ACUTE ASTHMA



Choosing an Inhaler Device

A pressurized metered-dose inhaler (MDI) with a valved spacer (with or without a face mask, depending on the child's age) is the preferred delivery system

Choosing an Inhaler Device

Alternative device Age group Preferred device Pressurized metereddose inhaler *plus* **Nebulized with face** Younger than 4 years dedicated spacer with mask face mask Pressurized metereddose inhaler plus Pressurized metereddedicated spacer with dose inhaler plus mouth piece, or 4-5 years dedicated spacer with mouth piece **Nebulizer with**

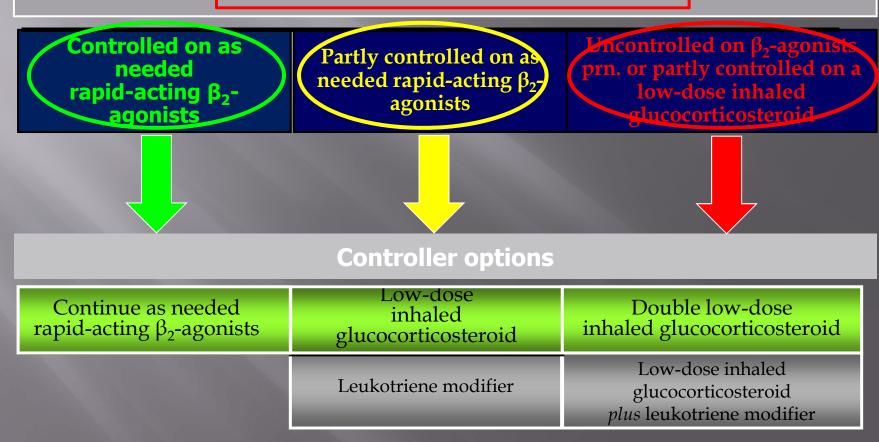
mouthpiece or face

mask



Asthma Management Approach Based on Control for Children 5 Years and Younger

Environmental control As needed rapid-acting β_2 -agonists



Oral glucocorticosteroids should be used only for treatment of acute severe exacerbations of asthma. Green shaded boxes represent the preferred treatment options.



Acute Exacerbations of Asthma in Children 5 Years and Younger

Early symptoms of an acute exacerbation:

- Increase in wheeze or shortness of breath
- Increase in coughing, especially at night
- Reduced exercise tolerance
- Impairment of daily activities, including feeding
- A poor response to reliever medication



Acute Exacerbations of Asthma in Children 5 Years and Younger

An action plan should be provided to the family members and caregivers to:

- Recognize an asthma attack and initiate tr eatment
- Recognize a severe episode
- Identify when urgent treatment is necessary
- Provide specific recommendations for follow-up care

Management of acute exacerbation of Bronchial Asthma











