

eAsthma Tracker

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NEWSLETTER

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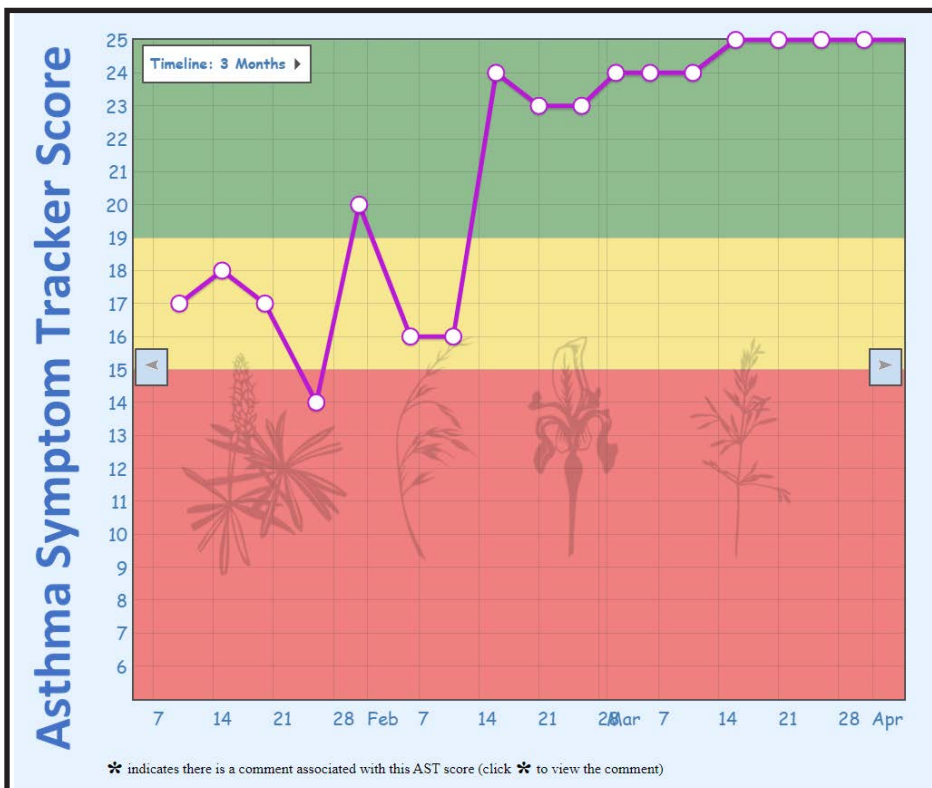
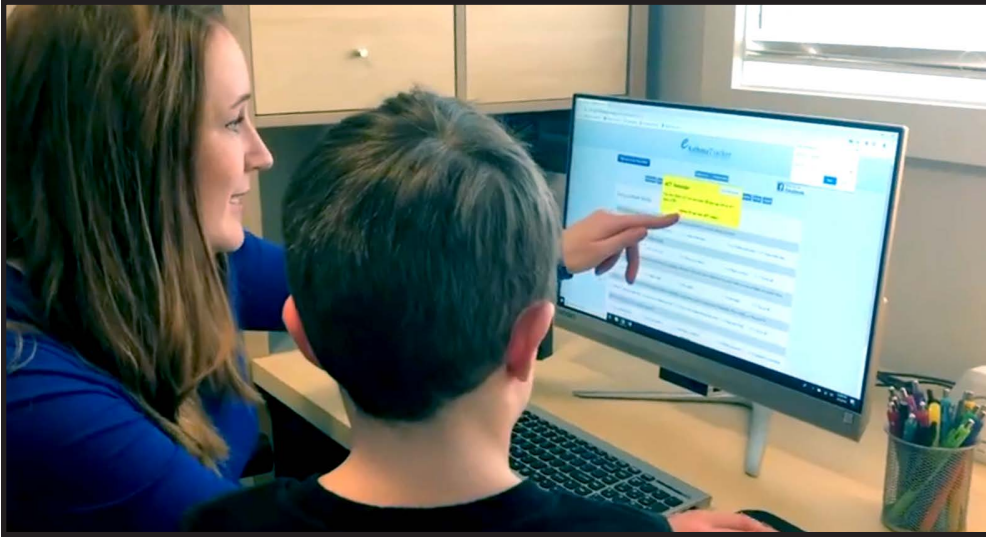
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How the eAsthma Tracker Can Help You & Your Child

by Jordan Gaddis

When your child has asthma, it's important to keep track of symptoms and identify triggers. This information will help their doctor understand how best to treat their condition. The doctor may ask you

to keep a diary of things like wheezing, coughing, or shortness of breath. But keeping a written record of your asthma can be a lot of work. What's more, it can be tough to know when your child's asthma is well controlled, not well controlled, or even poorly controlled; and how to keep it well controlled.



The eAsthma Tracker is an online tracking tool—available on both web and mobile—designed to help you easily monitor your child's asthma (older kids may choose to monitor on their own). Each week, you'll be prompted to answer a few questions about your child's breathing, the medications they take, and whether you've sought treatment for or missed work/school due to their asthma. You'll then be shown a color-coded graph of your child's score, so you'll know exactly how their asthma is doing.

How the eAsthma Tracker Can Help You & Your Child Continued...

Using the eAsthma Tracker will help you:

- **Improve asthma control.** Consistent use of the eAsthma Tracker has been shown to improve the patient's asthma control.
- **Eliminate guessing.** It's easy to tell whether your child's asthma is well controlled, not well controlled, or poorly controlled.
- **Decide if current treatment is working.** Because the eAsthma Tracker creates a clear picture of how your child's asthma is doing over time, the doctor will be able to see if the current treatment is helping. Your child's doctor can then decide whether to adjust medication.
- **Identify triggers and patterns.** Each time you complete the quiz, you'll get a clear visual, so you can easily identify triggers and patterns. The longer you keep track, the more you'll learn about your child's asthma control.
- **Engage in real-time, two-way communication.** When your child drops into the yellow or red zone, you and your doctor receive a notification. If your child is in the red zone, you'll get a phone call from the doctor's office so that—together—you can decide what to do.
- **Reduce ER visits.** Using the eAsthma Tracker to monitor symptoms can actually reduce visits to the emergency room, according to a study published in [Pediatrics](#).

To get started with the eAsthma Tracker or find out if your pediatrician uses it, call the eAsthma Tracker team at 801-449-1373 or send an email to asthmatracker@hsc.utah.edu.



References

Kiefer, Julie. "Children Who Use Asthma Tracking App Have Better Disease Control and Fewer Hospital Visits." 16 May 2019. University of Utah. <https://healthcare.utah.edu/publicaffairs/news/2019/05/asthma-app.php>
University of Utah, Intermountain Healthcare. <https://asthmatracker.utah.edu/public/index.php/>

Inhalers:

Control vs. Rescue and Why It Matters

by Jordan Gaddis

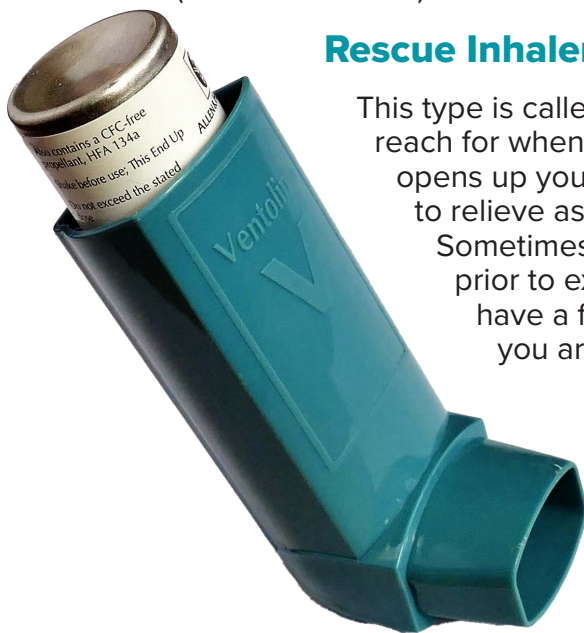
If you're new to taking medicine for asthma, the names and types of inhalers can be confusing. Which is which, and when should you take each one? Here's what you should know about the two basic types of inhalers:

Control Inhalers

A control inhaler is used to do just that—control your asthma. Your doctor may ask you to use a controller medicine daily for a long period of time to reduce your asthma symptoms and the number of asthma attacks. These medicines are inhaled steroids that work to reduce the amount of inflammation in your lungs. Think of these inhalers like vitamins. If you take them everyday, you can stay healthy and not have as many asthma symptoms.

Examples of common control medicines include:

- Flovent® (fluticasone)
- Pulmicort® (budesonide)
- Asmanex® (mometasone)
- Qvar® (beclomethasone)



Rescue Inhalers

This type is called a rescue or quick-relief inhaler because it's the one you reach for when you're in trouble. The medicine, called a bronchodilator, opens up your airways to help you breathe better. It works quickly to relieve asthma symptoms and lasts for a short-period of time. Sometimes your doctor will tell you to use it before triggers, such as prior to exercise. Think of these inhalers like you do Tylenol when you have a fever. Take them when you have symptoms but not when you are doing well with your asthma.

Examples of common rescue inhalers include:

- Albuterol® (Ventolin, Proventil, ProAir)
- Levalbuterol® (Xopenex)

Combination Control Inhalers

Some inhalers are a combination of controller medications, meaning they have both a steroid and a

long-lasting bronchodilator.

No matter which medication you take, follow your doctor's instructions on how and when to take it. Be sure to make an asthma action plan with your doctor. Using the eAsthma Tracker will help you keep track of the medications you're taking and whether you may be using your rescue med too frequently, meaning your asthma may not be under control. Visit <https://asthmatracker.utah.edu/> to learn more.

References

Mayo Clinic Staff. "Asthma Medications: Know Your Options." 19 June 2020. <https://www.mayoclinic.org/diseases-conditions/asthma/in-depth/asthma-medications/art-20045557>

Inhalers: Control vs. Rescue



The Differences

What are they?

Control Inhalers

- Use Daily
- Inhaled steroids
- Control your asthma
- Reduces symptoms and number of asthma attacks

Rescue Inhalers

- Use as needed during asthma attack
- Opens up your airways
- Works quickly to relieve asthma symptoms
- Lasts for a short-period of time

Examples

Control Inhalers

- Flovent® (fluticasone)
- Pulmicort® (budesonide)
- Asmanex® (mometasone)
- Qvar® (beclomethasone)

Rescue Inhalers

- Albuterol® (Ventolin, Proventil, ProAir)
- Levalbuterol® (Xopenex)

What's Your Asthma IQ?

by Lis Malmgren

Question 1:

Why is it hard to breathe during an asthma attack?

- A. Because the muscles around your airways tighten
- B. Because your airways become inflamed and swollen
- C. Because your mucus production thickens
- D. All of the above
- E. None of the above

Answer: D. An asthma attack is a combination of all these. While mild asthma attacks (lasting a few minutes to a few hours) are more common, severe asthma attacks can last long periods of time and often require medical attention. It is important to recognize your asthma symptoms and seek help when needed.

Question 2:

Which of the following are asthma triggers?

- A. Thunderstorms
- B. Strong emotions
- C. Tobacco smoke
- D. All of the above are triggers
- E. None of the above are triggers

Answer: D. Though unusual, all of the above can trigger an asthma attack. The list of triggers is long—keep in mind that triggers will vary from one asthma sufferer to another.

Question 3:

True or False: You don't have to have allergies to have asthma.

Answer: True. According to the American Academy of Allergy, Asthma, and Immunology, only half of the Americans with asthma also have allergies.

Question 4:

A quick-relief inhaler should be used as . . .

- A. a method to prevent asthma attacks.
- B. along with daily medications to help control flare-ups.

Answer: B. Quick-relief inhalers work immediately to relieve asthma symptoms, while long-term control medications work over time to prevent asthma attacks. Asthma control works best when quick-relief inhalers are used in conjunction with controller medications. Talk to your doctor about how often and under what circumstances these medications should be used.

Question 5:

True or False: People with asthma should avoid exercise.

Answer: False. Though you should talk to your doctor before starting any exercise regime, don't assume that because you have asthma exercise is off the table. With the right treatment, exercise may help strengthen your airways. You and your doctor may also want to discuss using an inhaler before exercise to minimize asthma symptoms during exercise.

Question 6:

True or False: You don't have asthma if you don't wheeze.

Answer: False. You do not have to be wheezing to be suffering from asthma. Sometimes the only symptom is a persistent cough. Other symptoms include rapid breathing, chest tightening or pressure, and shortness of breath.

*Check out the [Education Resources page](#) in the eAsthma Tracker for further resources.

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References:

- <http://www.webmd.com/asthma/guide/asthma-attack>
- <http://www.everydayhealth.com/asthma-pictures/things-that-can-trigger-asthma-attacks.aspx>
- https://secure02.kidshealth.org/parent/medical/asthma/rescue_controller.html