

An introduction to managing asthma and wheeze in children under 6

You may have heard your child wheeze. It sounds like whistling when they are breathing out and hearing it can be an unsettling experience.

A wheeze may happen if there is a respiratory infection, or it can be a sign of asthma.

Asthma and wheeze can seem daunting when they affect your family, but with the right management your child can have a healthy and active life.



What is wheeze?

Wheezing is the result of air moving through the small airways in the lungs when they have mucus in them or are narrower than usual.

Wheeze in young children is often caused by a respiratory virus such as a cold. In these cases, the wheeze will stop once the child gets better.

Are wheeze and asthma the same?

Wheeze is not the same as asthma, but it can be a symptom of asthma. One third of children who have wheeze when they are under 6 years of age will go on to have asthma as they grow up.

What is asthma?

Asthma is a condition where the small airways are sensitive and easily inflamed. When a person with asthma is exposed to certain triggers, these airways can become swollen and narrow, and produce more mucus, which makes it difficult to breathe. Some other symptoms of asthma include chest tightness – your child might describe this as a ‘sore tummy’ – and cough, especially at night.

How do I know if my child has asthma?

For adults and children 6 years and older, a diagnosis of asthma can be supported by a breathing test called spirometry. This test is not as easy for children younger than 6 years to do, which is why it can be difficult for a health professional to confirm asthma in this age group.

If spirometry is not available, your doctor will use other information to make a diagnosis.

A wheeze is more likely to be asthma if it's:

- ▶ very frequent
- ▶ worse at night or early in the morning
- ▶ happening when your child doesn't have a cold
- ▶ worse when your child is exposed to certain triggers.

Even if your child's diagnosis can't be confirmed, they can still be treated.

What sort of treatment will my child need?

The medicines used to treat asthma and wheeze have the same purpose: to open the airways and help your child breathe more easily.

Your child may need to be prescribed a medicine that relaxes the airway muscles. This type of medicine is often described as a ‘reliever’ and is only taken when your child is finding it hard to breathe.

They may also be prescribed a medicine that reduces mucus production, swelling (inflammation) and sensitivity in the airways. This type of medicine is often described as a ‘preventer’ and needs to be taken regularly, whether or not symptoms are present.

Your child will need to take these medicines using an inhaler (sometimes called a puffer) and a spacer (to help them get the full dose of the medicine into their lungs). If they are younger than 4 years, they will also need a mask to make sure they are inhaling the right dose of medicine.

How can I help my child?

Learning about your child's breathing difficulties can feel overwhelming. There is a lot of new information to remember. Use the checklist below to keep track of important details.

After a hospital visit:	Seeing your child's doctor:
<input type="checkbox"/> Make an appointment to see your child's GP within the next 3 days	At your appointment, ask the doctor to:
Check you have the following items:	<input type="checkbox"/> tell you about potential asthma triggers
<input type="checkbox"/> a discharge letter to give to your child's doctor	<input type="checkbox"/> check your child's inhaler technique
<input type="checkbox"/> medicine or a prescription from the hospital (if you were given one)	<input type="checkbox"/> complete a detailed action plan for use at home, as well as school, daycare or carers
<input type="checkbox"/> a spacer device (and a mask if needed)	<input type="checkbox"/> point you to information and resources
<input type="checkbox"/> an action plan (may be referred to as an 'asthma action plan')	<input type="checkbox"/> make another appointment in 1 month to check if treatment is beginning to work, or sooner if your child's condition is getting worse
<input type="checkbox"/> a list of any questions you have about your child's medicine or condition	<input type="checkbox"/> answer your questions about your child's condition
Take the above items with you when you see the GP	
Learn how to:	
<input type="checkbox"/> give your child their medicine	
<input type="checkbox"/> recognise when their symptoms are getting worse	
<input type="checkbox"/> know when it's time to take your child to the emergency department	

Your health professional is the best person to answer your questions. Use the space below to write down anything you want to ask about your child's asthma or wheeze.

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To learn more about asthma and wheeze:



Talk to:

- ▶ an asthma educator by calling Asthma Australia 1800 ASTHMA (1800 278 462)
- ▶ a health professional to get medicines information 1300 MEDICINE (1300 633 424) (calls triaged by healthdirect Australia)



Read more about asthma

on these websites:

- ▶ Asthma Australia: www.asthma.org.au
- ▶ National Asthma Council: www.nationalasthma.org.au



Show your child:

'Asthma Kids'

www.asthmakids.org.au



Download a

comprehensive resource pack from the Sydney Children's Hospital Network: www.schn.health.nsw.gov.au

Search for 'Asthma and your child' and read the resource pack for action plans, first aid and other valuable information.

nps.org.au

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