Become an Expert in Spotting the Early Signs of Asthma

You and your child can become experts in spotting the early signals of asthma. Maybe you're experts already! As one alert parent said to her child, "Asthma may not be a friend, but if it's an enemy, at least it isn't sneaky. It always gives a warning."

Every child with asthma has a built-in early warning system that signals when symptoms are on the way. Those signals can be seen, heard and felt. Every child has his or own pattern of signals. But parents and children can make keen observation a habit and learn how to recognize those patterns, the body's messages to get going and head off those symptoms before they get bad.

WHAT TO LOOK FOR:

- Anxious or scared look
- Cough, especially at night
- Unusual paleness or sweating
- Flared nostrils when the child tries to get some air
- Pursed lips breathing
- Fast breathing
- Vomiting
- Hunched-over body posture; the child can’t stand or sit straight and can’t relax
- Restlessness during sleep
- Fatigue and breathlessness
- The notch just above the child’s Adam’s apple; when some children are having an asthma episode, this notch sinks in as they breathe in
- Spaces between the ribs; these areas may sink in when the child breathes in

WHAT TO LISTEN FOR:

- Coughing when the child has no cold
- Clearing of the throat a lot
- Irregular breathing
- Wheezing, however light
- Noisy, difficult breathing

HOW TO LISTEN:

- Put your ear to the child's back and your hand on his or her chest. You'll feel the chest go up as the child inhales, drawing in air, and you'll feel the chest go down as the child exhales, releasing air.
- Listen for squeaking or any unusual noises. They may mean asthma, bronchitis or a chest infection. Only a doctor can tell for sure. So regard any noisy breathing as a signal that help may be necessary.
- Note: If the child is having symptoms and there are no chest sounds, it's a sign of a bad, fixed chest that requires medical attention. Call your doctor immediately.
WHAT TO DO IMMEDIATELY:

- Reassure the child by your tone of voice, your attitude of being able to manage and your confidence. All these qualities are catching. Your child will take cues from you and relax.
- If the doctor has recommended a medicine when signals appear, use it. Don't give the child a special dose unless the doctor said to.
- Encourage normal fluid intake. Excessive fluid intake may be counter productive.

ADDITIONAL STEPS TO TAKE:

- Help your child relax.
- If you can find out what triggered the symptoms, remove it or remove the child from the area.
- Your experience and judgment can help you decide what further measures to take in addition to calling the doctor.

FIVE EMERGENCY SIGNS

Having any one of these signs means medical care is needed. Call your doctor or get emergency medical care if your child exhibits any of these signs.

Wheeze, cough, or shortness of breath gets worse, even after the medicine has been given time to work. Most inhaled bronchodilator medications produce an effect within 5 to 10 minutes. Discuss the time your medicines take to work with your child's doctor.

Child has a hard time breathing. Signs of this are:

- Chest and neck are pulled or sucked in with each breath.
- Struggling to breathe.
- Child has trouble walking or talking, stops playing and cannot start again.
- Peak flow rate gets lower or does not improve after treatment with bronchodilators, or drops to 50 percent or less of your child's personal best. Discuss this peak flow level with your child's doctor.
- Lips or fingernails are gray or blue. If this happens, GO TO A HEALTHCARE PROVIDER OR EMERGENCY ROOM RIGHT AWAY!