

Asthma-Friendly Camps



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Asthma Stats and Facts

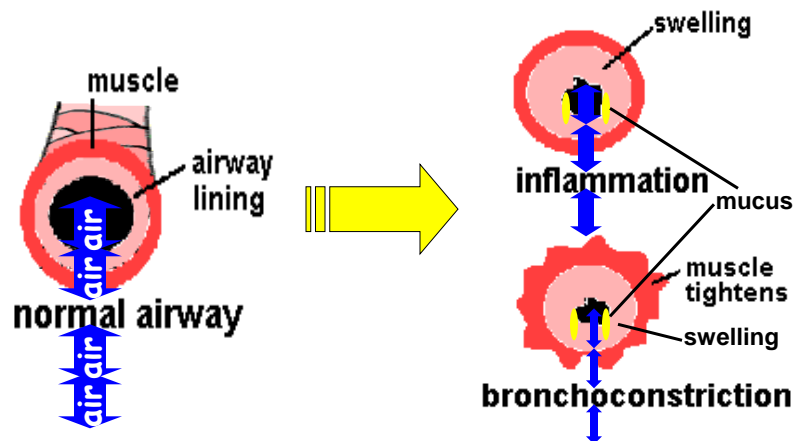
- Asthma affects over 2 million people in Ontario
- Asthma affects up to 1 in 5 children (approx. 570,000)
- Asthma is the leading cause of hospital admissions for children
- Asthma can be controlled
- Asthma can be fatal without proper management and access to medications

What is Asthma?

- Asthma is a chronic disease of the airways
- The muscles around the airways tighten up making it harder to get air in and out of the lungs
- The inside of the airways become red and swollen (inflammation)
- There may also be extra mucus (phlegm) that makes someone want to cough more
- This can make it harder to breathe

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Normal Airway and Airway with Asthma



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Symptoms of Asthma

- Cough
- Shortness of breath
- Chest tightness
- Wheezing
- Sputum (mucus) from the lungs



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Asthma Triggers at Camps

Dust and dust mites
 Pollen
 Indoor Moulds (cabins,
 mattresses)
 Outdoor Moulds (soil,
 leaves)
 Animals
 Campfire Smoke
 Food Allergens

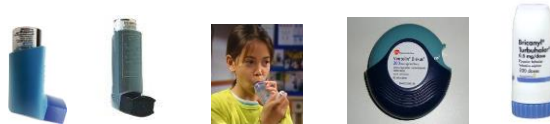
Air pollution
 Weather changes,
 humidity, cold air
 Exercise
 Building repairs
 Cold and flu viruses
 Strong odours
 (perfumes, cleaning
 products, scented
 markers)

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Asthma Medications

Rescue/Relievers inhalers are usually blue and provide quick relief for asthma symptoms. **Campers with asthma MUST have their reliever medication!!!**

- Usually only taken when needed or before exercise, for quick relief
- Campers should have easy access to their reliever inhaler when needed



Children need to be informed that inhalers are medicines and like other medicines, should not be shared

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Asthma Medications

Controllers (preventers)

- Usually taken every day and are very important for long-term asthma control
- Usually taken in the morning and at night



Children need to be informed that inhalers are medicines and like other medicines, should not be shared

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Ryan's Law (Ensuring Asthma Friendly Schools)

- Ontario's new legislation - May 2015
- Implemented by OLA in partnership with the Ministry of Education, school boards and OPHEA (Ontario Physical and Health Education Association)
- Requires Ontario school boards to develop and maintain consistent policies and procedures to protect kids with asthma
- Students with asthma allowed to carry reliever while at school, with the permission of a parent or guardian
- Individual asthma management plan on file with current medication, triggers, emergency contact
- www.ryanslaw.ca



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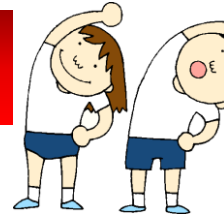
Recognizing Poor Asthma Control

If ANY of the following present, asthma is not under full control:

- using a reliever inhaler (usually blue) four or more times per week
- more tired than usual from nighttime coughing or other asthma symptoms
- having difficulty with activities/sports
- absent from day camp due to asthma
- Notify the parent/guardian if any of the above is observed

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Asthma and Exercise



Exercise is important for everyone.

Guidelines to follow:

- Warm up 10-15 minutes prior to exercising and cool down afterwards
- Some kids may need to use their inhaler 10-15 minutes prior to exercise
- Monitor outdoor conditions i.e. weather extremes, days with smog. The camper may need to exercise indoors or go outside at a different time of day when weather conditions are better: www.airhealth.ca (AQHI)

Asthma and Exercise

If a camper is having difficulty with asthma symptoms at the start of exercise:

- they may need to use their reliever inhaler and wait until their asthma symptoms lessen
- if they have asthma symptoms during exercise, they should use their reliever and stop exercise until they feel better

Advise parent/guardian if a camper is having trouble with exercise

What to do if a Camper is Having Symptoms

For:

- Coughing
- Shortness of breath
- Chest tightness or wheezing
- Make sure the camper uses their reliever inhaler immediately or administer it to the camper *
- Check for relief of symptoms and notify the parents/guardians
- Note: if symptoms get worse or do not improve within 10 minutes after reliever use – treat this as an emergency
- *If the camper doesn't have a reliever inhaler, call 911.

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Symptoms of an Asthma Attack

- Cough, wheeze, chest tightness
- Breathing is difficult and fast
- Cannot speak in full sentences
- Lips or nails are blue or gray
- Skin on neck is sucked in with each breath (common with very young children)
- Camper may also be anxious, confused and/or very tired

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What to do for an Asthma Attack

- Immediately use a fast acting reliever inhaler (usually blue)
- CALL 911 for an ambulance. If possible, stay with the person
- If symptoms continue, use the fast - acting reliever inhaler every 5 -15 minutes until medical help arrives



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What to do for an Asthma Attack

While waiting for medical help to arrive:

- Have camper sit up with arms resting on a table (do not have them lie down unless it is a life threatening anaphylactic reaction)
- Do not have the child breathe into a bag
- Stay calm, reassure the camper and stay by their side
- Notify parent/guardian or emergency contact

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Ontario Lung Association Resources and Infrastructure

Lung Health Information Line

- 1-888-344-LUNG (5864)
- Available Mon to Fri 8:30 to 4:30 p.m.
- Staffed by Certified Respiratory Educators
- We are health care professionals with additional training in respiratory health and smoking cessation

www.on.lung.ca

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Existing Resources and Infrastructure

- Free print resources & e-newsletters
- www.on.lung.ca/resources
- Available to all Ontarians including patients, caregivers and health care professionals
- Referrals to community resources
- Teacher/School/Camp staff training about asthma

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Asthma Resources

Asthma management plans for campers

What is your asthma control zone?
 Find out how well you are doing about the symptoms and how they affect you and your daily life.

Step 1	What to Look for	CONTROLLED ASTHMA	UNCONTROLLED ASTHMA	DANGEROUSLY UNCONTROLLED ASTHMA
Step 1	What to Look for	<ul style="list-style-type: none"> Daytime symptoms are infrequent (no more than 2 days a week) Nighttime symptoms are infrequent (no more than 2 times a month) Rescue inhaler use is infrequent (no more than 2 times a week) Normal activities are not limited Peak flow (if you have one) is in the green zone most of the time 	<ul style="list-style-type: none"> Daytime symptoms are frequent (more than 2 days a week) Nighttime symptoms are frequent (more than 2 times a month) Rescue inhaler use is frequent (more than 2 times a week) Normal activities are limited Peak flow (if you have one) is in the yellow or red zone most of the time 	<ul style="list-style-type: none"> Daytime symptoms are very frequent (more than 7 days a week) Nighttime symptoms are very frequent (more than 7 times a month) Rescue inhaler use is very frequent (more than 7 times a week) Normal activities are very limited Peak flow (if you have one) is in the red zone most of the time
Step 2	What to Look for	<ul style="list-style-type: none"> Daytime symptoms are infrequent (no more than 2 days a week) Nighttime symptoms are infrequent (no more than 2 times a month) Rescue inhaler use is infrequent (no more than 2 times a week) Normal activities are not limited Peak flow (if you have one) is in the green zone most of the time 	<ul style="list-style-type: none"> Daytime symptoms are frequent (more than 2 days a week) Nighttime symptoms are frequent (more than 2 times a month) Rescue inhaler use is frequent (more than 2 times a week) Normal activities are limited Peak flow (if you have one) is in the yellow or red zone most of the time 	<ul style="list-style-type: none"> Daytime symptoms are very frequent (more than 7 days a week) Nighttime symptoms are very frequent (more than 7 times a month) Rescue inhaler use is very frequent (more than 7 times a week) Normal activities are very limited Peak flow (if you have one) is in the red zone most of the time
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Notes: The above information is for general information only. It is not intended to be used as a substitute for professional medical advice. Always consult your doctor for more information.

CHILD ASTHMA MANAGEMENT PLAN
 (To be completed by a parent/guardian)

Page: _____ Date: _____

Child's Name: _____ Age: _____

Parent/Guardian Name: _____ Phone: _____

Address: _____

City: _____ Province: _____

KNOWN ASTHMA TRIGGERS
 Check all that apply: Cold/Flu Dust Pollen Pets Perfumes Strong odors Mold Exercise Stress Weather changes Sudden temperature changes

RESCUES
 Name: _____ Dose: _____

MANAGING ASTHMA ATTACKS

MILD ASTHMA ATTACK
 1. Stop all activities and rest.
 2. Take 2 puffs of your rescue inhaler.
 3. Wait 15 minutes.
 4. If symptoms do not improve, take another 2 puffs.
 5. If symptoms still do not improve, call your doctor or go to the hospital.

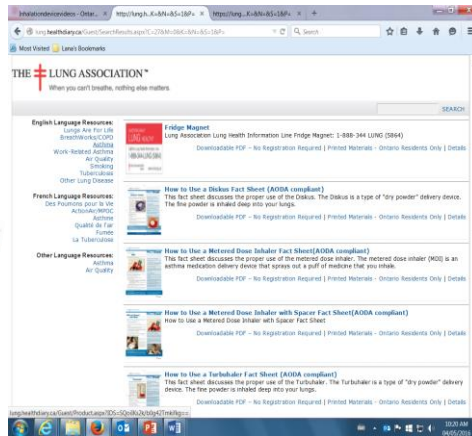
ASTHMA EMERGENCY
 1. Stop all activities and rest.
 2. Take 2 puffs of your rescue inhaler.
 3. Wait 15 minutes.
 4. If symptoms do not improve, take another 2 puffs.
 5. If symptoms still do not improve, call your doctor or go to the hospital.

THE LUNG ASSOCIATION™ Lung Health Information Line: 1-888-344-5884



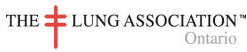
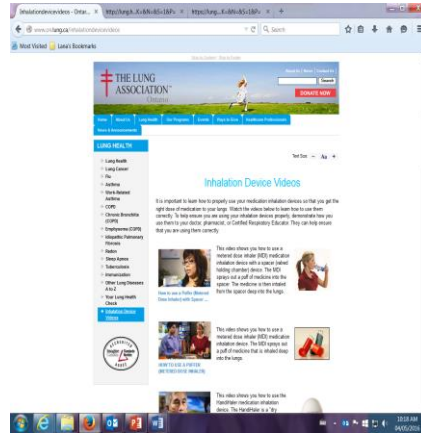
Inhaler Technique

www.on.lung.ca/resources



Inhaler technique

YouTube videos and instruction sheets on how to use inhaler devices: <http://www.on.lung.ca/inhalationdevicevideos>



Asthma Resources

Resources for teachers, schools and camps



Asthma Resources

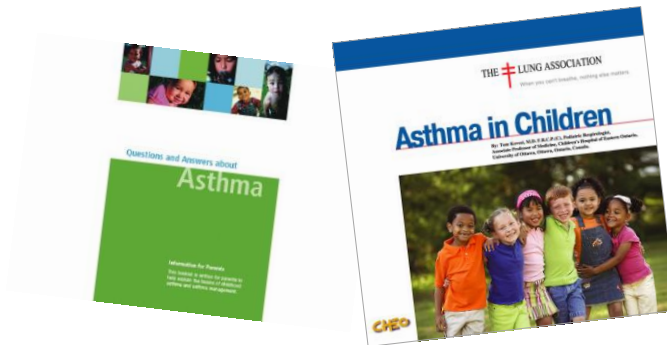
Resources for Children

- Activity booklets



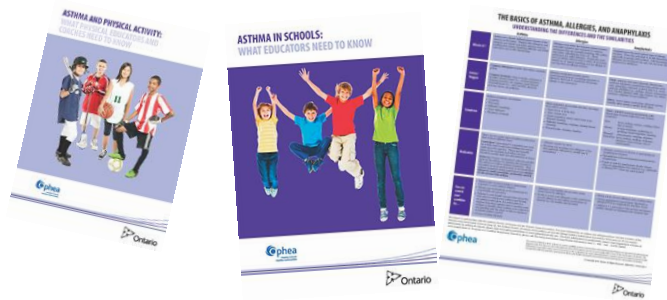
Asthma Resources

Resources for Parents



Asthma Resources

- The Ontario Lung Association and Ophea have been working together on asthma friendly schools



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Questions

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