Asthma is a Serious Disease….
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Asthma is a chronic inflammatory disease of the airways that results in acute episodes of breathing problems. Common symptoms are wheezing, shortness of breath, tightness in the chest, and coughing, especially at night and in the early morning. Asthma rates have increased nearly every year for the past 20 years and are now considered at epidemic levels. The reason for such a significant increase in asthma isn’t clear. Some researchers suggest that it has to do with more exposure to air pollution, and allergens in tightly-sealed homes with carpets, chemicals, and pet dander. Others suggest that viruses such as respiratory syncytial virus (RSV) are responsible. According to the Centers for Disease Control and Prevention, in the United States today about 4.8 million children between the ages of 0 and 17 years have asthma. In addition, about 10 million people age 18 and older are affected. This means that about 2 students out of an average size class size of 30 will have asthma. So if your child has asthma, he or she is not alone. Statistics indicate that many of your child’s classmates and school staff have this condition as well.

Asthma can have serious effects
Most children with asthma have either mild or moderately severe asthma, but levels of severity can vary a great deal. Some students have symptoms only when they exercise hard; others may wheeze daily if not on medication. No matter what level of asthma severity your child has, it’s important to note two things. First, children whose asthma is not properly controlled, even if they have only a few symptoms, may still experience physical changes and restructuring of their airways that can be harmful. Second, any child with asthma has the potential to experience a life-threatening asthma attack or episode. In 1998, more than 5,000 people died from asthma-related causes; of these, 246 were children between birth and 17 years of age. Clearly, having asthma is serious. It is unfortunate that many children, as well as adults, do not receive proper care for asthma. As a result, their symptoms are not well controlled. Recent research shows that people with asthma and their families, perhaps as a means of coping with the illness, tend to develop a high tolerance for symptoms, including sleep interruption, coughing, and wheezing. They also often avoid certain activities they might normally enjoy. With proper asthma management, most of these people would not have to put up with the discomfort associated with not breathing and feeling well, and the quality of their lives would be greatly improved. Because children may not realize that they can and should feel better, it's important-and may be lifesaving-for parents to advocate for proper treatment on behalf of their children. The school nurse can help them with this.

What makes for good asthma care?
Most importantly, your child’s health care provider should be familiar with national guidelines developed by asthma experts to treat individuals with asthma. The guidelines encourage parents and health care providers to work together to develop an asthma action plan. This plan spells out what to do to monitor your child’s asthma symptoms, lists medications that should be taken and when, and tells what should be done in emergencies. It should be shared with your child’s school nurse so that he or she can help. Being aware early on of when asthma might be getting worse knowing how your child is responding to treatment; helping you child avoid things at home and school that cause breathing problems; and having the right medications with few, if any, side effects can make a huge difference in how your child feels. If your child feels better, he or she will also learn better and miss less school. Also, you'll miss less work and have more peace of mind. It’s important not to wait! Ask your school nurse for more information about asthma and where your child can go for care. These web sites are also excellent sources of information about asthma and allergy: www.aanma.org, www.lungusa.org, www.aaaai.org, www.aafa.org, www.aap.org and www.cdc.gov.

Sources: