

Only **64%** of pre-school workers say that they are confident in helping a child use an inhaler

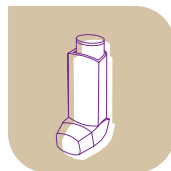
Advice on giving medicines

When you have a child with asthma in your care, one of the things you need to consider is: if I am expected to administer medicines to a child to relieve their asthma symptoms how do I do it?

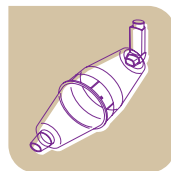
There are several types of treatment available to help control a child's asthma – see pages 16–25 of the booklet *Asthma in the Under Fives**, which is enclosed in this pack. In a pre-school group, the treatment that you are most likely to have to help a child with is their reliever (blue) inhaler through a spacer. This can be given to a child who is experiencing asthma symptoms, such as wheezing, coughing, shortness of breath or tightness in the chest.

Top tips for inhalers

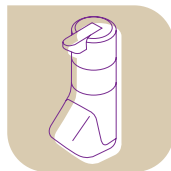
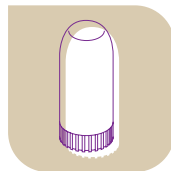
An aerosol inhaler and spacer are usually used to give asthma medicines to children under five; most children under three will also need to use a face mask.



Aerosol inhaler



Inhaler and spacer



Other types of inhalers

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Is it the right inhaler?

It is important to make sure that children have the right coordination to use their inhaler device correctly. Young children find it hard to distinguish between the terms 'suck' and 'blow', so their doctor or nurse should make a full assessment of their breathing ability to make sure that they can use their inhaler properly.

Inhalers for babies

You will probably need to use a face mask for children under two or three, or for those unable to use a mouthpiece. Place the mask over the child's nose and mouth using gentle pressure, so it seals around the nose and mouth. Then tilt the spacer to 45°, with the



inhaler uppermost. This ensures that the valve behind the mouthpiece drops open so that the medicine will be taken into the airways using normal breaths.

More of the medicine will reach the airways if the child is relaxed and quiet than if they are upset and crying. You need to hold the spacer and mask in place for about 20 seconds after each individual puff. If you are giving several puffs of medicine, make sure that you give them one at a time and shake the inhaler after each puff.

From two years

Between two and three years of age, most children can use a spacer and inhaler without a face mask. Whereas adults can usually take one big deep breath in through their spacer, young children cannot take a large enough breath to clear all the medicine in one go. Instead, get the child to take five or six normal breaths in and out of the spacer. This is called tidal breathing. You can turn it into a counting game and count the breaths while the child breathes normally.

Do not be tempted to try and get the child to use the aerosol inhaler straight into their mouth. Many adults struggle with the coordination needed to use an aerosol properly and the child will end up with a mouthful of medicine that does not reach anywhere near their airways.

Over five years old

It may be possible for children approaching school age to use smaller, more portable dry powder devices for their reliever treatment, which are easier to use effectively than aerosol inhalers. Their doctor or nurse will reassess the child and show him or her and the parents or carers a range of the most suitable devices and ensure that both understand how they work.

Distraction techniques

Adults are great at using distraction techniques to encourage children to do all sorts of things that they would rather not, from eating vegetables to brushing their hair. So taking inhaled medicine should be no exception. For example, you could sing a nursery rhyme, turn it into a counting game or turn the spacer into a toy and decorate it with stickers. Children also respond well to age-appropriate analogies such as describing their inhaler as a thick milkshake that needs a huge suck to get it up the straw.

Smile

From an early age children are sensitive to adults' moods and soon learn when they are upset. If you can adopt a positive attitude – smile and be encouraging – when helping a child to use their inhaler it will make all the difference.

Giving treatment to some younger children can be a struggle, especially if they are feeling frightened by their asthma symptoms. You might like to try sitting the child on the floor between your legs giving you two hands to hold both inhaler and child, but remember this is not a wrestling match.

Building your confidence with inhaler devices will take some time. If it is any consolation, every doctor and nurse in the country will admit to having struggled with a difficult child at some time, so do not feel like you are a failure. Just remember to be positive.

For more information and support contact the Asthma UK Adviceline and speak to an asthma nurse specialist – 08457 01 02 03

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