

Beaver Road Primary School

At Beaver Road we recognise that asthma is an important medical condition which affects many of our pupils across the school.

Asthma is a long term-medical condition that affects the airways- the small tubes that carry air in and out of the lungs. Children and young people with asthma have airways that are almost always red and sensitive (inflamed). Asthma triggers then irritates these airways, causing them to react.

When a child or young person with asthma comes into contact with an asthma trigger, the muscles around the walls of the airways tighten so that the airways become narrower. The lining of the airways becomes inflamed and starts to swell. Often sticky mucus or phlegm is produced. These reactions lead to the symptoms of asthma.

Triggers

A trigger is anything that irritates the airways and causes asthma symptoms. There is a wide variety of asthma triggers which can affect people's asthma in different ways. Many people with asthma have several triggers. It is important that children and young people with asthma get to know their own triggers and try to stay away from them or take precautions where possible.

Common triggers include viral infections (colds and flu), house-dust mites, pollen, tobacco smoke, furry and feathery animals, air pollution, laughter, excitement, stress, scented deodorants or perfumes and latex materials.

Signs and symptoms

The usual symptoms of asthma are:

- Coughing
- Shortness of breath
- Wheezing
- Tightness in the chest (Sometimes younger children will express this as a tummy ache)
- Being unusually quiet
- Difficulty speaking in full sentences

School Medical Conditions (Asthma)

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Asthma varies in severity from person to person. While some children and young people will experience an occasional cough or wheeze, others will have severe symptoms. Some pupils may experience symptoms from time to time (maybe after exercise, or during the hay fever season), but feel fine the rest of the time.

Medication and treatments

The vast majority of pupils with asthma should only need to take reliever medication (usually a blue inhaler) at school.

Reliever inhalers

Every child or young person with asthma should have a reliever inhaler. Reliever medication can be taken immediately when asthma symptoms start. They quickly relax the muscles surrounding the narrowed airways. This allows the airways to open wider, making it easier to breathe again. However, relievers do not reduce the swelling in the airways.

- Relievers are essential in treating asthma attacks.
- They are usually blue
- They come in different shapes and sizes

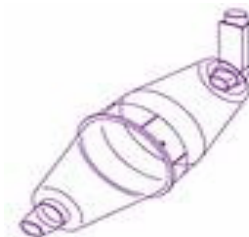
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Spacers

Spacers are used with aerosol inhalers. A spacer is a plastic or metal container with a mouthpiece at one end and a hole for an aerosol inhaler at the other. Spacers are used to help deliver medicine to the lungs. They make aerosol inhalers easier to use and more effective especially for children and young people.

- Pupils with asthma who have been prescribed a spacer by their doctor or asthma nurse should have his or her own individually labelled spacer. This should always be kept with their inhaler.



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Preventer inhalers

Preventer medication protects the lining of the airways. It helps to calm the swelling in the airways and stop them from being so sensitive. Taking preventer medication means that a child or young person with asthma is less likely to react badly when they come into contact with an asthma trigger.

- Preventer inhalers are usually brown, beige, orange, red or white.
- They reduce the risk of asthma attacks
- Are usually taken first thing in the morning and before bedtime so are therefore not usually taken during school hours.

Inhalers in school

- It is essential that all pupils with asthma are allowed to access their reliever inhaler freely at all times.
- Reliever inhalers should never be kept in a locked room or drawer.
- Pupils should be reminded to take their reliever inhaler to PE lessons, school trips and other activities outside the classroom. A member of staff will be responsible for this for younger pupils.
- Reliever inhalers are available during school trips or residential.
- It is important that all asthma medication is clearly labelled with the pupil's name.
- Parents are responsible for ensuring their child's asthma medication is within date.
- In addition a named member of staff (Sarah Herbert) is responsible for checking the expiry dates of all inhalers kept in school, three times a year.

Exercise and physical activity

Exercise and physical activity is good for everyone, including children and young people with asthma. The majority of pupils with asthma should be able to take part in any sport, exercise or activity they enjoy, as long as their asthma is under control.

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For some children and young people exercise is their only trigger (often known as exercise-induced asthma), while for others it is one of many triggers. However, as exercise is part of healthy living, it is one asthma trigger that should be managed, not avoided.

Tips for supervising pupils exercising with asthma:

- If exercise and physical activity makes a child or young person's asthma worse, always ensure that they use their reliever inhaler (usually blue) immediately before they warm up.
- Always start a session with warm up exercises.
- Try to avoid things that trigger asthma during exercise (e.g. dust, cold air, smoke, pollen, cut grass).
- Always make sure that inhalers are readily available and close to hand.
- If a pupil has asthma symptoms while exercising, they should stop, take their inhaler and wait at least five minutes or until they feel better before starting again.
- Always end a session with warm down exercises.

Emergency procedures

Common signs of an asthma attack:

- Coughing
- Shortness of breath
- Wheezing
- Tightness in the chest (Sometimes younger children will express this as a tummy ache)
- Being unusually quiet
- Difficulty speaking in full sentences

Do....

- Keep calm

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- Encourage the pupil to sit up and slightly forward-do not hug them or lie them down.
- Encourage and ensure that they take two puffs of their reliever inhaler (usually blue) immediately-preferably through a spacer.
- Ensure that clothing is loosened
- Reassure and comfort the pupil.

If there is no immediate improvement continue to make sure the pupil takes one puff of their reliever inhaler every minute for five minutes or until their symptoms improve.

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Call an ambulance urgently if any of the following:

- The pupil's symptoms do not improve in 5-10 minutes.
- The pupil is too breathless or exhausted to talk
- The pupil's lips are blue.
- You are in any doubt.

Ensure the pupil takes one puff of their reliever inhaler every minute until the ambulance arrives.

Important things to remember in asthma attack:

- Never leave a pupil having an asthma attack.
- Send for help/first aider
- If the pupil does not have their inhaler and/or spacer with them, send another member of staff or pupil to collect it.
- Reliever medicine is very safe. During an asthma attack do not worry about a pupil overdosing.
- Contact the pupil's parents immediately after calling for an ambulance.

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