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Living with asthma doesn’t mean you have to stop living. You can still dance, play sports, mountain bike or just hang out with your friends.
Asthma and asthma attacks
Asthma affects your breathing. During an asthma attack, the airways that carry air to the lungs (bronchial tubes) swell up (inflammation) and make mucus, which clogs the airways. The airway muscles also tighten. All of this can make breathing very difficult.

Does asthma get in your way?
It shouldn’t.
Asthma may be a pain, but there is no need to let it control your life. You can manage your asthma, just like you can manage your schedule or your schoolwork.

What is asthma?
Asthma affects your breathing. It causes swelling in the airways that lead to your lungs. When this happens, the airways narrow. This can make it hard to breathe. How often you have trouble breathing depends on how severe your asthma is. Some teens breathe normally most of the time, while others feel as if they are always short of breath. Other teens may only have trouble breathing at certain times — such as during exercise or at night.

What is an asthma attack?
Have you ever tried to suck through a straw when it was pinched or blocked? That is sort of how an asthma attack feels. Like the blocked straw, the tubes that carry air to your lungs narrow. Mucus may also block them. It’s hard to get air — it’s hard to breathe. You may have other symptoms like wheezing, coughing, or tightness in your chest. Sometimes you may have a hard time sleeping, or you may get tired quickly when you exercise or play sports. You may hardly ever have asthma attacks, or you may have them a lot. They can be mild or severe. In severe attacks, your heart might beat faster, and it might be hard to talk or breathe (even if you are sitting down). If you have a very severe attack, you may need to go to the emergency room.

You have asthma
If you’ve had asthma for a while, you know it can be a pain. If you just found out you have it, well, you will find out it’s a pain. The stuff you have to do — take meds, use an inhaler, avoid triggers — might make you feel weird and different than others. You might not be able to play sports as hard as others. You might have to think twice about hanging out at a friend’s house if he or she has a pet that triggers an asthma attack.

How do you feel about this?
Are you mad? Do you stay away from sports? Avoid your friends? Use asthma as an excuse not to do things? Pretend that you don’t have asthma?

It is pretty normal to feel angry, or to want to act like asthma is not part of your life. But it is part of who you are. And you can help control it!
Pretending you don’t have asthma makes it worse and can be dangerous. Asthma is part of your life. Be up-front about it. Tell your friends. They’ll understand.

Be in charge.
If you understand asthma, you can explain it better to your friends. You’ll know what to do so that you can lead your life as you wish. Your friends will probably even help you.

Talk to your friends and grownups.
You don’t have to make a big deal about it, but tell others about your asthma. Make sure your parents know you want to be involved in all asthma talk with your doctor. You’ll want your coach to know that exercising in cold weather is not a good idea for you. You’ll want your friends to understand why you walk away when someone lights a cigarette. Chances are, a lot of the people you know also have asthma.

Don’t let asthma hurt your independence.
You may feel tied down by asthma, but you don’t have to be. If you work with your doctor, use your meds, know your triggers, and take charge, your life will be no different than other teens’ lives. Just be aware of what you need, whether you are going to your friend’s house, on a road trip, or to the movies. And always take your reliever medicine with you.

Think you can’t do things? Look at who has asthma: Jerome Bettis of the Pittsburgh Steelers, Chicago White Sox slugger Carl Everett and rap star Ludacris. Asthma doesn’t mean you have to give up sports or being active.
What can I do?

1. Learn about it.
Talk to your doctor and other teens with asthma. They can help you know what asthma is like, and they can tell you what they do about it. The more you know about asthma, the easier it is to beat it.

2. Avoid your triggers.
The more you try to keep triggers out of your life, the more asthma will stay out of yours. Help your parents keep the house clean. Stay inside when too much pollen is in the air, like in the spring. Don’t smoke!

3. Use your medicines.
Medicine reduces the swelling in your airways. It also helps prevent asthma attacks and can make you feel better.

If you just try to live with it, your symptoms can get worse. You may even end up dialing 911 and spending some time in the emergency room.

5. Make an asthma plan.
Don’t let asthma bring you down! Lots of teens have asthma, and they live like everybody else. With a plan, asthma won’t get in your way.

Zane was 11 when his doctor told him he had asthma. His first thought was about his music. He played trumpet in the school band.

“I wondered if I would still have the lung power to play, and that really worried me. I really wanted to keep playing.”

Zane’s doctor and parents helped him learn about asthma, and he also explored asthma on the Internet to learn more.

“I found out I’d be okay if I made a plan and stuck to it. So that’s what I’ve been doing. I always take my controller meds, and I sometimes use a reliever before I play. I’m even starting my own band!”

Triggers are things around you that can hurt your lungs and cause an attack. If you know them, you may be able to avoid asthma attacks.
What are triggers?
Triggers are things around you that can hurt your lungs and cause an attack. Your pet can be a trigger, and so can dust mites, ugly little creatures that hang out in pillows and beds and furniture. You can’t see them, but they are there! Cockroaches can be a trigger, and smoking triggers a lot of asthma. If you catch a cold, have the flu, or have another problem that affects your lungs or breathing, it can trigger your symptoms.

Finding your asthma triggers.
Asthma triggers cause asthma symptoms or make the symptoms worse. To identify your triggers, fill out the form below. Fill in the symptoms and your peak expiratory flow (PEF), if possible. Then discuss the list with your doctor.

Don’t smoke.
You’ve probably seen smokers cough, wheeze, and suck air. If you smoke, you have probably done it yourself. This is because smoke makes your airways swell up and narrow. It triggers mucus – sticky stuff that starts filling your lungs. This is also what happens in an asthma attack. That’s why smoking is really bad if you have asthma. Combining asthma and smoking is a disaster in the making – you could easily end up in the emergency room.

If you smoke, your controller medicine may not work as well, and you may have to use more and more reliever medicine. This can also make your asthma even worse.

Quitting smoking can be hard. But if you want to, you can. Ask your friends or parents to help you. See your doctor – he or she may be able to give you medicine that makes quitting easier.

Avoid secondhand smoke.
Chances are, you will run into secondhand smoke – the smoke from others’ cigarettes. People may be smoking at parties, restaurants, or even at home. Secondhand smoke can do the same thing as smoking – trigger your asthma and make it worse. If you are with smokers, you probably will have attacks more often, and they may be more severe. You’ll have to take more medicine. And just like a smoker, you could end up at the ER.

You usually can’t change what people do, but you can talk to them about it. Think about staying away from smokers’ homes. If they have to smoke, ask them to do it when you are not around. If they want a “smoke break,” volunteer to leave the room yourself. Choose a certain place to be the smoking room, so you don’t have to breathe in the smoke. And try to get your friends to quit – for them and for you.

Cold and flu season
Colds and the flu trigger asthma attacks for many people. There are things you can do to prevent colds and the flu.

• Get a flu shot every year. Talk to your doctor about this in the early fall when flu shots are typically available.
• Ask your doctor about a shot to prevent pneumonia.
• Wash your hands often.
• Use a tissue rather than a handkerchief to blow your nose.
• Keep your hands away from your nose, eyes, and mouth. Cold and flu germs are most likely to enter your body through these areas.
• Eat a healthy and balanced diet, and get regular exercise.
• Do not smoke. Smoking harms your nose and lungs. This makes it harder to recover from a cold or the flu.

<table>
<thead>
<tr>
<th>Trigger</th>
<th>Yes</th>
<th>No</th>
<th>Symptoms</th>
<th>Peak Flow</th>
</tr>
</thead>
<tbody>
<tr>
<td>I smoke or am around people who smoke.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have symptoms when I am at home.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have symptoms when I am at work.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Part of my home or workplace is damp and musty.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have a pet.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>There are cockroaches in my home.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have symptoms when it is cold out.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have symptoms when I go outside.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I work with chemicals or cleaners.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have symptoms when I have a cold or the flu.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have symptoms before, after, or during exercise.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Certain foods or drinks cause symptoms.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Certain medicines, such as aspirin, cause symptoms.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

“I really had a hard time when my doctor told me I had asthma. I thought kids at school would make fun of me or not ask me to do things. I tried to hide my asthma – I’d go into the bathroom to use my medicine and ask to go home immediately if I felt symptoms.”

“But my parents and teachers were onto me. I finally told some people. And guess what? Most of them had friends with asthma!”

“Now that I no longer hide my asthma, it’s easier to control. My life is just like anyone’s.”

– Jenna, age 12
Staying active with asthma
Asthma doesn’t mean you have to give up sports or being active. Although exercise and activity can trigger an asthma attack, a few simple rules will keep your game on.

• Ask your doctor if you should use reliever medicine right before you start any exercise.
• Warm up for 15 minutes before you exercise. Do some light stretching or jogging.
• Keep your reliever medicine with you.
• Breathe through your nose during exercise.
• Take brief rests during exercise, and use reliever medicine if symptoms start.
• If it is cold out, cover your mouth with a scarf or mask.
• Swimming, walking, easy biking, and downhill skiing are less likely to cause asthma attacks than many other sports.
• Sports that make you work harder are more likely to cause attacks. These include soccer, basketball, and long-distance running.
• Cool down after exercise.
• Don’t exercise while you have a cold or the flu, if it is very cold, or when pollen counts are high (if you have allergies).
• Don’t exercise if you have asthma symptoms.

When to get help
Call 911 or other emergency services immediately if you have severe asthma symptoms.

• You have taken your reliever medicine and after 20 to 30 minutes still do not feel better.
• You check your peak flow and it is less than 50% of your personal best.
• You are breathing very fast.
• Shortness of breath makes it hard for you to talk or eat.
• You are using your neck, chest, and belly muscles to breathe. If you are doing this, the skin between your ribs falls inward with each breath. You may also open your nostrils wide when you breathe in.
• You are taking longer than usual to breathe out. You may even wheeze when you breathe in.
• You notice you are sitting up, leaning forward, or sitting with your nose tilted up as if sniffing the air to breathe.
• Your skin color is pale, gray, bluish, or spotted. You also may notice a color change on your tongue, lips, earlobes, or nail beds.

Medicine prevents symptoms and helps you live the life you want. It puts you in charge, and asthma takes a backseat to your life.

Be sure to tell your coach or PE teacher that you have asthma and what to do if you have an asthma attack. That way, he or she can help you.
Why do you need medicine?
Because it prevents symptoms and helps you live the lifestyle you want. Medicine puts you in charge – asthma takes a backseat to your life.
You’ll have two types of asthma medicine – controllers and relievers.

Controllers.
Use your controllers every day even if you don’t feel your asthma. These prevent your airways from swelling and control your symptoms. When you use controllers, you can prevent asthma attacks.

Relievers.
Use your relievers when you have an asthma attack. Always carry your relievers with you.

Inhalers.
You usually take asthma medicine with an inhaler – a funny-looking tube that lets you breathe the medicine in through your mouth. Inhalers are useful because they get the medicine right to your airway.

Using a metered dose inhaler with a spacer
1. Shake the inhaler, remove the inhaler cap, and place the mouthpiece of the inhaler into the spacer.
2. Remove the cap from the spacer.
3. Hold the inhaler up with the mouthpiece at the bottom.
4. Tilt your head back slightly, and breathe out slowly and completely.
5. Place the spacer’s mouthpiece in your mouth.
6. Press down on the inhaler to spray one puff of medicine into the spacer.
7. Slowly take a deep breath.
8. Hold your breath for 10 seconds by counting slowly – one thousand one, one thousand two, and so on. If you need to take a second dose, wait 30 seconds to allow the inhaler to refill.

Peak flow
Peak expiratory flow is how fast you breathe out when you try your hardest. It tells you how well your lungs are working. You check peak flow with a peak flow meter, an easy-to-use gadget that you can use at home. You use your peak flow to set up your asthma zones.

Stay ahead of your asthma.
Know your peak flow.
Check it when you wake up and before you take any medicine. Also check your peak flow when you have symptoms and during an asthma attack, and again after you take your reliever medicine. This tells you how severe the attack is and how well the medicine worked. Your doctor can help you decide how often to check your peak flow.

Using a peak flow meter
1. Put the pointer on the peak flow meter to 0 or the lowest number on the meter. If you have any gum or food in your mouth, take it out.
2. If your meter has a mouthpiece, put it on the peak flow meter. (Some meters do not have a mouthpiece.)
3. While standing, take a deep breath.
4. Put the peak flow meter mouthpiece in your mouth, and close your lips tightly around it. Do not put your tongue inside the mouthpiece.
5. Breathe out as hard and as fast as you can for 1 or 2 seconds. Count one thousand one, one thousand two. When you breathe out, you should hear a “huff” sound.
6. Check the number on the gauge, and write it down. Repeat steps 1 through 6 two more times. After you have blown into the meter three times, take the highest number you received and write it in your asthma diary or on another record sheet.

If you cough or make a mistake during the testing, do the test over. Different brands of meters may give different values for results. If you change meters, you will need to find your asthma zones using the new meter.

If your best effort is in your red zone, take your reliever medicine right away, and call your doctor or go to the emergency room.

Make sure you have a 30-day supply of both your reliever and controller medicines!

Metered Dose Inhaler and Spacer
This is one example of a metered-dose inhaler and spacer. There are other types.

Peak flow meters
Most asthma attacks are not dangerous. You can usually take care of them at home with your reliever medicine.

Always carry your relievers with you!
Asthma zones

Your asthma zones are an easy way to keep you a step ahead of your asthma. They can tell you which medicines you need to use. They can even predict when things are going downhill and you may have an attack!

Finding your asthma zones.

Asthma zones tell you how well you are breathing. You find your asthma zones by measuring your peak flow over 2 to 3 weeks when your asthma is under control – when you feel good and have no symptoms. This is your personal best.

- Take your peak flow as soon as you get up in the morning and again in the afternoon.
- Measure your peak flow at these times for the next 2 to 3 weeks.
- Your personal best peak flow is the highest number you write down in this period of time.

Asthma symptoms vary. You may rarely have them, or you may have them often. They can be mild or severe. Common asthma symptoms are:

Wheezing. Wheezing is a whistling noise when you breathe. It happens because your airways are narrow. It can be loud, or you may hardly be able to hear it.

Coughing. The cough happens mostly at night. It is the only symptom for some people.

Shortness of breath. Which is fast, shallow breathing or when it is hard to breath.

Chest tightness.

Trouble sleeping.

Tiring quickly during exercise.

You can use the chart on the next page to track your peak flow.

Asthma zones are easy to remember – just think of a stoplight.

<table>
<thead>
<tr>
<th>Your zone is</th>
<th>If your peak flow is</th>
<th>Symptoms</th>
<th>Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Red</td>
<td>Less than 50% of personal best</td>
<td>Your symptoms are probably bad. It may be very hard to breathe. Wait until your PEF gets better before you try any activities.</td>
<td>Get help right away. Take your reliever medicine. Follow your action plan.</td>
</tr>
<tr>
<td>Yellow</td>
<td>50% to 79% of personal best</td>
<td>You may be coughing or wheezing. Your usual symptoms may be worse. You may not be able to do your usual activities. You may be short of breath.</td>
<td>You may need some reliever medicine. Follow your action plan.</td>
</tr>
<tr>
<td>Green</td>
<td>80% or more of personal best</td>
<td>You have no symptoms. You can do your usual activities.</td>
<td>Take your controller medicine.</td>
</tr>
</tbody>
</table>

You can use this chart to track your peak flow.

<table>
<thead>
<tr>
<th>Day</th>
<th>Week 1</th>
<th>Week 2</th>
<th>Week 3</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>A.M.</td>
<td>P.M.</td>
<td>A.M.</td>
</tr>
<tr>
<td>Sunday</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Monday</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tuesday</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Wednesday</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thursday</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Friday</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Saturday</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

With your personal best, you can find your asthma zones. Use the table below to figure your peak flow ranges for each zone.

<table>
<thead>
<tr>
<th>Zone</th>
<th>Personal best</th>
<th>Multiply by</th>
<th>Zone range</th>
</tr>
</thead>
<tbody>
<tr>
<td>(example) Green</td>
<td>400</td>
<td>0.8 (400 x .80 = 320)</td>
<td>320 and more</td>
</tr>
<tr>
<td>Red</td>
<td></td>
<td>0.5</td>
<td>Less than ______</td>
</tr>
<tr>
<td>Yellow</td>
<td>0.5 and 0.8</td>
<td></td>
<td>______ to ______</td>
</tr>
<tr>
<td>Green</td>
<td></td>
<td>0.8</td>
<td>______ and more</td>
</tr>
</tbody>
</table>
A big part of staying on top of asthma includes working with your doctor on a daily treatment plan and an asthma action plan.

Ready to make your plan?
We’ll help you.
A big part of staying on top of asthma is to work with your doctor on a daily treatment plan and an asthma action plan. The treatment plan tells you how to treat your asthma on a day-to-day basis, and the action plan helps you know what to do during an asthma attack.

Your asthma worksheets.
On the following pages are worksheets you can take to your doctor. You can then work together to create your plan and make your life your own.
These worksheets can help you get and keep control of your asthma. Talk about them with your doctor. You may want to make copies of some of them so that you can use them again.

Daily treatment plan
A daily treatment plan includes your personal goals and the medicines you use every day.

Asthma action plan
The action plan is based on your green, yellow, and red asthma zones.
Your doctor will help you fill out your asthma action plan. He or she may ask you to add information to it.

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An asthma action plan helps you manage asthma attacks. This helps you make quick decisions during an attack. Work with your doctor to complete the asthma plans on the following pages.
Write your asthma goals and ask your doctor to fill out the details about your medicines in the chart below. This will help you and your doctor develop the best plan to treat your asthma.

### My asthma goals are:

1. 
2. 
3. 

<table>
<thead>
<tr>
<th>MEDICINE NAME</th>
<th>WHEN TO USE</th>
<th>HOW MUCH TO USE</th>
<th>MOST YOU CAN USE IN A DAY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Controllers</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Relievers (for attacks only)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Other Medicines</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Medicines may interact with other medicines and have side effects. Talk to your doctor about possible interactions and side effects.

Make sure your red zone information is handy. Post this on your refrigerator, near your peak flow meter and medicines, and in your car. Make sure you can always find it easily.

### Red zone means DANGER! Seek immediate medical help.

My red zone is ____________. This is less than 50% of my personal best.

**Symptoms:**

My symptoms are very bad. I have severe shortness of breath. It is difficult to talk.

**Actions:**

- Take _____ puffs of my reliever medicine called _____________________.
  Repeat _____ times.
- Begin or increase treatment with oral steroids. Take _______ mg now.
- Call my doctor at ____________________________
- If I cannot contact my doctor, I need to go directly to the emergency room.
  The emergency room phone number is ________________
- Other numbers I might call are ____________________________________________
  ____________________________________________

### Yellow zone means CAUTION! You need to act.

My yellow zone is ____________. This is 50%-79% of my personal best.

**Symptoms:**

I have increased symptoms, such as coughing, wheezing, or chest tightness. My symptoms may wake me at night. I may need more reliever medicine before my symptoms improve.

**Actions:**

- Take _____ puffs of my reliever medicine called _______________________.
  Repeat _____ times.
- Take _____ puffs of my medicine called _____________________________.
  Take it _____ times a day.
- Begin or increase treatment with oral steroids:
  Take _____ mg of _______________________ every________________________.
- Call my doctor at ____________________________ if my symptoms don’t get better.

### Green zone means GO! You want to be in the green zone.

My green zone is ____________. This is 80% or more of my personal best.

**Symptoms:**

I have no symptoms. My breathing is good with no cough, wheezing, or chest tightness during work, school, exercise, or play. I can do my usual activities.

**Actions:**

- I will continue with the controller medicines listed in my daily plan.