

Actions

It is sensible to ensure you make the following steps now you have a new inhaler

- Pick up our guide on inhalers and spacers to complement this leaflet
- Agree on a personalised asthma plan (this is done with your doctor or nurse and usually written down for future reference)
- Remember to take your medicines as advised
- Should your inhalers fail to relieve your symptoms, go straight to Accident and Emergency

Need Help?

Whittington Paediatric Asthma Nurse
Tel: 020 7288 5527

Community Nurse
Islington 020 3316 1950 (8am-6pm)
Haringey 020 8887 3301 (9am – 5pm)

Asthma UK
0300 222 5800
www.asthma.org.uk

Patient advice and liaison service (PALS)

If you have a compliment, complaint or concern please contact our PALS team on 020 7288 5551 or whh-tr.whitthealthPALS@nhs.net

If you need a large print, audio or translated copy of this leaflet please contact us on 020 7288 3182. We will try our best to meet your needs.

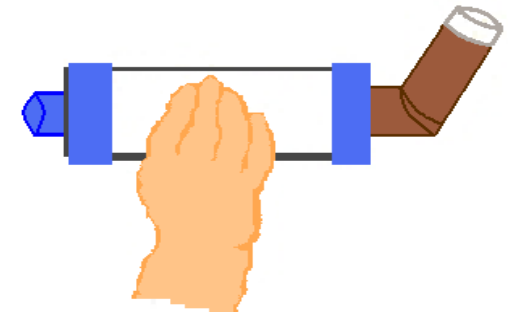
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Inhaled Steroids in Asthma

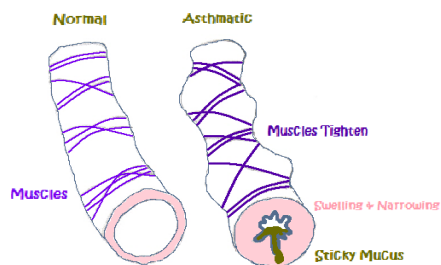
A patient's guide



Asthma

Asthma is a common condition affecting the airway. Usually a trigger (such as dust or pollen) irritates the airways which causes narrowing, swelling and sticky mucus to be produced.

This diagram compares the airways of a person with asthma (right) and those of someone without asthma (left). Like a pipe that is clogged and narrow, it's easy to see why asthma makes you short of breath!



Symptoms include:

- Difficulty breathing/chest tightness
- Cough
- Wheeze

These may be worst at night or with exercise.

Treatment

There are many inhalers used in asthma, this booklet focuses on inhaled steroids. These are also known as 'preventer' inhalers, and they work by controlling the swelling and inflammation in the airways.

There are many types of preventer inhaler. There are simple steroids like beclomethasone, and then there are also combined inhalers, called seretide or simbicort. Your inhaler may be brown, red, orange or purple.

The benefit builds up over time and so these inhalers need to be taken every day, even if you're not breathless as they offer protection for when your symptoms may become triggered. They will not relieve a sudden shortness of breath.

It is important that you take these inhalers with your spacer device, as this ensures they reach the lungs (where they are needed) rather than the stomach (where they can cause side effects). If you taste the medicine on the back of your throat, it might be that it's not reaching your lungs. This is your steroid card (below). Keep it with your inhaler.

Name: _____ DOB: _____

My inhaler is: _____ (colour)

and the medicine inside is called: _____

I take _____ puffs _____ times a day and
with/without a spacer

My Dr is: _____ Contact No: _____

Side Effects

Parents worry about children and young adults taking inhaled steroids because of side effects they've heard about. However most of these side effects are associated with taking oral steroids. If your inhaler technique is good, and you use a spacer, then serious side effects are extremely rare, because the medicine goes directly to your lungs in just the right amount.



There is a small risk of sore throat, hoarse voice and an infection of the mouth called thrush. This can be avoided if you use mouthwash, or take your inhaler before food or drink. Using a spacer also reduces this.

Inhaled steroids rarely cause growth problems, but just in case your doctor or asthma nurse will be measuring your height each time you see them.

They will also ensure you are on the lowest dose you need to control your asthma.