

# ASTHMA

## Quick Asthma Management Assessment (QA-MA) – Cipla Respiratory

How controlled do you think your asthma currently is? The actual answer might surprise you! Take our Quick Asthma Management Assessment to find out the true answer. The below 5 quick and easy questions will help you and your doctor establish how well your current treatment regime is working, or whether you need to talk to your doctor about changes that may be required in your current treatment plan.

Your Name: \_\_\_\_\_ Date: \_\_\_\_\_

Gender: \_\_\_\_\_ Age: \_\_\_\_\_

### Circle the single most applicable box in each of the 5 questions below:

1. In the last month, how often did you use your reliever (rescue medication) or nebulizer?

Daily	1	Weekly	2	Bi-weekly	3	Monthly	4	Not at all	5
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2. How often do you experience asthma symptoms during the day?

Daily	1	Weekly	2	Bi-weekly	3	Monthly	4	Not at all	5
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3. How often have you felt short of breath in the last month because of your asthma?

Daily	1	Weekly	2	Bi-weekly	3	Monthly	4	Not at all	5
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4. In the last month was there any activity that you couldn't do or attend due to your asthma (absence from school/work/sport or housework?)

Daily	1	Weekly	2	Bi-weekly	3	Monthly	4	Not at all	5
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5. How often do you wake up during the night due to asthma symptoms or coughing?

Every night	1	Some nights during the week	2	Not more than one night in 2 weeks	3	Not more than one night per month	4	No nights at all	5
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### Now calculate your score by adding up all the numbers in your ticked boxes

**5 to 10 points** = Poorly controlled, consult your healthcare practitioner

**11 to 18 points** = Partially controlled. Repeat test in 4 weeks, and if score does not increase by at least 3 points, consult your doctor for possible changes in your treatment plan

**19 to 25 points** = Well done, well controlled, keep it up!

# WHAT IS ASTHMA?



Asthma is a **common** lung condition. About 10 percent of adults and 20 percent of children suffer from asthma. It occurs because the inner lining of the tiny airways of the lungs becomes inflamed and produces mucous. This narrows the airway, which makes it difficult to breathe. The tiny muscles around the airways constrict easily when the airways are inflamed and this further narrows the airways, exacerbating the problem.

This causes the **symptoms** of asthma: coughing, wheezing (a whistling sound when breathing out), shortness of breath and the feeling of a tight chest. When symptoms are severe we call this an **asthma flare**. It can also be called an attack or an exacerbation.

We do not know what **causes** asthma, but it appears that genetic and environmental factors play a role in the development of asthma.

There are many **triggers** that can set off a n asthma attack. These include things like pollens, animal dander from the fur of cats and dogs, cigarette smoke, emotion, viral infections, exercise and weather changes to name a few.

Asthma cannot be **cured**, but if managed properly, an asthmatic can lead a normal life without being limited by the condition.

The aim of asthma treatment is **symptom control**. When a person's symptoms are controlled we expect that they will have few day time symptoms, not wake up at night due to coughing or a tight chest, have no limitation of their activities, not need their asthma pump (reliever medication) for a tight chest more than twice a week and not need to visit a doctor for emergency treatment. They will, in addition, have good lung functions.

To achieve symptom control people with asthma should aim to avoid triggers as much as possible, eat a healthy, low sugar, low food additive diet, exercise within their ability and take their asthma medications as prescribed.

In order to keep your asthma under control, it is important to understand the type of treatment available:

Asthma medications may be inhaled, taken as tablets or syrups, injected or taken via nebulizer.

**Asthma medications** are divided into two groups. There are the **controllers**, which must be taken every day because they keep the inflammation in the mucous membranes under control, and there are the **relievers**, that are used if a patient feels that their chest is becoming tight. Relievers may also be used before exercise to prevent symptoms.

Reliever medication gives instant relief for a short periods of time (4 - 6 hours) and do not control inflammation. They only work on the smooth muscle surrounding the airway, causing it to relax so that the airway enlarges, making it easier to breathe. Reliever medications are a 'quick fix' and do not address the real problem in asthma which is inflammation. Although they are effective in relieving symptoms they must not be relied upon as daily asthma treatment.

Controller medication does not give immediate relief, and sometimes people will stop this medication because they don't "feel" anything when taking it. However, when used every day, it controls the redness, swelling and mucous production on the inside of the breathing tubes. This is very important since this will control the symptoms, **prevent** severe asthma attacks and prevents long-term damage to the airways.

It is important that the correct technique is used when taking asthma medications. There are many asthma devices available, and the correct use of a device will ensure that most of the medication is inhaled. Asthma symptom control is key to successful asthma management, and this means using a **controller medication every day**.

