ASTHMA

Taking Control for a Healthier Life
What Is Asthma?

Asthma is a disease that makes the airways in your lungs inflamed (irritated and swollen). When this happens, your airways narrow. You may feel fine. Or you may have symptoms that include coughing, wheezing, and chest tightness. These are symptoms of an asthma flare-up. Flare-ups can occur at almost any time—even when you’re asleep. A bad flare-up can lead to trouble breathing. You may even end up in the emergency room.

What You Can Do About It

There’s no cure for asthma. But you can control it. This will help prevent flare-ups and keep your asthma from getting worse. Controlling asthma will take effort on your part. But the results are worth it. Once you’re in control, you’ll be able to:

- Take part in sports and other activities without having asthma symptoms.
- Sleep through the night without having symptoms.
- Not miss school or work because of asthma.
- Reduce or stop emergency room visits.
Work with Your Healthcare Team

The job of controlling asthma is mostly up to you. You will have help from your healthcare team, including some of the people below.

• **A primary care doctor** guides your overall care and treatment. If needed, he or she can also refer you to asthma specialists.

• **Nurse practitioners and physician assistants** can also guide the care and treatment of asthma.

• **Respiratory therapists** perform tests and help you learn good techniques for taking inhaled medications.

• **Nurses and health educators** teach you how to best manage your asthma.

• **Specialists**, such as an allergist or pulmonologist, help treat underlying causes of asthma. They also help you adjust your treatment for better asthma control.
How the Lungs Work

When air is breathed in, it goes through the windpipe into the lungs. Inside the lungs are branching **airways** made of stretchy tissue. These are called bronchial tubes. These airways are wrapped with bands of muscle that let the airways widen and narrow. The inner lining of the airways makes a sticky substance called **mucus**. The mucus traps and helps rid the lungs of any particles or irritants that are breathed in.

**Normal Airways**

The airways branch out and get smaller as they go deeper into the lungs. The smallest airways end in tiny balloonlike sacs called **alveoli**. The alveoli take oxygen from the air you breathe and pass it into the bloodstream. They also collect carbon dioxide from the bloodstream for you to breathe out.
Inflamed Airways

The problems caused by asthma begin with inflammation in the lungs. This is a chronic (ongoing) problem that occurs when triggers irritate the lining of the airways. As the lining swells, there’s less space for air to move through the airways. This may cause no symptoms. Or it may cause mild symptoms such as chest tightness or low energy.

Flare-Ups

Flare-ups occur when airways that are already inflamed react to a trigger. During flare-ups, airways continue to swell. They also make extra mucus. This further narrows the airways. The muscles around the airways also tighten (bronchospasm). Air gets trapped in the alveoli. This makes it hard for air to get into and out of the lungs. Symptoms can include wheezing, coughing, or shortness of breath. Frequent flare-ups may lead to long-term damage to the airways.
An evaluation helps your healthcare provider learn more about your asthma. You'll be asked questions and examined. Tests are done to check your lungs or look for allergies.

Questions You May Be Asked
You'll be asked questions about your health and asthma symptoms. These may include:
• What are your symptoms? What seems to trigger them?
• Do you have flare-ups? How often?
• When was your last flare-up? What may have triggered it?
• What medications do you take? How often do you take them? How well do they work? Do they cause any side effects?
• Have you tried alternative treatments, such as supplements, herbal remedies, or acupuncture?

Tests You May Have
Lung Function Tests
Lung function tests help measure how well your lungs are working. Spirometry is a common lung function test. It uses a device to measure the amount and speed of the air you breathe out.

Allergy Tests
For many people with asthma, substances called allergens act as triggers. Testing can be done to find out if you have a sensitivity (allergy) to specific allergens.

Other Tests
Not all breathing problems are caused by asthma. If your healthcare provider suspects another lung problem, other tests may be done. Your healthcare provider may also check for health problems that can make asthma worse. These include nasal and sinus problems and acid reflux (heartburn).

Asthma and Pregnancy
During pregnancy, you need to continue following a treatment program to control asthma. If you become pregnant, talk with your healthcare provider about any changes to your asthma control plan needed during pregnancy.
Know Your Asthma Triggers

The first step in controlling asthma is avoiding exposure to your triggers (the things that cause you to have asthma symptoms). These may be allergens that you are allergic to. They can also be things such as smoke and scents that make your symptoms worse.

Common Asthma Triggers

Triggers differ for each person. Which of the common triggers below affect you? Check all that apply. Then see pages 16 to 21 for tips on how to control these triggers.

### Allergens
- Dust mites
- Cats
- Dogs
- Other furry animals
- Birds
- Mold
- Pollen
- Rodents or roaches

### Irritants
- Tobacco smoke
- Smoke from fireplaces
- Vehicle exhaust
- Smog
- Chemical fumes from things such as paint, pesticides, or household cleaners
- Strong smells, such as perfumes, air fresheners, or cooking odors

### Other Triggers
- Illness, such as colds, flu, and sinus infections
- Cold air
- Hot air
- Weather changes
- Food additives, such as sulfites in wines, beer, and dried fruit
- Medications, such as aspirin and ibuprofen
- Emotions, such as crying or stress
- Exercise
Your Treatment Plan

You can do a lot to manage your asthma and improve your quality of life. You and your healthcare team will develop a treatment plan to control your asthma. It’s up to you to put this plan into action. This section of the booklet will give you the tools you need to follow your plan. Doing so will help you feel healthier and more in control.

Why You Need to Take Control
Asthma symptoms won’t go away on their own. You need day-to-day control of the inflammation in your lungs. You also need to control symptoms when you have them. These are lifelong tasks. The more you stay in control, the better you’ll feel. If you don’t stay in control:

• Asthma symptoms can affect your life. You may miss school, work, or activities that you enjoy.
• Asthma flare-ups can be dangerous, even deadly.
• Uncontrolled asthma may cause permanent damage to your lungs.

Your Action Plan
Your healthcare team will help you design a personal action plan to control your asthma. It includes all the steps you need to care for yourself. This will help remind you how to manage your asthma so that you can feel your best. Be sure to write this plan down (you can do this on page 10). On the following pages, you’ll learn:

• How peak flow monitoring helps monitor your airways.
• How having a written action plan helps you track and respond to asthma symptoms.
• How taking medications helps you control asthma.
• How to avoid triggers, the things that inflame your airways. This will help prevent symptoms and flare-ups.
Peak flow monitoring helps measure how open your airways are. It is done with a device called a **peak flow meter**. Monitoring can help warn you of a flare-up, even before you have symptoms. Your healthcare team will tell you how often to do this test.

### How to Use a Peak Flow Meter

1. **Set marker**
   - Move the marker to 0 or to the lowest number on the scale.
   - Stand up. If you can’t stand, sit up straight in a chair. Be sure you’re in the same position each time you do this test.

2. **Number to write down**
   - Take as deep a breath as you can.
   - Put the mouthpiece of the meter between your teeth. Close your lips tightly around it. Be sure your tongue does not block the opening.
   - Blow into the mouthpiece once, as hard and as fast as you can. Then take the meter out of your mouth.

3. **Check where the marker has moved to on the numbered scale. Write this number down.**
   - Move the marker back to 0 or the lowest number. Repeat the test 2 more times.
   - Circle the highest of the 3 numbers. This is your peak flow number. Record your result each time you do this test. Bring your record to appointments with your healthcare team.

### What Do My Numbers Mean?

Your **personal-best-peak-flow number** is the number you get when your lungs are as open as they can be. Ask your doctor how to determine your personal-best number. Then, write that number here: ___________________. Comparing your peak flow numbers to your personal best helps you know when your asthma is—or isn’t—under control.
## Using Your Action Plan

You and your healthcare provider will fill in the action plan below (or one like it). It uses three zones based on your asthma symptoms and peak flow numbers, and tells you what to do in each zone. Be sure to talk with your healthcare team if you have questions.

### Green Zone

- **Peak flow** is greater than: 
  
  (80% of personal best)

  **Green Zone Symptoms:**
  
  None. Asthma doesn’t get in the way of work, activities, or sleep.  

  **Long-term control medication(s) to take daily:**
  
  __________________________
  __________________________
  __________________________

  **Medication(s) to take before exercise:**
  
  __________________________
  __________________________
  __________________________

  **Other medications:**
  
  __________________________
  __________________________
  __________________________

  **Asthma check-up appointments:**
  
  Visit every _____ months.

  **The goal:** Stay in the Green Zone!

### Yellow Zone

- **Peak flow** is between:
  
  ___________ and ___________

  (50% to 80% of personal best)

  **Yellow Zone Symptoms:**
  
  • Coughing, wheezing
  • Chest tightness
  • Shortness of breath
  • Symptoms at night

  **Take _____ puffs of this quick-relief medication:**
  
  __________________________

  If you do not return to the Green Zone within 1 hour, repeat _____ puffs of quick-relief medication.

  **Increase/add these long-term control medications:**
  
  __________________________
  __________________________

  **Call your provider** if you are in the Yellow Zone for more than _____ hours or use more than _____ puffs of quick-relief medication a day.

  **Follow the Yellow Zone plan if you have a cold or other upper respiratory infection.**

### Red Zone

- **Peak flow** is less than:
  
  (50% of personal best)

  **Red Zone Symptoms:**
  
  • Constant coughing or wheezing
  • Severe symptoms at night
  • Trouble breathing at rest

  **Take _____ puffs of this quick-relief medication:**
  
  __________________________

  **Then, call your healthcare provider!**

  **CALL 911 right away** if you are still in the Red Zone after _____ minutes and you cannot reach your provider, OR if you have any of the following:

  • Severe trouble breathing
  • Trouble walking or talking
  • Blue lips or fingers
Help from Medications

Medications are one of your most important tools for controlling asthma. Some medications are taken daily to control inflammation in your lungs. Others help relieve symptoms of a flare-up. Always take your medications as prescribed. Know the names of your medications and how and when to use them.

Long-Term Controller Medications
Long-term controller (also called “maintenance”) medications help reduce swelling and inflammation of the airways. This makes the airways less sensitive to triggers and less likely to flare up. These medications:

• Are inhaled or swallowed on schedule—usually every day. They should be taken even when you feel fine.
• Help keep asthma under control so that you’re less likely to have symptoms.
• Will NOT stop a flare-up once it has begun.

Quick-Relief Medications
Quick-relief (also called “rescue”) medications work by relaxing the muscles that tighten around the airways. This helps ease symptoms such as coughing, wheezing, and shortness of breath. Keep your quick-relief inhaler with you at all times—even if you feel okay. Quick-relief medications:

• Are inhaled when needed.
• Open the airways right after you use them.
• Can stop flare-ups once they’ve started.
• Can help prevent flare-ups triggered by exercise.

Two Questions
The questions below are a quick way to check your asthma control. If you answer “yes” to either question, your asthma is not in good control. Be sure to talk to your healthcare team. If you’re already closely following your action plan, you may need to adjust your medications. Also, tell your team if you are often in your Yellow Zone or ever go into your Red Zone.

“Do you use your quick-relief inhaler more than 2 times a week (other than before exercise)?”

“Do you wake up at night with symptoms more than 2 times a month?”
These pages will help you learn more about the medications used to control asthma. Learn the names of your medications and how they work. Use them according to your action plan. And be sure to take only the medications that are prescribed for you.

<table>
<thead>
<tr>
<th>Types of Medications</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Long-Term Controllers</strong></td>
</tr>
<tr>
<td>(Maintenance)</td>
</tr>
<tr>
<td>For daily use</td>
</tr>
<tr>
<td><strong>Inhaled corticosteroids</strong></td>
</tr>
<tr>
<td>• Prevent or reduce airway inflammation.</td>
</tr>
<tr>
<td>• Protect the airways from irritants and allergens.</td>
</tr>
<tr>
<td><strong>Long-acting bronchodilators</strong></td>
</tr>
<tr>
<td>• Relax muscles that tighten around the airways.</td>
</tr>
<tr>
<td>• Should not be used for quick relief from a flare-up.</td>
</tr>
<tr>
<td>• Work longer, but more slowly, than short-acting bronchodilators.</td>
</tr>
<tr>
<td>• Help prevent nighttime flare-ups or those caused by exercise.</td>
</tr>
<tr>
<td>• Should be used along with a corticosteroid inhaler.</td>
</tr>
<tr>
<td><strong>Other long-term controllers</strong></td>
</tr>
<tr>
<td>• Help prevent asthma symptoms caused by exercise.</td>
</tr>
<tr>
<td>• Block the asthma response to some triggers (leukotriene modifiers).</td>
</tr>
<tr>
<td>• Are used in addition to an inhaled corticosteroid.</td>
</tr>
<tr>
<td><strong>Quick-Relief (Rescue)</strong></td>
</tr>
<tr>
<td>For use as needed</td>
</tr>
<tr>
<td><strong>Short-acting bronchodilators</strong></td>
</tr>
<tr>
<td>• Quickly relax muscles that tighten around the airways.</td>
</tr>
<tr>
<td>• Should be used for quick relief from a flare-up.</td>
</tr>
<tr>
<td>• Help prevent asthma symptoms caused by exercise.</td>
</tr>
<tr>
<td><strong>Steroid Burst</strong></td>
</tr>
<tr>
<td>For severe asthma episodes</td>
</tr>
<tr>
<td><strong>Swallowed corticosteroids</strong></td>
</tr>
<tr>
<td>• Are used for a short time for severe asthma episodes to reduce inflammation.</td>
</tr>
<tr>
<td>• Are taken in addition to controller and quick-relief medications.</td>
</tr>
</tbody>
</table>

Note: This chart is not a complete list of asthma medications and does not imply endorsement of any type or brand of medication. It does not list side effects, adverse reactions, interactions, or precautions for these medications. Only a healthcare provider can recommend or prescribe these medications.
Types of Medications

Examples of Medications

**INHALED:** beclomethasone (QVAR); budesonide (Pulmicort); flunisolide (Aerospan HFA); fluticasone (Flovent HFA); combination of budesonide and formoterol (Symbicort); combination of fluticasone and salmeterol (Advair)

**INHALED:** formoterol (Foradil); salmeterol (Serevent); combination of budesonide and formoterol (Symbicort); combination of fluticasone and salmeterol (Advair)

**SWALLOWED:** theophylline (Elixophyllin, Theo-24, Theochron, Theolair)

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**INHALED:** cromolyn

**SWALLOWED:** montelukast (Singulair), zafirlukast (Accolate); zileuton (Zyflo)

**INJECTED:** omalizumab (Xolair)

**INHALED:** albuterol (Ventolin HFA, Proventil HFA); levalbuterol (Xopenex HFA); metaproterenol; terbutaline

**SWALLOWED:** methylprednisolone (Medrol); prednisolone (Prelone, Pediapred, Orapred); prednisone (many brand names)

Note: This chart is not a complete list of asthma medications and does not imply endorsement of any type or brand of medication. It does not list side effects, adverse reactions, interactions, or precautions for these medications. Only a healthcare provider can recommend or prescribe these medications.
Many asthma medications are taken using a device called an inhaler. This sends a measured dose of medication into your lungs. These pages discuss common types of inhalers. Not all types work the same way. Have your healthcare team show you how to use and care for the type you’re given.

Using Metered-Dose Inhalers (MDIs) with Spacers

Metered-dose inhalers use a fine spray to dispense medication. You may be asked to use a spacer (holding tube) with your inhaler. The spacer helps make sure all the medication you need goes into your lungs.

1. Remove the caps from the inhaler and spacer. Shake the inhaler well and attach the spacer. If the inhaler is being used for the first time or has not been used for a while, prime it as directed by the instructions that come with the inhaler.

2. Breathe out normally. Put the spacer between your teeth and close your lips tightly around it. Keep your chin up.

3. Spray 1 puff into the spacer by pressing down on the inhaler. As you do, slowly breathe in as deeply as you can. This should take 3 to 5 seconds. (If you breathe too quickly, you may hear a whistling sound in the spacer.)

4. Take the spacer out of your mouth. Hold your breath for a count of 10. Then slowly breathe out. If a second dose is prescribed, wait at least 30 seconds before taking the next puff.

Using MDIs Without Spacers

Inhalers work best with spacers. But if you don’t have your spacer with you, use these steps:

1. Shake the inhaler and remove the cap. Breathe out through your mouth.

2. Hold the inhaler 1 to 2 inches from your open mouth. Keep your chin up.

3. Press down on the inhaler to spray 1 puff as you breathe in slowly and deeply through your mouth. Breathe in for about 5 seconds. Hold your breath for a count of 10. Then breathe out slowly. If a second dose is prescribed, wait at least 30 seconds before taking the next puff.
When to Replace Your MDI
Each inhaler contains only a certain amount of medication. Many MDIs contain a puff counter. If your inhaler does not have a counter, check to see how many puffs it contains. Then keep track of how many puffs you use. Have a new inhaler ready before the old one is used up.

• If you use your inhaler only once in awhile, use the card at right to keep track of your puffs.
• If you take a certain number of puffs each day, divide that number into the total number of puffs in the inhaler. This tells you how many days the inhaler will last. Write this on the MDI.

Using Dry-Powder Inhalers (DPIs)
These inhalers use tiny grains of powder to dispense medication. They don’t require spacers. They often have counters that track how many doses you use. Keep in mind that dry-powder inhalers don’t all work the same way. Know how to use yours properly.

1 Load the prescribed dose of medication by following the instructions that come with the inhaler.
2 Holding the inhaler away from your mouth, breathe out normally. Hold your chin up.
3 Put the mouthpiece between your lips. Breathe in quickly and deeply through the inhaler—not through your nose. You may not feel or taste the medication as you breathe in. This is normal.
4 Take the mouthpiece out of your mouth. Hold your breath for a count of 10.
5 Breathe out slowly (not through the inhaler, as moisture from your breath can make the powder stick inside the inhaler). Close the inhaler. Store it in a dry place.

Using Nebulizers
A nebulizer works by turning medication into a fine mist. This mist is breathed in through a mouthpiece or mask over a period of several minutes. If you need a nebulizer, your healthcare provider can show you how to use it.
Controlling Triggers: Allergens

Controlling asthma triggers will help reduce symptoms and prevent flare-ups. For people with allergies, breathing in allergens can lead to inflamed airways. Do your best to avoid allergens that trigger your asthma. The tips below will help.

Dust Mites
Dust mites are tiny bugs too small to see. But they can be a major trigger for asthma symptoms. Dust mites live in mattresses, bedding, carpets, curtains, and indoor dust. They thrive in warm, moist environments. To control them:

• Wash bedding and mattress pads every week. Use hot water and a dryer set on high.
• Cover the mattress, box spring, and pillows with allergen-proof cases.
• Remove things that collect dust from the bedroom. These include drapes, stuffed toys, and books.
• Take allergy medication before dusting or cleaning. Wearing a filter mask may help.
• If you can, replace wall-to-wall carpets with bare floors—especially in the bedroom.
• Change air-conditioning and heater filters regularly.

Animals
The dander, saliva, and urine of many animals are allergens. Animal fur can also carry dust, mold, and pollen. The best way to avoid animal allergens is not to have a pet with fur or feathers. If you have a pet, these tips may help:

• Whenever possible, keep pets outdoors. If they are allowed inside, keep them off furniture.
• Never let pets into the bedroom, and don't let them sleep with you.
• Wash your hands after touching a pet.
• Consider getting a device that cleans the air with a HEPA filter, at least for the bedroom.
• See tips for reducing dust mites. These tips can also help control pet allergens.
Mold
Mold grows in damp places, such as bathrooms, basements, and closets. To control it:

- Clean damp areas weekly to prevent mold growth. This includes shower stalls and sinks.
- Run an exhaust fan while bathing. Or, leave a window open in the bathroom.
- Repair water leaks in or around your home.
- Don’t use vaporizers, humidifiers, or evaporative (swamp) coolers. These put water into the air and can encourage mold growth.

Pollen
Pollens from trees, grasses, and weeds are common allergens. (Flower pollens are generally not a problem.) The amount of pollen in the air tends to vary with each season. Know your allergy season. During this season, use these tips to limit your exposure:

- Avoid spending too much time outdoors when pollen counts are high. (You can check local counts online.)
- Close windows and use air conditioning when possible.
- After spending time outdoors, change your clothes. Bathe before going to bed to wash pollens away.
- Limit outdoor activities on hot and windy days.

Rodents and Cockroaches
Rodents (mice and rats) and cockroaches are other sources of allergens. To help control them:

- Store food in closed containers. Cover trash cans.
- Keep the kitchen dry and clean of food scraps. Seal cracks in walls, doors, and floors.
- If these measures aren’t enough, consider calling an exterminator.

Allergy Medications and Shots
If you have severe allergies, talk with your healthcare provider about treatment options. Medications can often help relieve symptoms. Allergy shots may help if you’re allergic to things you can’t avoid. They can also help control your asthma. Talk to an allergy specialist to learn more.
Smoke
Smoke from tobacco and fires can irritate your lungs.
• Don’t smoke. Don’t let anyone smoke in your home or car. When you travel, ask for nonsmoking rental cars and hotel rooms.
• Avoid fireplaces and wood stoves. If you can’t, sit away from them. Make sure the smoke is directed outside.
• Don’t burn incense in the home.
• Move away from smoky outdoor cooking grills.

Air Pollution
Car exhaust and other air pollutants combine to create smog. This can be a trigger for flare-ups.
• Check local air-quality reports online or in the newspaper. These let you know when air quality is poor.
• Stay indoors as much as you can when air quality is bad. If possible, use air conditioning instead of opening the windows in your home or car.

Controlling Triggers: Irritants
Air pollutants are a common asthma trigger. But there’s more to air pollution than smoke and car exhaust. Many pollutants can be found inside the home or office. These include aerosol sprays, perfume, and strong odors.
Odors and Fumes
Strong odors and fumes from items such as paint, room fresheners, perfumes, mothballs, incense, deodorizers, and insect sprays can trigger asthma symptoms.

- Use scent-free products, such as scent-free deodorants, soaps, and lotions. Avoid strong-smelling products, such as air fresheners, perfumes, and scented candles.
- Avoid using bleach and ammonia. Use scent-free cleaners. You can also make a safe and effective cleaning solution by mixing water with white vinegar or baking soda.
- Use exhaust fans while cooking to reduce odors.
- Store clothes in boxes with lids. Don’t use mothballs or cedar chips.
- Wear a mask when painting or using other chemicals that cause fumes.

Other Irritants
Dust, fine sprays, and fine powders can irritate your lungs.

- Wear a mask while doing tasks like sanding, dusting, sweeping, and yardwork.
- Use pump bottles instead of spray cans when possible.
- Make sure your work areas are well ventilated.
You may find there are other things that trigger your asthma. These include weather changes, illness, exercise, and other conditions or situations. If any of these trigger asthma symptoms, the tips below can help.

Weather
Weather changes can trigger flare-ups in some people—especially when it’s cold and dry.
- Keep track of which types of weather affect you most: cold, hot, humid, or windy. This varies from person to person.
- Limit outdoor activity during the type of weather that affects you.
- Protect your lungs by wearing a scarf over your mouth and nose in cold weather.

Illness
Illness can make your lungs extra sensitive. Do your best to stay healthy.
- Wash your hands often with soap and warm water. If you are not near a sink, use a hand sanitizer.
- Get a yearly flu shot.
- If you can, avoid people who are sick.

Food Additives
Food additives can trigger asthma flare-ups in some people. If this is true for you, check food labels and avoid sulfites, metabisulfites, and sulfur dioxide. These may be found in foods such as wine, beer, and dried fruit.
Medications
Certain medications cause symptoms in some people with asthma. These include aspirin and aspirin-like products such as ibuprofen and naproxen. They also include certain prescribed medications such as beta-blockers.

- Tell your healthcare provider if certain medications trigger symptoms. Ask for a list of products that contain those medications.
- Check the labels on over-the-counter medications. Products for colds and sinus problems often contain aspirin or aspirin-like ingredients.

Emotions
Crying, feeling anxious or excited, or even laughing are triggers in some people. If emotions trigger asthma symptoms, talk to your healthcare provider. It is likely that your asthma needs to be better controlled.

- If you find yourself feeling short of breath, try to focus on a soothing image in your mind. This will help relax you and calm your breathing.
- Remember to take your daily controller medications. When you’re upset or under stress, it’s easy to forget.

Exercise
For some people, exercise can trigger asthma symptoms. This is called exercise-induced asthma.

- Don’t let exercise-induced asthma keep you from being active. Talk to your healthcare provider about ways to control your symptoms.
- Always carry your quick-relief inhaler with you when you exercise.
- Learn to exercise in ways that help reduce symptoms (see the next pages).
Controlling your asthma will give you the freedom to take part in any sport or activity. So don’t stay on the sidelines. Your healthcare team can help you create an exercise program. You can also learn ways to make exercising more comfortable. If exercise triggers your asthma, use your quick-relief inhaler or other prescribed medications before workouts.

Make Activity Part of Your Life
Exercising at least a few times a week is great for your health. So try to stay as active as you can. For best results, choose activities you enjoy. This makes you more likely to keep at it. Here are some ideas to get you started:

- Aerobic activities help keep your heart and lungs healthy. These include things such as jogging, swimming, or even walking fast. Choose at least one aerobic activity.
- Walking and bicycling are great choices. If you can, have someone join you. This makes exercising more fun.
- Swimming is a good choice because the air is usually warm and moist and may be less likely to trigger a flare-up. Be aware, though, that chlorine fumes are a trigger for some people.
- Indoor exercises are a good choice for cold or smoggy days. Try exercising at a gym. Or, you can try things like yoga at home. Yoga stretches and strengthens muscles. It can also relax your breathing and help you feel less stressed.

Asthma and Athletes
As long as your asthma is under control, there’s almost no limit to what you can do. So if you’re an athlete, talk with your healthcare team about a treatment plan that suits your needs. Then go for it! It may help to know that many pro athletes and Olympic gold medal winners have asthma. So whether it’s making a basket or running the track, keep reaching for your goals.
Exercise Tips
The tips below will help reduce asthma symptoms and make your workouts more enjoyable.

- Use your medications as directed. If prescribed, use your quick-relief inhaler a few minutes before you begin exercising.
- Warm up with light exercises, such as walking, for at least 5 to 10 minutes. This can reduce your chances of having a flare-up.
- Drink plenty of water when you exercise. This keeps your body from losing too much fluid.
- Stop and follow your action plan if you notice asthma symptoms.
- Take it easy when you have a cold.
- Exercise indoors when air pollution is bad, or if it’s very cold, hot, or windy outside.
- Cool down after your workout for at least 5 minutes. Move at a slower pace. Then finish by stretching.
Taking Control of Your Health

There is no one way to manage asthma that works for everyone. It may take time and effort to find what works best for you. The more you know about asthma, the easier it will be to stay in control. So take an active role in your treatment. Know your triggers. Understand what your medications do and how and when to use them. To learn what you need to know, work with your healthcare team. Also check the resources listed below.

Resources

American Lung Association
www.lung.org

Asthma and Allergy Foundation of America
www.aafa.org

Allergy & Asthma Network
www.aanma.org

American Academy of Allergy, Asthma & Immunology
www.aaaai.org

Also available in Spanish

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This booklet is not intended as a substitute for professional medical care. Only your doctor can diagnose and treat a medical problem.
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