on a daily basis.
- **When you should get urgent medical care.** Sometimes it's hard to know when your symptoms require an immediate call to your doctor, or even a trip to the emergency room. Wait too long, and you could need even more complicated and expensive care. (You'll learn some helpful guidelines next!)
- **What your options are.** If you're uncomfortable about part of your treatment plan, ask about other options that might work better for you.

My Questions

Knowing When to Seek Urgent Help

Even well-managed asthma can sometimes get out of control. Here are some guidelines for when to get extra help.

Call a healthcare provider right away when...

- You feel faint, dizzy or weak
- You have trouble doing a routine activity, such as cooking dinner or taking out the trash
- You're wheezing when you breathe in or out, especially if this is different from your usual breathing pattern

Call 911 (or your local emergency number) or go to the emergency room right away when...

- Your wheezing gets worse even after you have given your medicine time to start working (Most quick-relief medicines work within 15 minutes)
- Your lips or nails are turning blue
- Your nostrils are flaring each time you breathe in
- The skin between your ribs or at the base of your throat feels like it stretches every time you breathe in
- You are taking 30 or more breaths per minute
- Talking or walking at a normal pace is difficult

Never Drive Yourself To An Emergency Room!

Tips for Getting Urgent Help

- Be ready with the phone numbers you need (healthcare provider, emergency contact person, emergency medical services). Keep this contact information in your mobile phone, wallet and in easy-to-see areas of your home and workplace.
- If in doubt about your condition, call 911 or the local emergency number.
- Write down your address and keep it by the phone in case someone else (besides yourself) has to direct an emergency operator.



When to See an Asthma Specialist

If you rely on your primary care doctor for asthma care, but are wondering if you should see an asthma or pulmonary specialist, allergist or seek out a second opinion this quiz can help you decide!

Quick Quiz > Do I Need to See an Asthma Specialist?

1. I have trouble doing even everyday things in my life, or exercising.	Yes	No
2. I have very bad and long-lasting side effects from medicines.	Yes	No
3. I am following my treatment plan, but my asthma is still out of control.	Yes	No

If you answered yes to any of these questions, it may be time to seek more help. Remember to get a referral from your primary healthcare provider if required by your insurance company. If they refuse, and you feel like your needs are not being met, don't take no for an answer. Stand up for your rights as a patient, or find a new primary care doctor you trust.





Other Members of Your Asthma Care Team

Your primary care doctor or asthma specialist is just one of the people who can help. Meet some others:

- **Asthma educators** can help organize your asthma management plan, answer questions and direct you to more resources. When choosing a facility, look for one with a Certified Asthma Educator (AE-C) on staff.
- **Pharmacists** are the experts on asthma medicine. Ask them about dosage, side effects and possible interactions with other prescription and over-the-counter drugs you are using.
- **Psychologists and family counselors** can help with stress management, especially if emotions trigger your asthma. They can also give advice if asthma disrupts your personal life.
- **Dietitians and nutritionists** are the people to turn to if food allergies are a trigger. They can also help you manage your weight. (When you are overweight, it can be harder to breathe.)
- **Employment counselors** can help if your asthma is job-related. Ask them to suggest adjustments to your work environment, or help guide you when a career change may be needed instead.
- **Complementary medicine providers** such as acupuncturists, homeopaths, herbalists and chiropractors, may have more ideas for symptom relief. If so, just be sure to talk to your primary healthcare provider first. And, never use alternative remedies in place of prescribed asthma medicines!

Seeking Support From Your Personal Connections

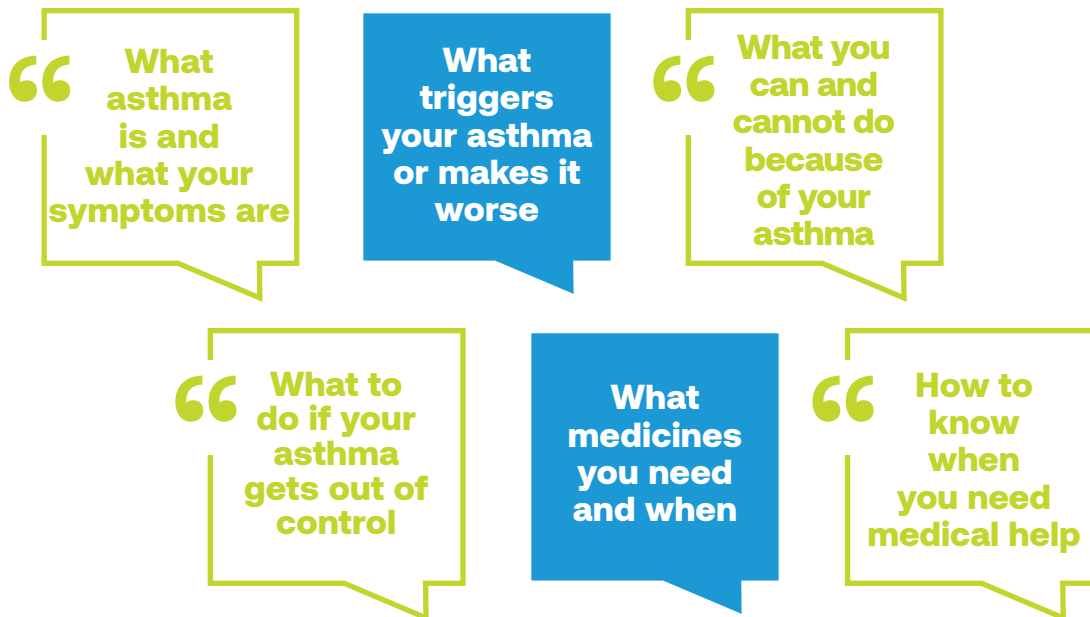
Your healthcare provider can give you the medicine and information you need, but it's your family, friends and co-workers who are the biggest part of your day-to-day life. It's very important to talk to the people you spend the most time with about your asthma.

Family, friends and co-workers can help you:

- Cope with asthma and reduce stress.
- Avoid asthma triggers.
- Get control back when you're having signs of a flare-up.

Ask your family members to read this guide and learn how to manage asthma with you.

Here are some things to tell the people you spend your time with:



Approaching Your Employer About Your Asthma

Whether you work in a service industry, a classroom, a factory, a laboratory, an office or outdoors, you need to be aware of the triggers that are present and be willing to talk to your employer about what can be done to help you avoid them. Here are a few things you should know:

- Your employer is legally responsible for informing you of general and specific hazards connected with your job. Your employer is also responsible for providing you with a safe and healthy workplace.
- You need to be your own advocate. If something in your workplace is triggering your symptoms, it's up to you to work with management to find solutions. There may be an easy fix.
- If a potential problem arises in your work environment, let your supervisor and building management know. Follow the usual and proper steps to alert them, as you may need to document those steps later.
- If a new issue suddenly causes asthma symptoms, report the symptoms to your supervisor or the company's health or safety officer as directed by workplace policy. Also tell your healthcare provider about any new triggers in your environment to see if your action plan should be adjusted.



Taking Advantage of Valuable Resources

Make the American Lung Association and other community support groups a part of your asthma support team too!

Get to Know What the American Lung Association Offers

There are three primary ways the American Lung Association can help:

1. **Visit us at [Lung.org/asthma](https://lung.org/asthma).** Our online resources come right from asthma experts and include helpful videos and information you can use at home, at work and at school. Many of these resources are highlighted in this guide.
2. **Call our Lung HelpLine at 1-800-LUNGUSA (1-800-586-4872).** Get direct access to registered nurses and respiratory therapists who can answer your questions about asthma, allergies, quitting smoking, air quality and many other topics. You can also use this number to find a local Lung Association.
3. **Contact your local Lung Association.** We have offices throughout the United States that are a great resource for finding asthma specialists and support groups in your area.

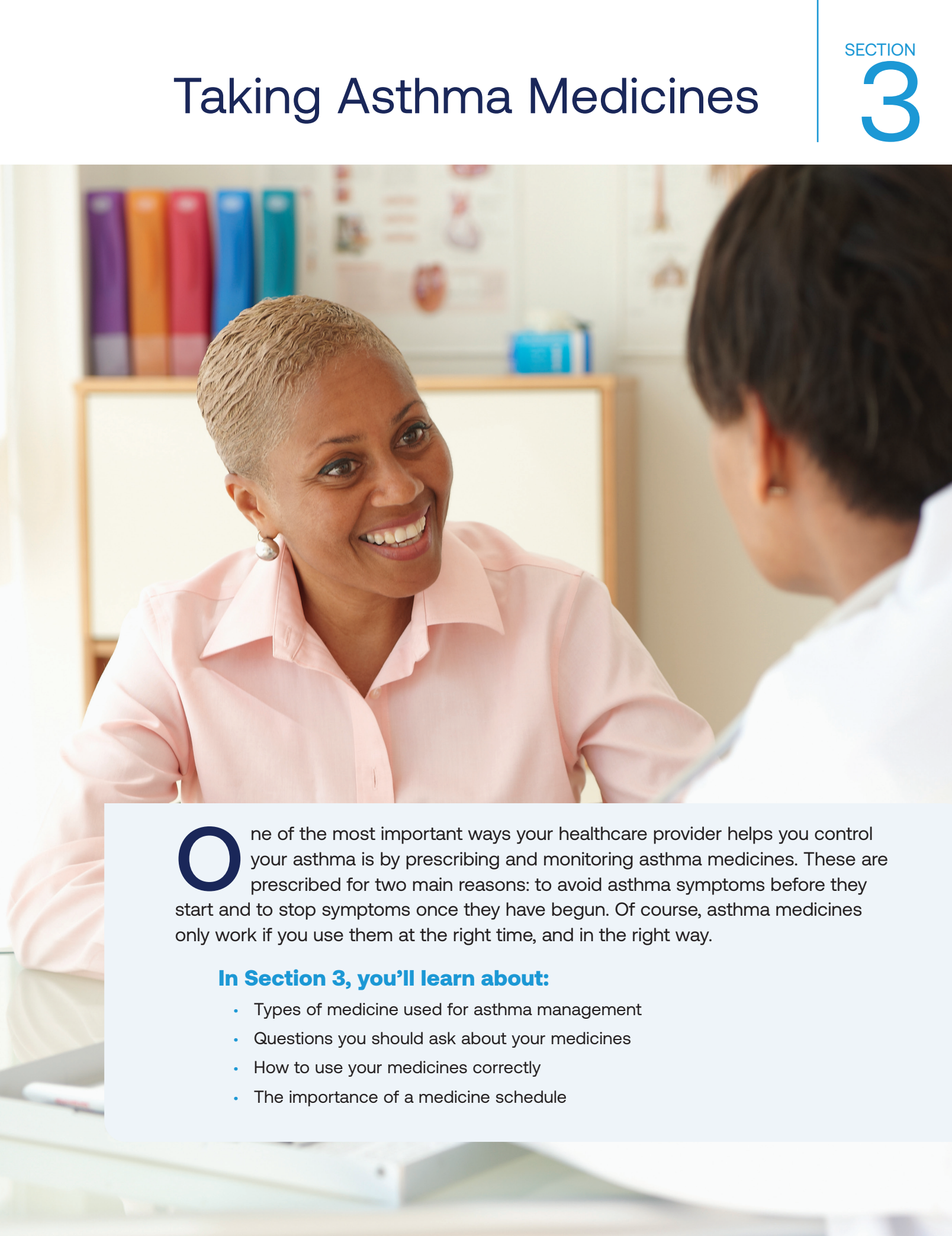
Join a Community Support Group

Because asthma is so common—millions of people worldwide have it, just like you—many communities have support groups. In these groups, people with asthma and their families can talk about shared concerns and ways to deal with triggers.

Join a Better Breathers Club in your area at [Lung.org/better-breathers](https://lung.org/better-breathers). Or visit Living With Asthma, a free online support community for people with asthma and their caregivers. Learn more and join at [Lung.org/community](https://lung.org/community).

My Support Network

Taking Asthma Medicines



One of the most important ways your healthcare provider helps you control your asthma is by prescribing and monitoring asthma medicines. These are prescribed for two main reasons: to avoid asthma symptoms before they start and to stop symptoms once they have begun. Of course, asthma medicines only work if you use them at the right time, and in the right way.

In Section 3, you'll learn about:

- Types of medicine used for asthma management
- Questions you should ask about your medicines
- How to use your medicines correctly
- The importance of a medicine schedule

Medicines for Daily Asthma Management

There are two main kinds of medicines used for daily asthma management. Your healthcare provider will help you decide if you need to use both or just one type.

Long-Term Control Medicines (controller, maintenance or anti-inflammatory medicines)

Purpose: To keep asthma from getting out of control by preventing symptoms before they start

How they work: Control swelling and mucus in your airways, which makes it easier to breathe

Key points:

- Will not help an asthma flare-up after it has started
- Must be taken regularly to work (even when you have no symptoms)
- Are nonaddictive, even when taken for many years

Quick-Relief Medicines (puffers)

Purpose: To stop asthma symptoms once they start and keep them from getting worse

How they work: Relax the muscles that tighten around your airways so you can breathe easier

Key points:

- Inhaled so they work more quickly
- Should be used only as needed
- Should NOT be needed more than two times per week (using them too much can affect how well they work)
- Should ALWAYS be carried with you
- Although sometimes called “rescue medicines,” should be used before symptoms become an emergency

ResourceConnect

Learn more about the different types of asthma medicines at [Lung.org/asthma-meds](https://lung.org/asthma-meds).

If Your Asthma is Severe

If you have a more severe form of asthma that is not well-controlled with standard therapy, there are several other options available for treatment. These more targeted therapies are given in your doctor's office. This is done once a month with the medicines delivered by either a shot or intravenously (with an IV).

Don't Just Take Your Medicines, Get to Know Them!

The better you know your medicines, the more likely you'll be to use them correctly and get the best benefits. Ask your doctor or pharmacist:

- What is the brand and generic name for my medicine?
- How does it work to treat my symptoms?
- When should I take it? Is it a daily medicine, or just for when I have symptoms?
- What is the right way to take the medicine?
- What would happen if I missed a dose or stopped taking it?
- Are there any foods I should avoid? What about alcohol or other drugs?
- What side effects should I watch for, and what should I do if they happen?
- How might my asthma medicine affect other medicines I'm taking?
- What's the correct way to store my medicine?



Medicine Do's and Don'ts

✓ DO

- **DO** refill your medicine prescriptions before they run out.
- **DO** tell your healthcare provider if you're having side effects or trouble sticking to your schedule. There may be better options!
- **DO** ask your healthcare provider if they have any samples you can try before filling your prescription. Then, if you have side effects and have to stop the medicine, you will not have spent any money yet.

✗ DON'T

- **DON'T** stop taking your medicine unless told to.
- **DON'T** take someone else's medicines, ever!
- **DON'T** share your medicine with anyone either.



Making a Medicine Schedule

A medicine schedule is a great way to keep track of your prescriptions for your asthma, plus anything else you are taking. Here's how to create yours:

1. Chart It!

Write down, in a chart format:

- Each medicine or supplement you take
- What days of the week you take it
- How often you take it each day
- Your dose

Remember: Include all prescription and over-the-counter medicines, plus any herbal remedies, vitamins or other supplements.

2. Share It!

Show a copy to your healthcare providers (even those not directly involved in your asthma care) and your pharmacist. They will be able to spot any potential interaction problems or overlaps.

3. Post It!

Hang a copy at home where you'll see it often to help you remember when to take each medicine. Also keep a copy in your purse or wallet so you always have it with you.



If your medicines change, **remember to update your schedule, too.**

ResourceConnect

Print a ready-to-use medicine schedule by searching for "Medicine Schedule" at [Lung.org](https://www.lung.org).

FAQs: Asthma Medicines

Q: Why do I need to include all the drugs I am taking on my schedule, even if they are over-the-counter?

A: Any drug, even aspirin and antacids, can affect the way your asthma medicine works. Some can make it less effective. Others can harm you when they mix with your asthma medicines. By including them on your schedule and sharing it with your healthcare provider or pharmacist, they can help spot potential problems.

Q: I read about a natural supplement to help my asthma. If it's all natural, is it OK to take?

A: First, nothing should be used in place of prescribed asthma medicines. That said, if you do want to try a natural remedy in addition to your prescribed treatment, just be sure to let your healthcare provider know. Some alternative medicines and treatments have not been tested for safety when used along with prescribed asthma medicines. Also, the quality and strength of natural supplements may be different each time you buy them.

Q: What about using over-the-counter medicines to treat my asthma symptoms?

A: Over-the-counter (OTC) drugs—those you can get without a prescription—should never be used to treat asthma symptoms unless specifically directed by your healthcare provider. Although you may seem to get temporary relief, OTC medicines can also raise your blood pressure and heart rate to an unhealthy level. If you feel like you need something more than your regular asthma medicine, tell your healthcare provider. They may be able to prescribe a new medicine that works better for you.

Q: What if my asthma medicines are just too expensive?

A: Most major drug companies have programs to provide medicines at reduced cost or even free of charge. In most cases your healthcare provider will need to apply to the program for you.



Your How-To Guide for Medicine Delivery Devices

Most asthma medicines come as sprays or powders that are breathed in through your mouth using one of several delivery devices. In order for these medicines to work, they need to get deep down into the lungs. To do this successfully, you need to know how to use your specific medicine delivery device correctly.

Using your medicine correctly means:

**Taking
the right
medicine**

+

**In the right
amount**

+

**At the
right time**

+

**With
the right
technique!**

The next few pages are a “How-To” guide for using the most common devices. You don’t need to know how to use them all, but you should know the correct way to use the type you’ve been prescribed.

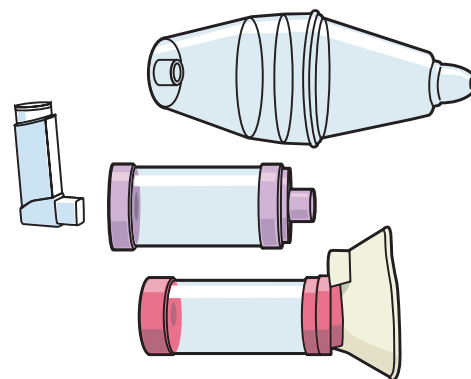
Metered-Dose Inhalers

A metered-dose inhaler (MDI) delivers asthma medicine as a measured dose in mist form. It can be very effective, but because of the speed at which doses are delivered, it can also be hard to use correctly.

The Basics, Part One: Using a Spacer

To increase the chance you'll use your MDI correctly, your healthcare provider may recommend using your inhaler along with a device called a spacer. Here are three good reasons to take this advice:

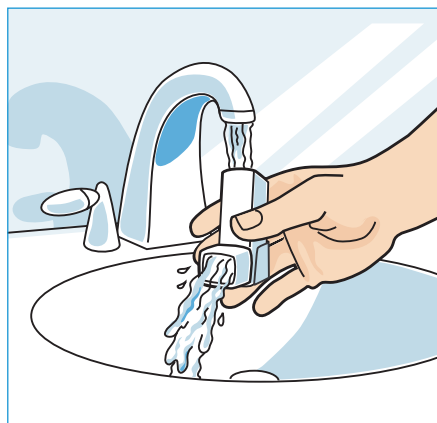
- **Spacers make using an MDI easier.** A spacer helps you avoid problems with spraying and breathing at the same time, or with inhaling medicine too fast. Without a spacer, and if your technique is off, most of the medicine hits the back of your throat instead of going down into your lungs.
- **Spacers get your medicine where it needs to go.** With a spacer, medicine squirts into the center of the spacer and breaks into smaller droplets. These droplets are able to be moved more easily deeper into your lungs.
- **Spacers are easy to get.** Spacers are available for purchase at most drugstores.



The Basics, Part Two: Keeping Your Inhaler Clean

To prevent germs from building up in your inhaler, or to keep it from getting clogged, your inhaler should be cleaned once or twice a week. It's quick and easy:

1. Remove the medicine canister from the plastic case (called the activator).
2. Rinse the plastic case with warm, soapy water.
3. Dry the plastic case and put the medicine canister back in place.

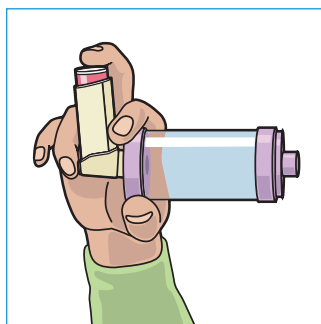


Step 2



Not getting the results you expect? Ask your healthcare provider or asthma educator to review your technique and dosage to make sure you're using it correctly.

How to Use a Metered-Dose Inhaler: With Spacer or Valved-Holding Chamber



Step 2



Step 4



Step 6



Follow any priming and cleaning instructions found in the inhaler box insert.

1. Make sure the inhaler and spacer are free of foreign objects. Shake the inhaler for 10 seconds to mix the medicine. Remove the cap from the mouthpiece.
2. Place the inhaler mouthpiece onto the end of the spacer. Hold the inhaler between your index finger and thumb. Stand up, take a deep breath in, and breathe out as much as you can.
3. Put the end of the spacer into your mouth, between your teeth and above your tongue. Close your lips around the spacer.
4. Press down on the inhaler to release the spray, and begin to breathe in through your mouth. Breathe in deeply and slowly (for about 5 seconds) to pull the medicine deep into your lungs. If you breathe in too quickly, the spacer may make a whistling sound.
5. Hold your breath for 5 to 10 seconds—as long as you comfortably can, with your mouth closed.
6. Breathe out slowly through your mouth. If you breathe out too quickly, the medicine will not settle into your lungs.
7. If directed to take a second puff, wait 1 minute then repeat Steps 1 through 6.
8. Rinse your mouth out with water and spit it out.

More Tips for Using an MDI

- Always keep the protective cap on the inhaler when not in use.
- Store your inhaler in a cool, dry place. Never store it in a car. At high temperatures, the medicine will begin to lose its effectiveness.
- Don't forget to rinse! Rinsing your mouth out after using an inhaled corticosteroid will help you avoid getting a yeast infection in the throat or mouth.

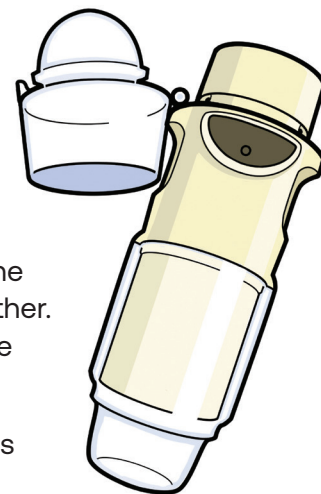
VideoConnect

Watch a video demonstrating how to use a metered-dose inhaler with a spacer or valved holding chamber at [Lung.org/asthma-meds](https://lung.org/asthma-meds).

How to Use a RespiMat®

Before Using a New RespiMat

1. Remove the RespiMat inhaler, cartridge and the instructions from the package.
2. With the cap closed, remove the clear base by firmly pressing the safety latch with one hand and pulling the clear base with the other. This will expose the piercing element. Be careful not to touch the piercing element.
3. Write the discard date on the label. The discard date is 3 months from the time the RespiMat is put together.
4. Insert the narrow end of the cartridge into the inhaler. You will need to place the RespiMat on a hard surface and push down firmly until you hear a “click”.
5. Put the clear base back into place by pressing together firmly until you hear a “click.” Once the RespiMat has been put together, do not remove the clear base or the cartridge.
6. With the cap closed, turn the clear base in the direction of the arrows on the label until you hear a “click.” The clear base will move about a half turn.
7. Open the cap until it snaps open fully.
8. Point the RespiMat toward the ground. Press the dose-release button until you see a mist. Press the dose-release button 3 more times to prepare the device. Your RespiMat is now ready to use.



More Tips for Using a RespiMat Inhaler

- Remember T.O.P., or Turn, Open, Press, to load a dose and deliver the medicine

Loading a Dose of Medicine

1. With the cap closed, turn the clear base in the direction of the arrows on the label until you hear a “click.” The clear base will move about a half turn.
2. Open the cap until it snaps open fully.

Breathing In the Medicine

3. Turn your head away from the RespiMat. Breathe in and then breathe out fully.
4. Point the RespiMat to the back of your throat.
5. Close your lips around the mouthpiece without covering the air vents with your mouth or fingers.
6. While taking a slow, deep breath through your mouth, press the dose-release button and continue to breathe in. Remove the RespiMat from your mouth.
7. Hold your breath for 10 seconds—or as long as you comfortably can, with your mouth closed. Then resume normal breathing.

Dry Powder Inhalers

As the name suggests, dry powder inhalers deliver a measured dose of medicine in a dry powder form. Unlike other inhaled medicines, you may not taste, smell or feel the powder. As long as you follow the directions, you will get your full dose of medicine.

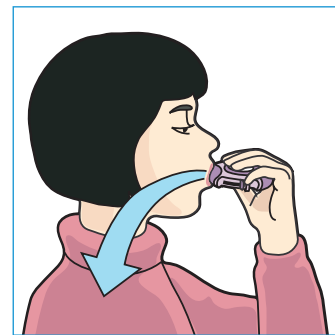
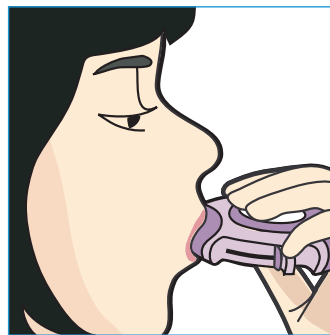
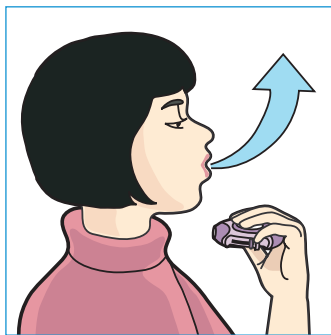
Types of dry powder inhalers include:

- RespiClick®
- Diskus®
- Flexhaler®
- Twisthaler®
- Ellipta®

The Basics

All dry powder inhalers have a few points in common. For example, no matter which one you use, a dry powder inhaler works by releasing the medicine as you breathe in quickly. Most also have a dose indicator somewhere on the device to help keep track of how much medicine remains after each treatment.

For best results, always follow these steps:



1. Before breathing in the dose of medicine, turn your head away from the inhaler and gently breathe out as much air as you can. Do not blow into the inhaler.
2. Seal your lips around the mouthpiece of the device to ensure that all the medicine enters your body.
3. Breathe in quickly and deeply through your mouth. Hold your breath for 10 seconds, or as long as directed.

How to Use a RespiClick®

Before Using a New RespiClick

1. Remove the RespiClick from the foil pouch.
2. Check the counter. It should show the number 200. This is the number of doses in the inhaler.
3. The dose counter will display '0' when the inhaler is empty.

Loading a Dose of Medicine

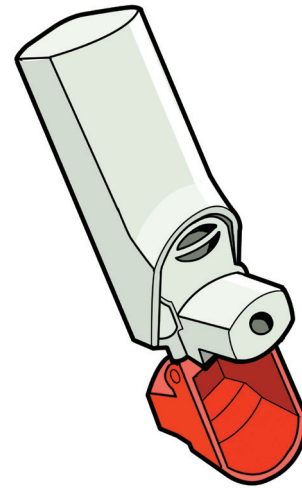
1. Hold the RespiClick upright.
2. Open the cap all the way back until you hear a “click.”
3. The RespiClick is ready to use.

Breathing In the Medicine

4. Turn your head away from the RespiClick. Breathe in and then breathe out fully.
5. Put the mouthpiece in your mouth and close your lips around it.
6. Breathe in deeply and steadily through your mouth. Your lungs should feel completely full of air. Remove the RespiClick from your mouth.
7. Hold your breath for about 10 seconds—or as long as you comfortably can, with your mouth closed. Then resume normal breathing.
8. Check the dose counter on the back of the RespiClick to make sure that you received a dose of medicine.

9. Close the cap over the mouthpiece after each use of the RespiClick.

10. If directed to take another dose, repeat Steps 4 through 9.



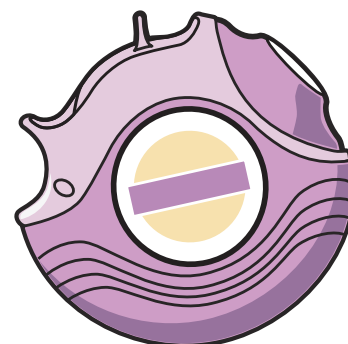
More Tips for Using a RespiClick Inhaler

- Do not open the cap unless you are ready to take a dose.
- Always close the cap after each inhalation so your inhaler will be ready for your next dose.
- The dose counter only displays even numbers in the window.
- The dose counter will turn red when there are 20 doses left.
- Discard the inhaler after 13 months from removing from the foil pack or after the expiration date on the package.
- Do not let your lips or fingers block the vent around the mouthpiece.

How to Use a Diskus®

Loading a Dose of Medicine

1. Hold the Diskus flat in one hand and put the thumb of your other hand on the thumb grip.
2. Push your thumb away from you as far as it will go until you hear a click. This action opens the Diskus so you can see the mouthpiece.
3. Hold the Diskus level—like you are about to take a bite of a hamburger. Slide the lever away from you as far as it will go until it clicks. The Diskus is now ready to use. You will see the dose counter decrease by one. Hold the Diskus level to prevent the dry powdered medicine from falling to the bottom of the inhaler, wasting the dose.



Breathing In the Medicine

4. Turn your head away from the Diskus. Take a deep breath in, and breathe out as much as you can.
5. Put the Diskus to your lips and make a seal around the mouthpiece.
6. Breathe in deeply and steadily through your mouth. Remove the Diskus from your mouth.
7. Hold your breath for 5 to 10 seconds—or for as long as you comfortably can, with your mouth closed. Then resume normal breathing.
8. Close the Diskus by placing your thumb in the thumb grip. Slide the grip back toward you, over the mouthpiece, until it clicks. This resets the inhaler so it is ready to use for your next treatment.
9. Rinse your mouth out with water and spit it out.

More Tips for Using a Diskus

- The Diskus dose meter is on the top. Doses five through zero are in red to warn you to refill the prescription. When the “0” appears in the dose window, throw away the Diskus and start a new one.
- Keep the Diskus closed when not in use. Store in a cool, dry place.
- Keep the Diskus dry. If the mouthpiece gets dirty, wipe it with a cloth.

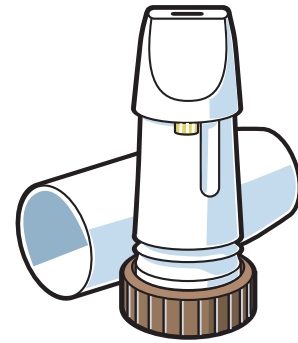
VideoConnect

Watch a video demonstrating how to use a Diskus® at [Lung.org/asthma-meds](https://lung.org/asthma-meds).

How to Use a Flexhaler®

Before Using a New Flexhaler

1. Twist the cover and lift it off. Hold the Flexhaler with the mouthpiece pointing up.
2. Twist the brown grip to the right as far as it will go and then back to the left. You will hear a click. The device is now primed and ready to use.



Loading a Dose of Medicine

1. Twist the cover and lift it off.
2. Hold the Flexhaler with the mouthpiece pointing up to load the medicine correctly into the chamber.
3. Twist the brown grip to the right as far as it will go and then back to the left. You will hear a click. The device is ready to use.

Breathing In the Medicine

4. Turn your head away from the Flexhaler. Gently breathe out as much air as you can.
5. Seal your lips around the Flexhaler mouthpiece. Be sure to hold the inhaler in a horizontal position.
6. Breathe in deeply and steadily through your mouth. Remove the Flexhaler from your mouth.
7. Hold your breath for 5 to 10 seconds—or for as long as you comfortably can, with your mouth closed. Then resume normal breathing. Rinse your mouth with water and spit it out.
8. If more than one dose is prescribed, repeat Steps 1 through 7 for each dose.
9. After you have finished, place the cover on the Flexhaler and twist it completely closed.

More Tips for Using a Flexhaler

- The Flexhaler has a dose indicator on the barrel of the inhaler. When a red mark appears in the window, there are 20 doses left. Refill your prescription. When the “0” appears in the window, throw away the Flexhaler and start a new one.
- Keep the Flexhaler closed when not in use. Store in a cool, dry place.
- If the mouthpiece gets dirty, wipe it with a cloth.

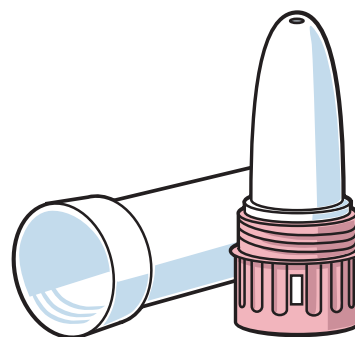
VideoConnect

Watch a video demonstrating how to use a Flexhaler® at [Lung.org/asthma-meds](https://lung.org/asthma-meds).

How to Use a Twisthaler®

Before Using a New Twisthaler

1. Remove the Twisthaler from the foil pouch.
2. Write the date on the cap label. Throw away the inhaler 45 days after this date or when the dose counter shows “00,” whichever comes first.



Loading a Dose of Medicine

1. Hold the Twisthaler straight up with the pink base on the bottom. That way, you will be sure you get the right amount of medicine with each dose.
2. Remove the cap from the inhaler by twisting it. The dose counter will decrease by one. If loaded properly, the indented arrow will line up with the dose counter.

Breathing In the Medicine

3. Turn your head away from the Twisthaler. Gently breathe out as much air as you can.
4. Seal your lips around the Twisthaler mouthpiece. Be sure to hold the inhaler in a horizontal position.
5. Breathe in deeply and steadily through your mouth. Remove the Twisthaler from your mouth.
6. Hold your breath for 5 to 10 seconds—or for as long as you comfortably can, with your mouth closed. Then resume normal breathing.
7. If more than one dose is prescribed, repeat Steps 1 through 6 for each dose.
8. Rinse your mouth with water and spit it out.
9. After you have finished taking a treatment, place the cover on the Twisthaler and twist it to close. When you hear a click, you will know it is completely closed. This will keep it clean and dry.

More Tips for Using a Twisthaler

- The Twisthaler has a dose indicator on the pink base of the inhaler. When the “01” appears in the window, there is one dose remaining. When the counter reads “00,” the pink base will lock. Start using a new Twisthaler.
- The only way to properly load the medicine is by twisting the cap, so always keep the cap on the inhaler when not in use.
- Keep the Twisthaler dry. If the mouthpiece gets dirty, wipe it with a cloth.

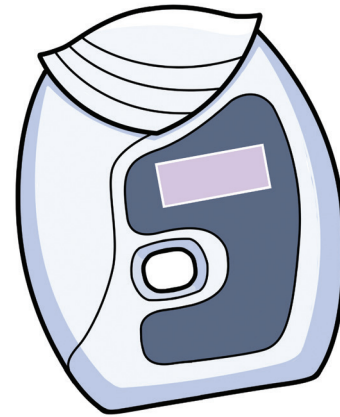
VideoConnect

Watch a video demonstrating how to use a Twisthaler® at [Lung.org/asthma-meds](https://lung.org/asthma-meds).

How to Use an Ellipta®

Before Using a New Ellipta

1. Remove the Ellipta from the packaging by peeling back the lid to open the tray. Remove the device and instructions and throw away the tray and other contents.
2. Write the “Tray opened” and “Discard” dates on the inhaler label. The “Discard” date is 6 weeks from the date you opened the tray.
3. Check the counter. It should show the number 30. This is the number of doses in the inhaler.



Loading a Dose of Medicine

1. Wait to open the cover until you are ready to take your dose of medicine.
2. Open the cover of the Ellipta, by sliding the cover down to expose the mouthpiece. You should hear a “click.”

Breathing In the Medicine

3. Turn your head away from the Ellipta. Breathe in and then breathe out fully.
4. Put the Ellipta to your lips and make a good seal around the mouthpiece. Your lips should fit comfortably over the curved shaped of the mouthpiece.
5. Breathe in steadily and deeply through your mouth to inhale the dose of medicine. Your lungs should feel completely full of air. Remove the Ellipta from your mouth.
6. Hold your breath for 3 to 4 seconds—or as long as you comfortably can, with your mouth closed.
7. Breathe out slowly and gently.
8. Close the inhaler by sliding the cover up and over the mouthpiece as far as it will go.
9. Rinse your mouth with water and spit it out.

More Tips for Using an Ellipta

- Your inhaler contains 30 doses and includes a dose counter.
- Each time you open the cover fully, you will hear a clicking sound. Your device is ready to use!
- If you open and close the cover without inhaling the medicine, you will lose a dose.
- The counter counts down by 1 each time you open the cover.
- When inhaling the medicine, do not block the air vent with your fingers.
- You may not taste or feel the medicine.
- You can clean the mouthpiece if needed before closing the cover using a dry tissue.

Nebulizers

A nebulizer is a machine that delivers asthma medicine in mist form (wet aerosol). A nebulizer has four basic parts: a medicine cup; a mouthpiece attached to a mask or top piece; thin plastic tubing to connect the mask to the machine; and a compressed air machine.

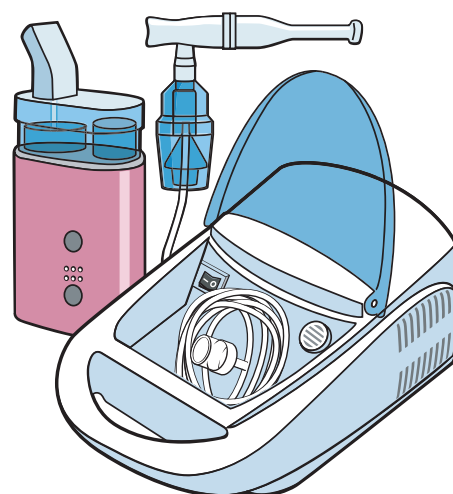
Nebulizers are most helpful for:

- Those who have problems using metered-dose inhalers
- People with severe asthma

How to Use a Nebulizer

Measuring and Taking a Dose

1. Measure the correct amount of normal saline solution using a clean eyedropper and put it into the cup. If your medicine is premixed, go to Step 3.
2. Draw up the correct amount of medicine using a clean eyedropper or syringe and put it into the cup with the saline solution.
3. Attach the mouthpiece to the mask and then attach this to the medicine cup or attach the mask to the cup.
4. Seal your lips tightly around the mouthpiece or place the mask on your face.
5. Turn on the air compressor machine.
6. Take slow, deep breaths in through the mouth. Continue until all of the medicine is gone from the cup (about 10 minutes).



Cleaning the Nebulizer—After Each Use

1. Take the nebulizer apart by removing the tubing and setting it aside. The tubing should not be washed or rinsed.
2. Remove the mask or the mouthpiece and top part from the cup. Rinse each separate part, as well as the medicine eyedropper or syringe, in warm running water for 30 seconds.
3. Shake off excess water. Air-dry on a clean cloth or paper towel.
4. Put the mask or the mouthpiece and top part of cup and tubing back together. Connect to the compressed air machine and run it for 10 to 20 seconds to dry the inside of the pieces.
5. Disconnect the tubing from the compressed air machine. Store the pieces in a sealable plastic bag. Cover the compressed air machine.

Cleaning the Nebulizer—Once or Twice per Week

1. Take the nebulizer apart by removing the tubing and setting it aside. The tubing should not be washed or rinsed.
2. Remove the mask or the mouthpiece and top part from the cup. Wash each separate part, as well as the medicine eyedropper or syringe, with dishwashing soap and warm water.
3. Rinse the soap off the nebulizer pieces under a strong stream of warm water for 30 seconds.
4. Soak nebulizer pieces for 30 minutes in a solution of one-part distilled white vinegar and two-parts distilled water. Throw out the vinegar-water solution after use; do not reuse it.
5. Rinse the nebulizer parts and the eyedropper or syringe under warm running water for 1 minute. Use distilled or sterile water, if possible.
6. Shake off excess water. Air-dry on a clean cloth or paper towel.
7. Put the mask or the mouthpiece and top part of cup and tubing back together. Connect to the compressed air machine and run it for 10 to 20 seconds to dry the inside of the pieces.
8. Disconnect the tubing from the compressed air machine. Store the pieces in a plastic bag.
9. Clean the surface of the compressed air machine with a well-wrung, soapy cloth or sponge. You could also use an alcohol or disinfectant wipe. Air dry and cover.



Keep it clean. Proper cleaning of the nebulizer will help prevent germs that cause infection, and keep it from getting clogged and breaking.

For safety's sake, NEVER PUT THE COMPRESSED AIR MACHINE IN WATER!

VideoConnect

Watch videos demonstrating how to use and clean a nebulizer at [Lung.org/nebulizer](https://lung.org/nebulizer).

Using Tools for Daily Self-Management

SECTION
4




You can do a lot to make your asthma better. Some things are easy. Others, such as making your home or workplace more asthma friendly, require a little planning. But the payoff—having fewer symptoms—is worth it! Of course, that’s one part of daily self-management. Another is having a plan for what to do if your symptoms do flare-up. By taking steps to control your asthma, you can often avoid a medical emergency.

In Section 4, you’ll learn about:

- How to avoid and control your asthma triggers
- How to monitor your airways for trouble
- How to use your asthma action plan
- Steps you can take if you start to lose control

Avoiding and Controlling Asthma Triggers

You learned about triggers in Section 1. Now let's talk action! Check the triggers that cause your symptoms on the following chart. Then, decide which of the tips you will try. Use the "My Solutions" area to write down your own ideas and your personal plan for taking action.

Asthma Trigger and Control Tips	My Solutions 
<input type="checkbox"/> Smoking and Secondhand Smoke	
<ul style="list-style-type: none"><input type="checkbox"/> Make a plan to quit smoking! Get help by calling 1-800-LUNGUSA or visiting Lung.org/FFS.<input type="checkbox"/> Ask others not to smoke near me.<input type="checkbox"/> Do not allow anyone to smoke in my home, car or work area.<input type="checkbox"/> Avoid the homes and cars of people who do allow smoking.<input type="checkbox"/> Patronize smokefree businesses; or if smoking is allowed, eat or sit in nonsmoking areas.<input type="checkbox"/> Avoid the designated smoking area at work.<input type="checkbox"/> Support local efforts for making all public places smokefree. (Learn more at Lung.org. Search for Lung Action Network.)	
<input type="checkbox"/> Wood Smoke and Fires	
<ul style="list-style-type: none"><input type="checkbox"/> Avoid burning wood indoors.<input type="checkbox"/> Allow for airflow around fireplaces or vented appliances.<input type="checkbox"/> Pay attention to air quality forecasts during wildfires and avoid going outside if air pollution levels are poor.	
<input type="checkbox"/> Outdoor Air Pollution	
<ul style="list-style-type: none"><input type="checkbox"/> Check the air quality index (AQI) forecast daily at AirNow.gov. The color-coded system shows when pollution levels are unhealthy.<input type="checkbox"/> Limit exercise/strenuous activities outdoors when the AQI is orange (unhealthy); and avoid outdoor activities when the AQI is red, purple or maroon.<input type="checkbox"/> Always avoid exercising around high-traffic areas.	

☐ Dust and Dust Mites

- ☐ Cover my mattress, box spring and pillows in dust-proof, zippered cases.
- ☐ Wash all bedding (sheets, blankets, bedcovers) in hot water (130°F) weekly.
- ☐ Use washable area rugs in the bedroom instead of carpet.
- ☐ Wash curtains often.
- ☐ Maintain indoor humidity between 30 to 50 percent.
- ☐ Use air conditioner or dehumidifier to lower humidity in my bedroom and home (and clean humidifiers regularly).
- ☐ Dust (damp cloth) and vacuum twice a week. Use a vacuum with a HEPA filter or a central vacuum that vents outside.

NOTE: If you have a dust mite allergy, you should not vacuum yourself or be in a room that is being vacuumed.

- ☐ Avoid upholstered furniture, especially in the bedroom.
- ☐ Store out-of-season clothes in a box or garment bag.
- ☐ Wear a protective face mask in dusty areas at work.

☐ Cockroaches

- ☐ Take out the trash every day.
- ☐ Keep food in sealed containers.
- ☐ Clean up spills and crumbs right away.
- ☐ Clean up standing water in dish racks, sinks, showers and plant saucers.
- ☐ Don't leave pet food out.
- ☐ Use roach baits (but not sprays or foggers!).
- ☐ Seal openings where bugs can get in (outside faucets, holes, around window seals).

☐ Pets, Animal Dander

- ☐ Avoid animals with fur or feathers.
- ☐ Do not let pets inside my home.
- ☐ Keep the pet I have out of my bedroom.

☐ **Mold and Mildew**

- ☐ Keep my home well ventilated and free of dampness.
- ☐ Fix leaks right away.
- ☐ Clean mildew from tiles and shower curtains with detergent or soap.
- ☐ Use an exhaust fan or open a window to get rid of moisture in bathrooms and kitchens.
- ☐ Clean the water basins of air conditioners, humidifiers and refrigerators often.
- ☐ Limit the number of plants in my home and work area.
(Mold likes soil.)
- ☐ Vent the clothes dryer to the outside.
- ☐ Alert management to mold problems at work.

☐ **Pollen**

- ☐ Do not keep fresh flowers with a lot of pollen inside my home or near my work area.
- ☐ Keep doors and windows closed during pollen season, especially during the day.
- ☐ Run my air conditioner unit 30 minutes before I plan to use a room.
- ☐ After being outside for a long time, take a shower and change clothes when I come inside on high pollen and mold count days.
- ☐ Limit outdoor activities when pollen levels are high.

☐ **Strong Odors** (e.g., hairspray, air fresheners, cleaning products)

- ☐ Use unscented products.
- ☐ Ask those living or working around me not to use scented products.
- ☐ Avoid areas with strong smells when possible.
- ☐ Use a fan when I must be near a strong odor.
- ☐ Keeps smells from spreading by closing off areas where the odor is located.

☐ Respiratory Infections

- ☐ Wash my hands frequently to prevent infections.
- ☐ Call my healthcare provider if I think I have a respiratory infection.
- ☐ Get a flu shot every year, and a pneumonia vaccine if 65 years of age or older or my healthcare provider advises it.

☐ Physical Activity/Exercise

- ☐ Start slowly, do a good warm up.
- ☐ Ask my healthcare provider about taking medicine before exercising or physical exertion at work.
- ☐ Take breaks as needed.

☐ Strong Emotions (e.g., stress, crying and even laughing)

- ☐ Practice good general health habits to reduce stress.
- ☐ Avoid stressful situations.
- ☐ Use relaxation exercises and techniques.
- ☐ Take advantage of work breaks and lunch hour.

☐ Cold Air/Extreme Heat

- ☐ Cover my mouth and nose with a scarf when outdoors.
- ☐ Avoid being outside when weather is too cold or too hot.



Products That Help Asthma: Buyer Beware!

Lots of products claim to help asthma symptoms, but few live up to the hype. Not all air purifiers are helpful tools to reduce triggers in the air. Some actually create ozone, a harmful lung irritant. And, humidifiers and vaporizers which are sometimes used to ease asthma symptoms, can actually increase triggers such as dust mites and mold if used improperly! Be sure to do your research and follow all instructions if you want to try one of these products.



Asthma at Work: Controlling Triggers

In addition to the tips already included for controlling your triggers, there are some things that are especially important at work.

- 1. Make sure the air in your workplace circulates freely.** Air vents should be kept open and unblocked. If you notice papers, furniture or equipment in front of or on top of vents, move them if you can, or tell your manager.
- 2. If the type of work you do has you exposed to potential triggers, speak up.** There may be an easy fix. For example, if a cleaning agent is triggering your asthma, ask if there is a nontoxic alternative that could be used. And always let someone know if a chemical substance is not being used properly to avoid it entering the air you breathe.
- 3. Wear appropriate protective equipment.** If respirators or other gear such as gloves, aprons, goggles and face shields are given to you to protect yourself, use it!

Things I can try at work: _____

Monitoring Your Airways

To keep your asthma under control on a daily basis, you have to pay attention to your breathing. There are two ways to do this: being aware of your symptoms and measuring your peak flow rates.

Being Aware of Your Symptoms

Your body usually sends signals when your asthma is getting out of control. These might happen when a trigger is present but could also appear hours, or even the day or night before an asthma flare-up happens. By being aware of your symptoms when they start, you can take action to avoid a flare-up and manage your asthma more effectively.

Using the list below, make a check next to the symptoms you've had before an asthma flare-up. When you start to notice these signals, follow your asthma action plan.

My Early Warning Signs

- | | |
|--|--|
| <input type="checkbox"/> Coughing | <input type="checkbox"/> Restlessness |
| <input type="checkbox"/> Tight feeling in chest | <input type="checkbox"/> Rubbing my chin or throat again and again |
| <input type="checkbox"/> Wheezing | <input type="checkbox"/> Waking up at night |
| <input type="checkbox"/> Normal activities cause asthma symptoms | <input type="checkbox"/> Increased use of my quick-relief inhaler |
| <input type="checkbox"/> Feeling tired | <input type="checkbox"/> Others (list) |
| <input type="checkbox"/> Need to clear my throat often | _____ |
| <input type="checkbox"/> Sore, itchy throat | _____ |
| <input type="checkbox"/> Dry mouth | _____ |
| <input type="checkbox"/> Fever | _____ |
| <input type="checkbox"/> Feeling nervous, grumpy or upset | _____ |
| <input type="checkbox"/> Rapid heartbeat | _____ |
| <input type="checkbox"/> Head/nose stuffed up | _____ |

Measuring Your Peak Flow Rate

Measuring your peak flow rate, which is how much air you can breathe out from your lungs at a time, is another way to monitor your airways. When your peak flow rate is low, it tells you your asthma is getting worse, even before you feel symptoms. Using peak flow rates is best if:

- You are newly diagnosed and want to understand your asthma better.
- You have trouble perceiving your symptoms.

Your Personal Best Peak Flow Rate

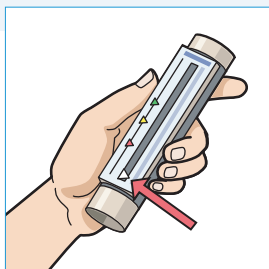
To use your peak flow rate as part of your asthma action plan, you'll need to find your personal-best to use as a baseline. To do so:

- Measure your peak flow twice a day (morning and afternoon) for two to three weeks when you are not having any breathing problems. You'll blow into your peak flow meter three times at each use.
- Write down the highest number of the three blows for each use.

You may find your peak flow changes from one day to the next or is higher during one part of the day. This is normal. Your personal best will be the highest peak flow rate achieved overall. You can learn more about using your peak flow rates as part of your asthma action plan by searching for "Peak Flow Rates" at [Lung.org](https://www.lung.org).

How to Use a Peak Flow Meter

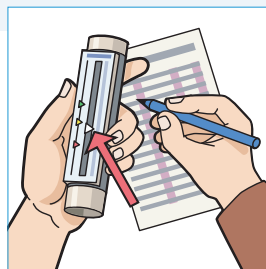
1. Move the pointer on the flow meter to "0"
2. Stand up straight.
3. Take a deep breath.
4. Place the meter in your mouth, between your teeth. Keep your tongue underneath the mouthpiece. Close your lips around the meter. Blow into the meter as hard and fast as you can.
5. Write down the number shown on the flow meter.
6. Reset the marker to zero.
7. Breathe a few normal breaths and repeat Steps 1 through 6 two more times.



Step 1



Step 4



Step 5

Writing Your Asthma Action Plan

Your asthma action plan is one of the most important tools you'll have. Based on your current asthma symptoms or peak flow rate, your asthma action plan tells you four important things:

American Lung Association. **My Asthma Action Plan**

Name: _____ DOB: ____ / ____ / ____
Severity Classification: ☐ Intermittent ☐ Mild Persistent ☐ Moderate Persistent ☐ Severe Persistent
Asthma Triggers (list): _____
Peak Flow Meter Personal Best: _____

Green Zone: Doing Well

Symptoms: Breathing is good – No cough or wheeze – Can work and play – Sleeps well at night
Peak Flow Meter _____ (more than 80% of personal best)

Control Medicine(s)	Medicine	How much to take	When and how often to take it
	_____	_____	_____

Physical Activity ☐ Use Albuterol/Levalbuterol _____ puffs, 15 minutes before activity
☐ with all activity ☐ when you feel you need it

Yellow Zone: Caution

Symptoms: Some problems breathing – Cough, wheeze, or tight chest – Problems working or playing – Wake at night
Peak Flow Meter _____ to _____ (between 50% and 79% of personal best)

Quick-relief Medicine(s) ☐ Albuterol/Levalbuterol _____ puffs, every 4 hours as needed
Control Medicine(s) ☐ Continue Green Zone medicines
☐ Add _____ ☐ Change to _____

You should feel better within 20–60 minutes of the quick-relief treatment. If you are getting worse or are in the Yellow Zone for more than 24 hours, THEN follow the instructions in the RED ZONE and call the doctor right away!

Red Zone: Get Help Now!

Symptoms: Lots of problems breathing – Cannot work or play – Getting worse instead of better – Medicine is not helping
Peak Flow Meter _____ (less than 50% of personal best)

Take Quick-relief Medicine NOW! ☐ Albuterol/Levalbuterol _____ puffs, _____ (how frequently)
Call 911 immediately if the following danger signs are present:

- Trouble walking/talking due to shortness of breath
- Lips or fingernails are blue
- Still in the red zone after 15 minutes

Emergency Contact Name _____ Phone (____) _____ - _____
Emergency Contact Name _____ Phone (____) _____ - _____

Date: ____ / ____ / ____ **1-800-LUNGUSA | Lung.org**

ALA Asthma AP V1 3 18 2020

1. When and how to use your medicines

2. What symptoms to watch for

3. When to call your healthcare provider

4. When to go for emergency medical care

Keep your asthma action plan and emergency contact information where family and friends can see it, in case of an asthma flare-up.

Your Asthma Zones

Your asthma action plan is broken down into three zones. Based on your symptoms, or your peak flow rates, you'll know exactly the right actions to take.

Green Zone: Doing Well

You've got things under control! This means you're breathing well and able to go about your day with ease. In this zone, you'll still take your medicines as directed, but no special action is needed.

Yellow Zone: Caution

Slow down and take action! You might need your quick-relief medicine, or to change how you are using your long-term medicine for a few days. You'll also be given specific direction on when to call your healthcare provider for more help.

Red Zone: Get Help Now!

Stop and take urgent action! At this stage, you may need to call an ambulance if your medicines don't work quickly to relieve your symptoms. Your plan will help you decide!

Tips for Breathing When Asthma Is Out of Control

1. Sit with one hand over your upper chest and one hand over your stomach.
2. Breathe in through your nose. The hand over your stomach should rise. The hand over your upper chest should not move.
3. Hold your breath for three seconds (count one one-thousand, two one-thousand, three one-thousand).
4. Breathe out slowly through the mouth with your lips puckered, as if blowing out a candle.
5. Repeat steps 1 through 4 until your breathing stabilizes.

VideoConnect

Watch videos demonstrating more helpful techniques to use when you are short of breath—pursed lip breathing and belly breathing—at [Lung.org/breathing-exercises](https://lung.org/breathing-exercises).

Using Your Asthma Action Plan to Regain Control

If you feel an asthma flare-up starting, your goal is to take control back! Now that you know what an asthma action plan is, here's how you can use it in combination with other helpful tools:

When a Flare-Up Starts...

Step 1: Stay Calm

Don't panic. Getting upset only makes symptoms worse. Instead, try to breathe as normally as possible. The tips on the previous page can help.

Step 2: Monitor Your Breathing

Check your symptoms or peak flow rate to see which zone they fall in.

Step 3: Follow Your Asthma Action Plan

Don't use a wait-and-see approach! Use your long-term and quick-relief medicines as directed on your plan. Asthma medicines do not work as well if the symptoms get too bad. Also, follow any instructions on your plan for contacting your healthcare provider or emergency services for additional help.



After an asthma flare-up, you'll be more likely to have another one during the next several days. Avoid your triggers, monitor your airways more closely and take your medicines exactly as prescribed.

Signs You May Need a New Action Plan

As healthcare providers learn more about asthma, it's become clear that there are several different types of asthma—and a growing number of ways to treat it. If you are using your medicine correctly and are taking steps to control triggers in your environment, but you are still having asthma symptoms, it's very important to talk with your doctor about other treatment options you can try.

Quick Quiz > Is My Asthma Action Plan Working?

1. My asthma symptoms happen more often than they used to.	Yes	No
2. My asthma symptoms are worse than they used to be.	Yes	No
3. I can't do my normal activities.	Yes	No
4. My asthma symptoms wake me up a lot at night—I'm losing sleep!	Yes	No
5. I miss work because of my asthma.	Yes	No
6. My peak flow rates are low or change a lot from morning to evening.	Yes	No
7. My asthma medicines do not seem to be working very well anymore.	Yes	No
8. I had to go to the emergency room because of an asthma flare-up.	Yes	No
9. I ended up in the hospital because of my asthma.	Yes	No

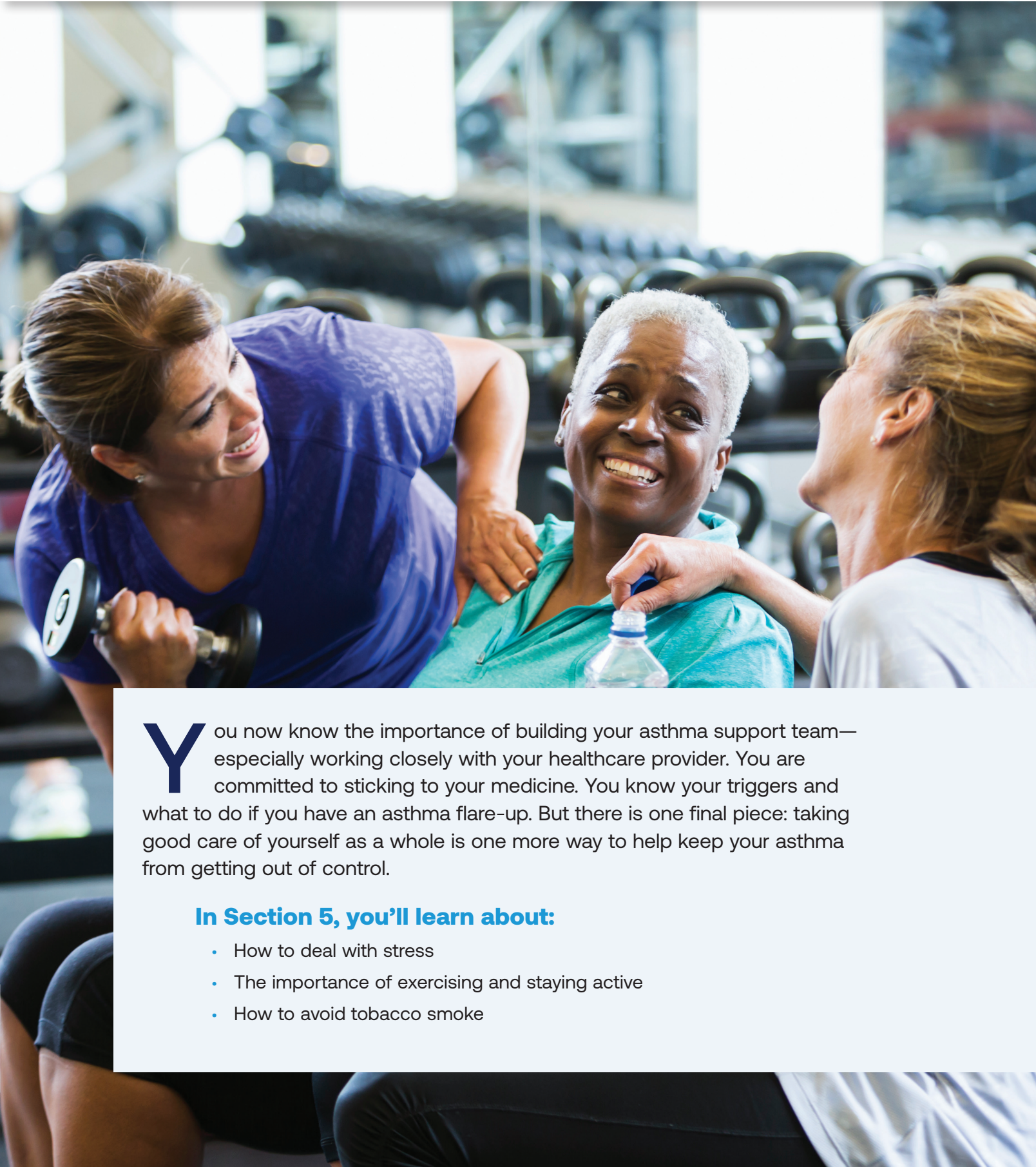
If you answer yes to any of these questions—now or in the future—talk to your healthcare provider about modifying your asthma action plan.

ResourceConnect

For an asthma action plan you can use now, go to page 63 of this guide or visit [Lung.org/asthma-plan](https://lung.org/asthma-plan).

Following Good Health Habits

SECTION
5



You now know the importance of building your asthma support team—especially working closely with your healthcare provider. You are committed to sticking to your medicine. You know your triggers and what to do if you have an asthma flare-up. But there is one final piece: taking good care of yourself as a whole is one more way to help keep your asthma from getting out of control.

In Section 5, you'll learn about:

- How to deal with stress
- The importance of exercising and staying active
- How to avoid tobacco smoke

Learning to Deal With Stress

You can't get rid of all the stress in your life, but you can make your life less stressful. Staying on a regular schedule of resting, eating, working and playing helps. You also need to give yourself time to do activities you enjoy such as having a hobby, spending time with your family or being alone. Most important, you've got to take time to relax!

Effects of Stress on the Body

Stress can cause more than asthma symptoms. Here are some other stress effects you'll want to avoid.

- Fast heartbeat
- Trembling or shakiness
- Upset stomach
- Muscle tension
- Tight jaws
- Rapid, shallow breathing

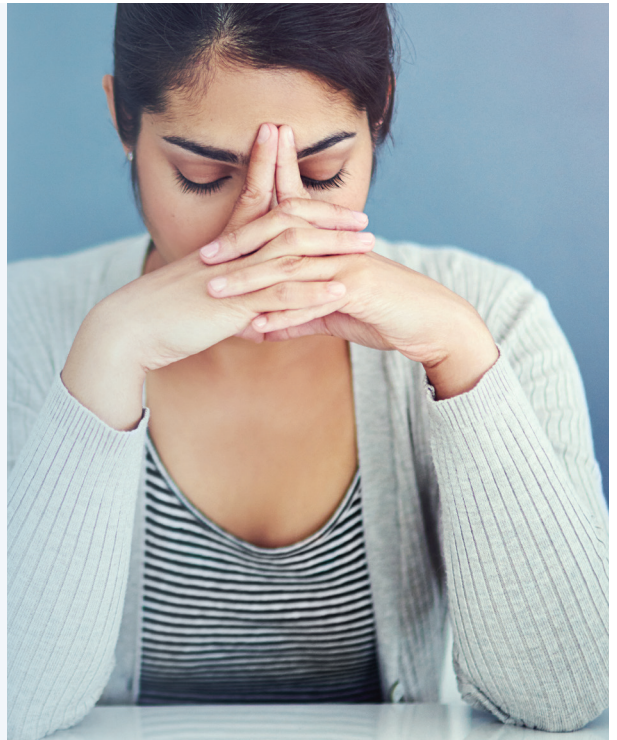
Avoiding Stress

As with most chronic health problems, good general health habits can improve your asthma—and make it easier to avoid stress. This means:

- Getting at least eight hours of sleep each day.
- Drinking plenty of fluids.
- Relaxing some each day.
- Eating a balanced diet.
- Staying active.

My Stressors

Write down a few of the things that stress you out. Then make an effort to take steps to handle them differently or to avoid them.





How to Enjoy a Low-Stress Life

- Use the relaxation techniques on the next page daily, or as often as needed!
- Exercise most days of the week. Not only is it a quick, easy way to relieve stress-related tension, aerobic exercise has been shown to increase chemicals in the brain that affect moods.
- Set aside time to spend with friends and family. Balancing work and play is important.
- Arrange for time alone each day. Even 10 minutes can be a real boost.
- Get enough sleep. If not, you'll be moody, tense and less prepared to deal with stressful situations.
- Eat three balanced meals each day. Too much stress can drain your energy, leaving you weak, fatigued and feeling even more stressed!
- Avoid foods and drinks that aggravate stress, such as caffeine, alcohol and refined (processed) foods. Instead, choose fruits, vegetables, whole grains, lean meats and low-fat dairy products. These healthier foods increase your body's stores of the nutrients needed to handle stressful situations.
- Set realistic short- and long-term goals you can track and meet. This will give your life direction. You'll be able to make progress, and you'll feel better about yourself.
- Talk with someone about your problems. A trusted supporter can sometimes help you see a problem more clearly or help you think of practical solutions.

Three Great Ways to Relax

1. Deep-Breathing Exercises

At least once a day, and whenever you start to get stressed, follow these steps:

- Sit down.
- Get comfortable. Loosen tight clothing. Take off shoes and glasses.
- Breathe normally.
- Begin to breathe in slowly through your nose.
- Breathe out through your mouth, with lips puckered.
- Let your stomach rise and fall as you breathe.
- As you breathe in, think, “I am ...”
- As you breathe out, think, “...relaxed.”
- Repeat at least 20 times. Then sit comfortably for five minutes. Breathe normally.

2. Progressive Muscle Relaxation

Tighten and relax your muscles, starting at your toes and working your way up to your eyes and scalp. Tighten one muscle group at a time for three seconds and then relax. When you have gone through every body part (toes, feet, legs, thighs, hips, buttocks, stomach, hands, arms, shoulders, jaws, face, eyes and scalp), sit quietly for five minutes thinking about how relaxed you feel.

3. Imagery

Imagery is using the mind to relax the body. To practice imagery, think about a peaceful place, such as a quiet clearing in the woods, a calm lake or a starry night. Think of the sights and sounds, smells and feelings you would experience if you were actually there. Picture yourself there, calm, relaxed and peaceful.

Call the American Lung Association at 1-800-LUNGUSA (1-800-586-4872) to talk to your local Lung Association about purchasing our Relaxation Exercises for even more great ways to unwind.

Keeping Active Through Exercise

Exercise is a great way to both control stress and stay in good health. But if you have exercise-induced asthma, you may feel like you need to limit your activities to avoid symptoms. In fact, what you really need is a good asthma management plan that takes exercise-induced asthma into account. With it, you can better control your symptoms, stay active and increase your overall well-being. Here are some tips to get you started:

- Check with your healthcare provider before beginning any type of exercise program to ask if it's okay to do.
- Ask your healthcare provider if you should use a quick-relief inhaler before exercising to prevent symptoms.
- Choose an activity that is not too hard for you to do and will keep your interest. Exercise should be fun.
- Begin slowly. Warm up with light exercise for a few minutes
- In cooler weather, breathe through your nose, not your mouth, to warm the air before it goes into your lungs.
- In cold weather, wear a scarf or neck warmer pulled up over your nose or a sports mask made especially for outdoor exercise. This keeps the respiratory tract moist and warms the air you breathe in.
- In cold weather or on high-pollution days, exercise indoors.
- Stop and rest if you feel symptoms or early warning signs that your asthma is getting out of control. Use your quick-relief inhaler if you need it.
- Drink plenty of fluids.



Avoiding Tobacco Smoke

Smoking irritates the lungs and makes asthma worse. If you smoke, stop. Of course, even secondhand smoke can trigger an asthma flare-up. So, if you live or spend a lot of time with other people who smoke, you need to try to do something about that, too. Encourage close family members and friends to quit. Don't be shy about asking those who don't want to quit not to smoke around you. Your lungs will thank you, and so will the rest of your body!

Quitting smoking is one of the single best things you can do for your asthma and your overall health.

Help With Quitting

To help you or your loved ones succeed in making this important life change, the American Lung Association offers a proven program called Freedom From Smoking®. For more information on when and where a class is being held in your area, or on how to complete a program on your own, call the Lung HelpLine at **1-800-LUNGUSA**. Or, check out our program online at **Lung.org/FFS**.



Congratulations!



You've taken the first steps in putting together a strong self-management plan to control your asthma. Sticking with your plan will benefit your life. While there may still be times your asthma flares up—even when you do all of the things in this guide—by following the techniques you've learned, you're likely to have fewer symptoms and fewer times when your asthma is out of control. Daily management of your asthma will improve your quality of life. Take control!



Acknowledgments

The American Lung Association would like to thank Dr. William C. Bailey and his staff at the Lung Health Center at the University of Alabama at Birmingham (UAB) for creating the adult asthma management program that inspired Breathe Well, Live Well®. We also thank staff members at the American Lung Association and the external advisory group members who helped to create the original Breathe Well, Live Well program and materials, including: Donna Bryson, A.E.-C.; Sherri Chesire, R.R.T., R.P.F.T.; Maureen Damitz, A.E.-C.; Maureen George, Ph.D., R.N., A.E.-C.; Lynn B. Gerald, Ph.D., M.P.H.; Barbara M. Kaplan, M.P.H., C.H.E.S.; Connie L. Kohler, Dr.P.H.; Joan Mangan, Ph.D., M.S.T.; Katherine Pruitt, B.A.; and Richard Roth, M.D.; as well as the Centers for Disease Control and Prevention, National Center for Environmental Health, for their vision and support in developing this program.

Breathe Well, Live Well: The Guide to Managing Asthma at Home and Work was a collaborative effort, and we greatly acknowledge the many contributors who made it possible. At the American Lung Association: Barbara Kaplan, M.P.H., C.H.E.S., who was a lead contributor to the content and supervised the work; Lorene Alba who contributed to the content; Norman Edelman, M.D., Zach Jump, M.A., Katherine Pruitt, and Susan Rappaport, M.P.H., who reviewed the workbook; and Kim Lacina and Michael Albiero who supervised design.



My Asthma Action Plan

Name: _____ DOB: ____ / ____ / ____

Severity Classification: ☐ Intermittent ☐ Mild Persistent ☐ Moderate Persistent ☐ Severe Persistent

Asthma Triggers (list): _____

Peak Flow Meter Personal Best: _____

Green Zone: Doing Well

Symptoms: Breathing is good – No cough or wheeze – Can work and play – Sleeps well at night

Peak Flow Meter _____ (more than 80% of personal best)

Control Medicine(s)	Medicine	How much to take	When and how often to take it
	_____	_____	_____
	_____	_____	_____

Physical Activity ☐ Use Albuterol/Levalbuterol _____ puffs, 15 minutes before activity
☐ with all activity ☐ when you feel you need it

Yellow Zone: Caution

Symptoms: Some problems breathing – Cough, wheeze, or tight chest – Problems working or playing – Wake at night

Peak Flow Meter _____ to _____ (between 50% and 79% of personal best)

Quick-relief Medicine(s) ☐ Albuterol/Levalbuterol _____ puffs, every 4 hours as needed

Control Medicine(s) ☐ Continue Green Zone medicines

☐ Add _____ ☐ Change to _____

You should feel better within 20–60 minutes of the quick-relief treatment. If you are getting worse or are in the Yellow Zone for more than 24 hours, THEN follow the instructions in the RED ZONE and call the doctor right away!

Red Zone: Get Help Now!

Symptoms: Lots of problems breathing – Cannot work or play – Getting worse instead of better – Medicine is not helping

Peak Flow Meter _____ (less than 50% of personal best)

Take Quick-relief Medicine NOW! ☐ Albuterol/Levalbuterol _____ puffs, _____ (how frequently)

Call 911 immediately if the following danger signs are present:

- Trouble walking/talking due to shortness of breath
- Lips or fingernails are blue
- Still in the red zone after 15 minutes

Emergency Contact Name _____ Phone (_____) _____ - _____

Emergency Contact Name _____ Phone (_____) _____ - _____

Date: ____ / ____ / ____

1-800-LUNGUSA | Lung.org

About the American Lung Association

The American Lung Association is the leading organization working to save lives by improving lung health and preventing lung disease through research, education and advocacy. The work of the American Lung Association is focused on four strategic imperatives: to defeat lung cancer; to improve the air we breathe; to reduce the burden of lung disease on individuals and their families; and to eliminate tobacco use and tobacco-related diseases. For more information about the American Lung Association, a holder of the

Better Business Bureau Wise Giving Guide Seal, or to support the work it does, call **1-800-LUNGUSA** (1-800-586-4872) or visit: **Lung.org**.



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