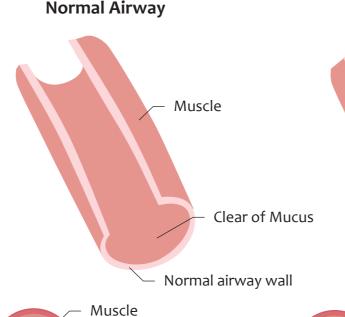
Asthma in Australia

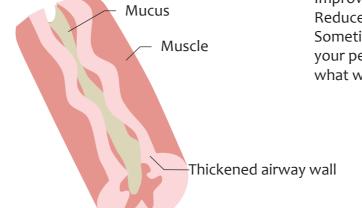
Asthma is a condition of the airways. People with asthma have sensitive airways in their lungs which react to triggers that set off their asthma. This makes it harder for them to breathe.

Lungs Airway

Asthmatic Airway



Clear of Mucus



Muscle

Mucus

Thickened airway wall

What medication to take every day (even when you are feeling well). How to tell if your asthma is getting worse. What you should do if your symptoms are getting worse.

What to do if you have an asthma attack.

Your written Asthma Action Plan outlines:

Having a written asthma action plan can help to:

Reduce your chance of needing to go to hospital, or for an urgent doctor visit Improve your lung function

How to write an Asthma Plan

Reduce the number of days off work or school due to asthma Sometimes plans are based on your symptoms, while others are based on your peak flow score. You and your doctor or nurse can decide together what will work best for you.

1 in 5 people with asthma have written an asthma plan



Three main factors cause the airways to narrow:

- 1. The inside lining of the airways becomes red and swollen (inflammation)
- 2. Extra mucus (sticky fluid) may be produced, which can block up airways
- 3. Muscles around the airways squeeze tight. This is called 'bronchoconstriction'

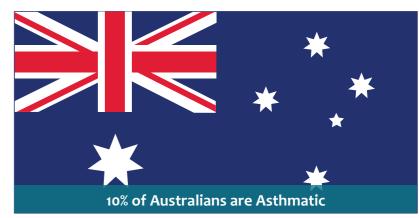
1968

From 1989 - 2013 there was 69% decrease in the mortality rate

How can you treat Asthma?

Managing your asthma means taking control of your health and ensuring that you are taking the right medication in the right way. With the correct knowledge, skills and medication you can do just about anything - asthma shouldn't stop you!

Many different medications are used to manage and control asthma. To simplify things, they are classed into three main groups: relievers, preventers, and symptom controllers. You may also hear the term combination medications. This refers to a device that has both a preventer and a symptom controller in it.



That's over 2 million people affected by asthma

1989: New asthma guidelines recommend changing the focus from just treating symptoms to preventing asthma greatly decreasing the mortality rate

MORTALITY RATE

From 1989–2013 there was a 69% decrease in the mortality attributed to asthma. The risk of dying from asthma increases with age, with the majority of deaths occuring in those over 65 years.

Medicine Cartridge

Cartridge Holder

Removeable

Cap covering

mouth piece

(e.g Ventolin)

1978

1960: Allen & Hanbury markets Becotide (beclomethasone) as the first inhaled corticosteroid inhaler. The recommended frequency was two puffs four times daily to to treat and prevent asthma.

1970: Terbutaline is another rescue medicine introduced to the market. It was stronger than Iseotharine and lasted 4-6 hours.

1989: 964 **Deaths**

2013:

394

1994

1994: Salmeterol (Serevent) is added as another option. It's a long acting beta adrenergic (LABA) that keeps your lungs open for up to 12 hours. What makes it so great is it's only taken twice a day to prevent asthma symptoms.

1998: Studies show asthmatics may benefit from taking both a LABA and inhaled corticosteroid. Advair was the first medicine that combined both medicines, and it quickly became a top line asthma medicine to prevent asthma. Now your asthma is so controlled you hardly ever need your rescue inhaler.

1998

2008

Up to 90% of asthma inhaler users do not use there's correctly

How to use an Asthma Inhaler?

1. Remove the cap and hold the inhaler upright. 2. Shake the inhaler.

- 3. Tilt your head back slightly
- and breathe out. 4. Hold the inhaler to your mouth

surrounding the mouth piece

- 5. Press down on the inhaler to release the medicine as you start to breathe in slowly.
- 6. Breathe in slowly for 3 to 5 seconds.
- 7. Hold your breath for 10 seconds to allow medicine to go deeply into your lungs.
- 8. Repeat puffs as directed. Wait 1 minute between puffs to allow the second puff to get into the lungs better.

What causes Asthma?

No-one really knows what causes asthma, but we do know there are links to both genetics (your family history) and the environment. We also know some of the factors that contribute to someone developing asthma early in life.

Factors contributing to development of asthma

- Genetic factors are involved
- Having a parent with asthma, eczema, or hayfever increases a child's risk of developing asthma
- Obesity increases the risk of developing asthma Children who have respiratory infections when they are infants may be up to 40% more likely to develop asthma
- Indoor and outdoor air pollution may make asthma symptoms worse although it is not clear whether pollution causes asthma
- Exposure to allergens may have an impact on whether you will develop asthma

The highest rate of hospitilisation is in boys aged o - 4 years old

Asthma Triggers

A trigger is something that causes your airways to narrow, leading to asthma symptoms. Everyone's asthma is different, and everyone has different triggers. For most people with asthma, triggers are only a problem when their asthma is not well-controlled.

