

## Advice for carers of LD patients with asthma during Covid-19.

This guidance has been developed to be used alongside the government and NHS guidance around the Covid-19 pandemic. Its advice follows the advice published by Asthma UK and BTS.

Asthma is the most common respiratory illness in people affecting 1 in every 11 people worldwide. Asthma can range from a mild condition only needing inhaler use when unwell or exercising to severe and needing quite significant use of medication. Individual asthma reviews from the GP or medical professionals are important which usually take place annually at the GP surgery. Asthma can change in its nature and a person can become less controlled in symptoms as time goes on and also during illnesses.

From the current guidance nationally for Asthmatic patients, the advice available is to ensure that everyone's asthma is as optimised as possible as this will help to minimise the severity of illness if they are to become unwell with Covid-19.

### Is the person's asthma well managed?

Asthma can be optimised through the use of different medications, exercise and breathing exercises. To know if a patient's asthma is as well controlled as possible the asthma control test is used to help decide if medications need to be changed.

If you have people you look after who have asthma you should complete this test for them to decide if their asthma is well controlled or not, as this could help prevent them becoming very unwell with Covid-19.

1. In the past 4 weeks, how much of the time did your asthma keep you from getting as much done at work, school or at home?	All of the time	1	Most of the time	2	Some of the time	3	A little of the time	4	None of the time	5	SCORE	<input type="text"/>
2. During the past 4 weeks, how often have you had shortness of breath?	More than once a day	1	Once a day	2	3 to 6 times a week	3	Once or twice a week	4	Not at all	5		<input type="text"/>
3. During the past 4 weeks, how often did your asthma symptoms (wheezing, coughing, shortness of breath, chest tightness or pain) wake you up at night or earlier than usual in the morning?	4 or more nights a week	1	2 or 3 nights a week	2	Once a week	3	Once or twice	4	Not at all	5		<input type="text"/>
4. During the past 4 weeks, how often have you used your rescue inhaler or nebulizer medication (such as albuterol)?	3 or more times per day	1	1 or 2 times per day	2	2 or 3 times per week	3	Once a week or less	4	Not at all	5		<input type="text"/>
5. How would you rate your asthma control during the past 4 weeks?	Not controlled at all	1	Poorly controlled	2	Somewhat controlled	3	Well controlled	4	Completely controlled	5		<input type="text"/>

#### Add up a Total Score

- Less than 20 indicates poor asthma control - Will need to review your asthma with a health professional - This can be done on the phone with a GP practice
- 20-24 - Good control so no review needed unless they have asthma symptoms then you may need an asthma review
- 25 is an indication of excellent control.

## What can you do now to help people stay well with asthma

### - Check Inhaler Use

Asthma control is very dependent on taking the inhalers properly as they are the most common medication prescribed. To ensure people you look will be protected during covid-19 you could start

to make sure this is completed properly before a review is requested. Below is a description of the correct way of giving an inhaler but further training on this can be requested.

#### **Steps to using an inhaler correctly-**

**NEVER USE AN INHALER WITHOUT A SPACER MOST OF THE MEDICATION IS SWALLOWED NOT BREATHED IN SO DOESN'T WORK!!**

Step 1 - Ensure the inhaler has adequate medication inside to use. Some have a counter on the side but per inhaler it gives doses per inhaler. If in doubt use a new one.

Step 2 - Is the spacer working properly? - When someone breathes in and out you should hear a click. Some people have the incorrect spacer for them to use properly to get the medication. If the valve is not clicking the person isn't getting the medication. Speak to a pharmacist about trying another spacer.

Step 3 - Can the individual bite on the mouthpiece and bring their lips around the spacer? If they cannot do that they should use a spacer with a facemask instead.

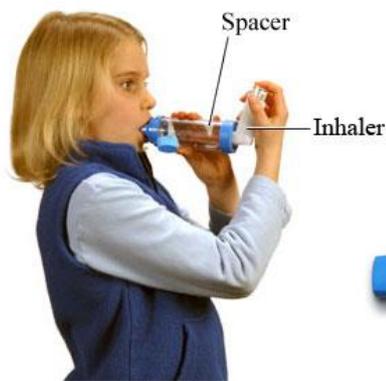
Step 4 - The person should be sitting or ideally standing to take the inhaler as this will mean bigger breaths taken to get the medication deeper into the lungs.

Step 5 - Shake the inhaler before each puff as the medication needs to mix with a propellant inside otherwise it won't work

Step 6 - Do a puff at a time with a shake between each puff.

Step 7 - When using a facemask the person needs to take big breaths, if possible for 30 seconds, with the facemask in place otherwise they aren't getting all the medication. If a person is biting and breathing into a spacer via a mouthpiece they need to take 5 big deep breaths per puff of inhaler to get all the medication.

Step 8 - Continue until the amount of puffs needed has been given. Wash the spacer out after use with warm soapy water but do not rinse off the soap. This means more medication doesn't stick to the spacer just goes to the patient. Put on kitchen roll to air dry until the next use.



This spacer is deemed easiest to use as you can tilt this one to 45 degrees. This opens the valve and that makes breathing in the medication less effort for patients. Change to this if they cannot make the other spacers click.

- **Ensure prevention medication is being taken properly**

Preventer medication are inhalers or medication taken to prevent asthma attacks from happening. These medications have to be taken regularly even if the person has no symptoms as otherwise they will not be working properly when they are needed. Some of the medications such as a brown or purple inhaler take 6 weeks to work properly. This means that if it's not consistently used it won't help the individual have good asthma control now. Using the medication protects people when they are unwell and means that illnesses maybe milder, so ensuring they do take this as prescribed will really help them at this time.

- **Know what to do if asthma worsens or unwell**

All asthmatics should have a written asthma plan to know how to escalate their care if they do become unwell. Please ensure all individuals you look after with asthma have an asthma plan. This would usually be given at an asthma review.

On an asthma care plan it should state the maximum amount of blue (Salbutamol) inhaler a person can have if having an asthma attack before going into hospital. There are different medications which can also be used in an emergency which would be included in a plan, as well as the preventer medication they take.

If an individual doesn't have an asthma plan the standard advice given, and to stick to, is that an individual can have 5 puffs of their blue rescue inhaler via a spacer up to every 4 hours and if this works they can stay at home. If this does not work then they will need to go to hospital. While waiting for an ambulance further puffs of the inhaler can be given until the ambulance arrives. When an ambulance arrives they will give a nebuliser and this is significantly higher dose wise than the inhaler so you cannot overdose an individual yourself. Just tell the ambulance crew how many puffs they have had and reassure the individual they might feel a bit shakey.

- **Start individuals on hayfever medication now so its working before potential illness**

A lot of asthmatics also have hayfever and take antihistamines during summer every year. If the people you are looking after haven't started their hayfever medication yet then it should be started as this will prevent hayfever potentially making illnesses harder to deal with. If you suspect a person with asthma has hayfever speak to their GP about starting medication.

## When unwell

If anyone has covid-19 symptoms then you **MUST** follow the Public Health England and NHS advice and contact 111 to escalate care needs further

If anyone is unwell for another reason then your GP would be your first contact point. They may call and discuss the issue over the phone first before visiting.

**If someone is unwell and in the home to recover some of the below measures may help recovery:-**

- Keeping the person hydrated
- Maintaining nutrition as possible
- Complete gentle exercise if able
- Following their asthma care plans or advice above to ensure they remain well

**Some signs someone is becoming critically unwell and may need hospital care:-**

- Breathing faster and more deeply than normal for longer than 30 mins
- Looking tired and sleeping more
- Colour of lips are pale/blue in colour
- If they can normally speak but now cannot due to being out of breath
- Whistling sound from chest
- Coughing a lot and unable to get a breath and struggling to recover from this
- Breathing looks a lot of effort to complete and their stomach or neck are sucking in because of their breathing



**If someone is critically unwell and needs to go to hospital then calling 999 and making it clear if covid-19 is suspected is helpful for ambulance staff to be able to care for the individual as well as possible.**

For ongoing advice and video's of inhaler technique please see Asthma UK website-

<https://www.asthma.org.uk>