

ASTHMA | FREQUENTLY ASKED QUESTIONS (KIDS)

Asthma in General

Q: Will I outgrow asthma?

Some kids will stop having [asthma symptoms](#) as often, and it may seem like they have outgrown it. But it isn't gone, it just isn't active, and could come back at any time. Other kids will have to deal with asthma throughout their lives. The best thing to do is to get all the help you can. Have regular checkups with your doctor or [asthma educator](#) to make sure you are getting the right medicines. Keep a positive attitude... with the [right treatment](#), asthma can be something that you rarely have to worry about!

Q: Asthma scares me. Do people really die from it?

A: It is true that people can die from asthma, you may have heard or read about this in the news recently, but it does not happen very often. Asthma is a very serious disease, but there is no reason for anyone to die from it. Learning about what [triggers](#) your asthma, the early [warning signs](#) to look for and how to use your medicine the right way will help you keep your asthma under control. Talk to your doctor or [asthma educator](#) if you are still worried about a [severe asthma attack](#).

Q: Do kids with asthma really need to get a flu shot?

A: Flu shots are safe and should be given to kids with asthma who are over 6 months old. This will help them keep from getting the flu, or keep them from getting really sick from it. [Learn more about flu shots](#).

Q: I've heard that being overweight can cause asthma. Is that true?

A: There have been some studies that have shown a link between obesity (being overweight) and asthma, but there is not enough proof to say that being overweight will cause asthma or vice versa. Learn more about [obesity and asthma](#).

Q: Is there a cure for asthma? I've heard or read about people who were cured.

A: There is no cure for asthma, but there is a lot of research being done now in the areas of indoor and outdoor pollution, allergies, gene therapy, cell biology and chemistry, just to name a few. What these researchers find will help us understand more about why this disease happens, and how we can control it even better.

The people who have claimed to be cured are probably in one of those "quiet times" common in asthma, when there is a lot of time between asthma attacks. They have not really been cured, and their asthma symptoms could come back at any time, especially if they are not taking their asthma medication as they should. [Learn how to decide if a treatment you hear about is a good idea or not](#).

Q: Why do I have to take medicines every day?

A: Knowing what happens in your lungs when you have asthma may help you to understand why you need to keep using medicines every day, even when you aren't having trouble with your asthma. The lining of the airways gets inflamed, or swells, when you have asthma if you come in contact with an asthma trigger – something that makes your asthma worse. The swelling makes the airways smaller which

makes it difficult for air to move through the narrowed air passageways.

When inflammation happens, extra [mucus](#) is made in the lining of the airways. This mucus can be very thick and sticky, and may form into plugs that may completely block some of the airways. In addition, smooth muscle bands surround the airways. When the airways swell, these muscle bands often constrict or clamp down, further narrowing or squeezing the airways. Together, airway swelling, excess mucus, and tightened muscle bands cause airway narrowing and make it hard to breathe.

Your long-term controller medicine is the one that works over a long period of time to help keep the inflammation in your airways down, and stop them from being so twitchy. This means they're less likely to react when you have a cold or are around one of your triggers (but you should still try to stay away from your triggers). You need to take your controller every day for it to be effective, usually first thing in the morning and last thing at night.

About Steroids

Q: Will you get big and muscular using a long-term controller steroid medicine?

A: NO. The kind of steroids used in your controller medicine ([corticosteroids](#)) are different than the anabolic steroids people use to build large muscles, and work in a different way. The corticosteroids in your [inhaler](#) are a lot like those made naturally in your body. When you [inhale](#) them, they go down in your airway to get rid of the inflammation that causes asthma symptoms. You only need a small dose of them because they are working directly on your lungs.

Q: Will I gain weight by taking [inhaled steroids](#) or steroid tablets?

A: NO. Your inhaler contains such a low dose of steroids that it will not make you put on weight. Sometimes steroid tablets can make you feel hungry, and eating more will make you start to

gain weight. The tablets themselves don't make you gain, so eat your normal amounts while you take them and you should be fine.

Q: What about side effects from inhaled steroids or steroid tablets?

A: Your controller inhaler might make you a little hoarse every now and then, because some of the medicine can stay in your mouth and throat if you don't use a [valved-holding chamber](#) or spacer. It's also a good idea to rinse out your mouth with water and spit it out after taking your controller inhaler.

Steroid tablets, also known as oral steroids, give you a higher dose of steroids than your controller inhaler. You need this higher dose if your asthma gets really bad. When you only need to take them for few days, there are no serious side effects. You might get a little stomachache, and if you do, tell your parent or doctor. Very few people need to take steroid tablets daily to control asthma symptoms and they can really be hard on your body, with side effects like weight gain, thinning of the bones and skin and making your blood pressure to go up.

If you are needing two or more bursts of oral steroids in a 12-month period, you and your parents should ask your doctor about other treatment options for your asthma. Use of two or more courses of oral steroids in a 12-month period means your asthma is poorly controlled.

[Learn more about oral steroids.](#)

Q: Will inhaled steroids or steroid tablets stunt my growth?

A: Most studies say kids grow normally when they take normal amounts (400 to 800 mcg/day) of Beclomethasone (an inhaled steroid) but higher doses may cause some trouble. Long-term steroid tablet use shows the most risk for growth problems. Your doctor will keep track of how you're growing while you are on these medications, and may try to step-down this medicine when possible. On the other hand, having your asthma out of control itself can lead to growth problems. There are

many studies about steroids going on right now to get better answers to all of these questions.

Q: Am I allowed to use my asthma medicines, including inhaled steroids or steroid tablets, while playing team sports?

A: There is no ban on inhaled corticosteroids by the NCAA (National Collegiate Athletic Association) or the IOC (International Olympic Committee). The IOC does need athletes to tell them about steroids for asthma before they are tested for any sports enhancing drugs.

About Sports

Q: I love to play basketball, but how can I get good at sports when I have asthma, and need to take so many breaks to catch my breath?

A: Sports and exercise are good for everyone, including people with asthma. But you need to feel confident and enjoy yourself. The first thing you need to do is talk to your doctor or asthma educator about getting your asthma under

better control. Once you have a plan that keeps you breathing easy while you play, you'll feel that confidence in your game. Remember, there are lots of successful professional and Olympic athletes that have [asthma](#).

About School

Q: My friends at school tease me because of my asthma. I get embarrassed about having to use my inhaler. Asthma is ruining my life!

A: Those aren't friends! No one who is a friend would treat you like that. Try explaining to them that their comments and actions really hurt. If they don't stop, tell a teacher you trust or guidance counselor what's going on. Try to make new friends who will give you the support you need. Asthma is very common, so you'll probably find that you are not the only one with asthma in your class. Right now you need to build up your confidence and accept yourself as you are, with or without asthma.

How to Use a Metered Dose Inhaler with a Spacer



<http://bit.do/aacod-metered-dose>

Using an Inhaler with a Spacer Mask



<http://bit.do/aacod-inhaler>

Steps to Using an Inhaler with a Spacer and Mask



<http://bit.do/aacod-steps-to-use-inhaler>