

# STAYING ASTHMA FREE

All you need to know about preventers



**SPACE TO  
BREATHE**  
taking care of asthma

## HELPING YOUR CHILD BREATHE MORE EASILY

### What is a preventer?

**Preventers are the most powerful and effective medication for long-term control of asthma. When your child uses their preventer regularly they will wheeze and cough less and not need to use their reliever medicine so often.**

### When do you use it?

It is important to use a preventer every day. Preventers work slowly and must be used regularly to build the effect. You should start to notice changes in your child's asthma symptoms after around two weeks. The preventer medicine won't work if your child only uses it now and then, so make sure they continue to use it every day, even after symptoms start to fade.

### What medicines are in a preventer?

There are three preventer medicines available:

#### 1. ICS

Inhaled corticosteroids (ICS) are usually tried as the first option for preventer medicine.

#### 2. LABA

Long acting beta-adrenoceptor agonists are usually added on top of the ICS treatment as a second option.

**Importantly** LABA must be used with ICS to be safe.

#### 3. ICS + LABA

Combination medicines are another option that combine two medicines in one inhaler, making it more convenient to use instead of two separate inhalers.

**Your doctor will prescribe you with an appropriate inhaler depending on your child's asthma, age and inhaler technique.**

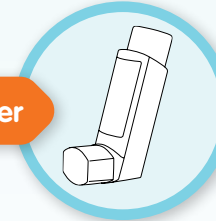


## GETTING TO KNOW THE PREVENTER

### How do they look?

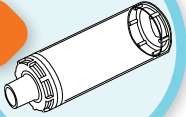
**Aerosol inhalers** are the most common preventer inhalers and are the best option for younger children, children with poor inhaler technique and for children who use a spacer.

#### Aerosol inhaler



#### Spacer

(Space Chamber)



**Spacers** are useful for younger children and children with poor inhaler technique.

They can be used with both your child's aerosol reliever and aerosol preventer medicine.

**Your doctor will show you and your child how to use your aerosol inhaler and spacer properly.**

### Other types of inhalers

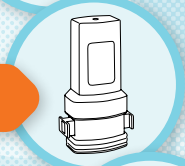
Accuhaler, Aerolizer and Turbuhaler inhalers are effective to use with older children and children who have good inhaler technique.

**These inhalers cannot be used with spacers.**

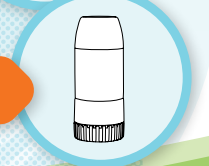
#### Accuhaler



#### Aerolizer



#### Turbuhaler



## COMMON QUESTIONS

### How is a preventer different from a reliever?

Preventers are different from relievers because they help to reduce asthma symptoms and attacks from occurring when used regularly. Relievers treat asthma symptoms and attacks when they occur and only provide temporary relief.

Preventers usually contain a steroid called a corticosteroid. This is the active ingredient that helps to prevent asthma symptoms and attacks. A corticosteroid is not the same as an anabolic steroid, often used by athletes.

Add on preventers like LABAs do not contain corticosteroids but **must** be used with a corticosteroid to be

safe and effective. Your doctor will closely monitor your child if they are prescribed with a LABA and explain how to use these medicines together.

### Can my child become addicted to their preventer?

No. Preventers are not addictive medications. In fact, when the preventer is used regularly, you should find that your child uses and depends less on their reliever medication over time.

### Are there side effects?

All medicines can cause side effects. Preventers have more benefits than harms and most children won't experience any side effects from using their preventer.

## CONTINUED...

Some children may get a sore mouth, a hoarse voice or a fungal infection of the mouth. You can help avoid these side effects by making sure that your child rinses out their mouth or cleans their teeth after taking the preventer.

Using a spacer and a mask/mouth piece with the preventer also helps to reduce these side effects by allowing more medication to get into the lungs instead of just the mouth.

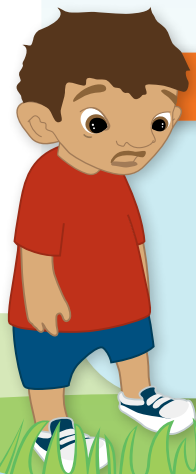
Some children may experience temporary growth suppression during their first year of medication. Long-term studies have shown that preventers only briefly slow growth (about 1cm in first year). Their growth catches up later and as adults they are no shorter.

## TOP THREE PREVENTER TIPS

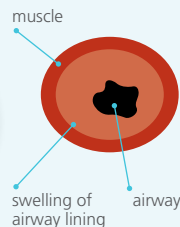


- 1** Use it every day, as directed by your doctor
- 2** Help your child rinse out their mouth after using the inhaler
- 3** Rinse the inhaler with warm water once a week so it doesn't get blocked

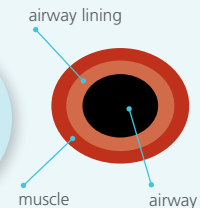
## THE SCIENCE PART



When your child has symptoms like wheezing and coughing, it is because their airways become inflamed and mucus builds up, making it harder to breathe



When used regularly, preventers work by soothing inflammation of airways and reducing mucus build up. This helps to clear airways, making it easier to breathe.





## IT'S EASY TO GET IT RIGHT

### Make it part of the routine

Help your child use the preventer at the same time every day, so that it becomes a regular event, just like cleaning your teeth.

### Keep it where you can see it

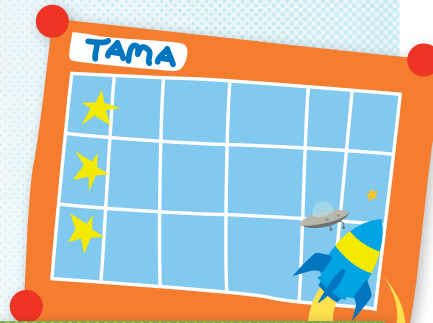
Put it somewhere obvious, so you remember to use it.

### Keep a tally

Every time your child uses their preventer, mark it on the calendar or make a special chart. You can give out rewards when your child has stuck to the programme.

### Visit your doctor regularly

Remember to go to the doctor before your child's preventer medicine runs out. If, after three months of regular preventer use, your child's asthma symptoms are still not under control, your doctor will talk you through your next options.



## TAKING POSITIVE ACTION

Recording your child's symptoms, triggers, medication, dosage and directions is a great way to manage your child's asthma. An action plan will show you how to change the dose of your child's asthma when they're unwell.

Ask your doctor or your asthma educator to help you create an action plan specifically for your child.



## MEDICATION

has been prescribed with the ticked medication(s) below.

When your child is well, they should take their preventer medicine:  times each day  puffs each time

When your child is wheezy or has a cold, you may need to change the dose of preventer they use.

If your child is taking the preventer regularly, they shouldn't need to use their reliever more than 3 times a week. If they are, then you should go back to see your doctor to discuss other options.

Remember, all children are different. Your child may need to take the preventer all year round, while another child may only need their preventer during certain months.

Talk to your doctor if you have any questions or concerns so that your child gets the best treatment for their asthma.

### ICS: Inhaled corticosteroid inhalers

**Beclomethasone dipropionate**  
Beclazone



**Fluticasone**  
Flixotide



**Fluticasone**  
Flixotide



**Budesonide**  
Pulmicort



### LABA: Long-acting Beta agonist inhalers

**Salmeterol**  
Serevent



**Salmeterol**  
Serevent



**Eformoterol fumarate**  
Oxis



**Eformoterol fumarate**  
Foradil



### LABA + ICS: Combination inhalers

**Fluticasone/Salmeterol**  
Seretide



**Fluticasone/Salmeterol**  
Seretide



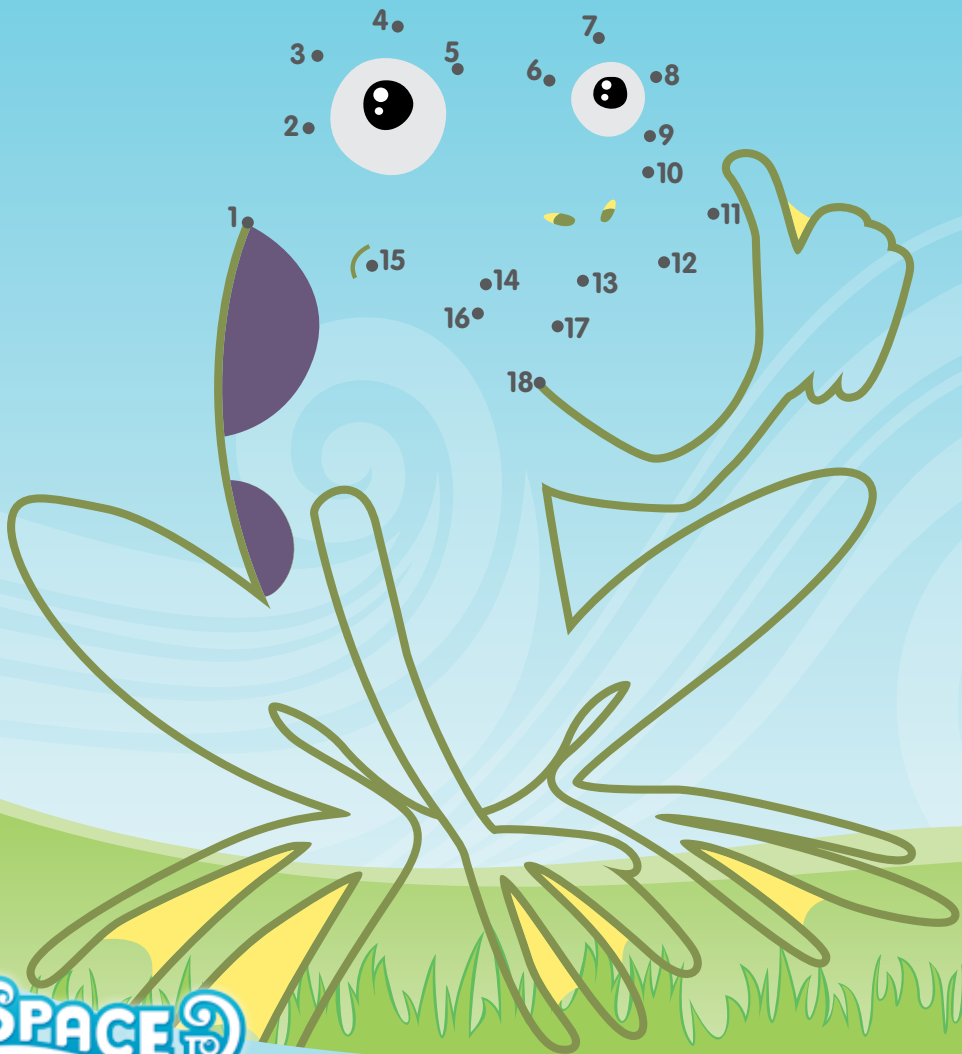
**Budesonide/Eformoterol**  
Symbicort



**Budesonide/Eformoterol**  
Vannair







**SPACE TO  
BREATHE**

taking care of asthma

[www.spacetobreathe.co.nz](http://www.spacetobreathe.co.nz)

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