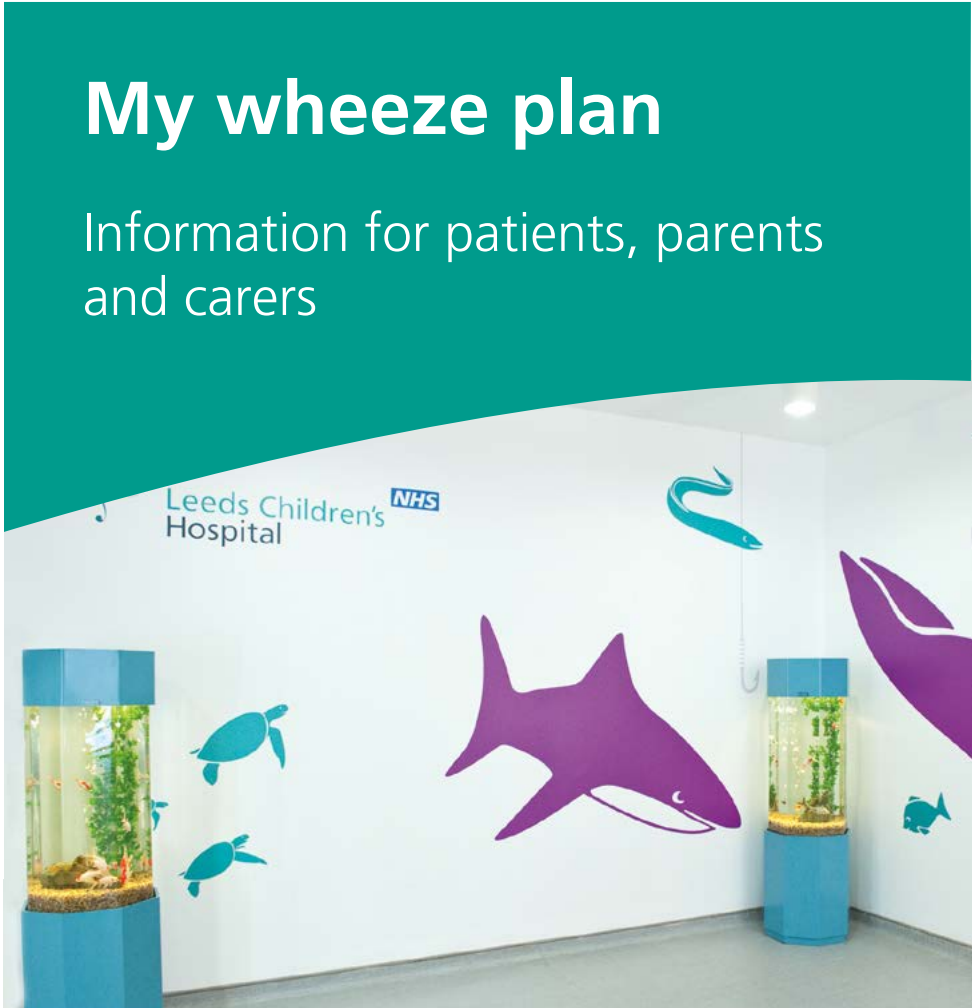


# My wheeze plan

Information for patients, parents  
and carers



leeds children's  
hospital

caring about children

Name: .....

Your child has had an episode of wheeze. This is very common in younger children and many children grow out of it as they get older.

### What is wheeze?

Wheeze is the whistling noise that air makes when it is trapped inside the breathing tubes of the lungs. In many young children you can hear a "ruttly" noise, this is the mucus that they are not able to cough away. Lots of people find it difficult to know the difference between this noise and wheeze.

### Why do they wheeze?

Young children have very small breathing tubes in their lungs. When they catch a virus, or something irritates the tubes, they become tighter and leave a smaller airway through which to breathe. The tubes may also become swollen inside and produce mucus. The tightening of the tubes makes it hard for the young child to breathe out, they may also cough to try to get rid of the mucus.

### Which children wheeze?

Any child may have episodes of wheeze. The most common cause is when children get a cold, or virus. Following an infection called bronchiolitis, caused by a virus, episodes of wheeze are more likely for many months. Children in contact with cigarette smoke are more likely to wheeze.

### Can I stop it happening?

You should keep your child away from cigarette smoke. You cannot stop them getting a virus, and it is not a good idea to try to keep him /her away from other children.

### Does it mean my child will have asthma?

Many children have wheezy episodes in the first few years of life, but do not go on to have asthma. However, some young children who wheeze do develop asthma when they get older.

### What do I do when my child becomes wheezy?

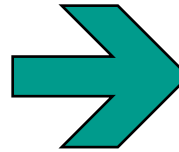
You may have been given a reliever inhaler for your child. This will work by opening up the tight breathing tubes. You can give it to your child when he/ she has wheeze, or starts with a cold. It should work within a few minutes.

You do not need to give it to your child when well.





- I am well
- I have no cough/wheeze
- I am doing normal activities



If prescribed I need to take my preventer medicines every day (even if I am well)

**Preventer inhaler** is .....( ..... microgram)

**Colour** is .....

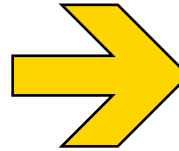
I take ..... **puffs** in a **morning** and ..... **puffs** at **night**

Other medicines I take every day are .....

.....  
.....



- I am getting a cold
- I am feeling unwell
- I am coughing or wheezing

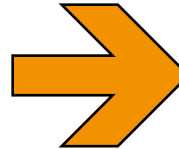


My **reliever** inhaler is **Salbutamol** 100 micrograms per puff. The colour is **blue**

I need to take **2 puffs** of my **blue** metered dose **reliever** inhaler every **4 hours**, via my **spacer**



- My coughing / wheezing is getting worse
- I feel short of breath
- My chest feels tight



I need to take up to **6 puffs** of my **blue reliever** inhaler every **4 hours** and **contact my GP today**



- I am too breathless to eat or talk
- I am breathing very hard and fast
- I am coughing or wheezing a lot
- My reliever inhaler is not lasting 4 hours



I need to take **10 puffs** of my **blue** reliever inhaler

If I do not feel any better I need to call **999** straight away and then take another **10 puffs** of my **blue reliever** inhaler every **15 minutes** whilst waiting for the ambulance

If I do **feel better** and my **blue reliever inhaler lasts 4 hours** I need to see my GP today. I need to continue taking up to **10 puffs** of my **blue reliever** inhaler every **4 hours** until I see my **GP today**. If my GP **cannot** see me **today** I need to **call 111**

## On discharge from hospital

### Weaning plan for Salbutamol

**Day 1** take 6 puffs every 4 hours

**Day 2** take 4 puffs every 4 hours

**Day 3** take 2 puffs as required

Always use my Metered Dose Inhaler with my spacer

- It is very important your child uses the spacer device you have been given for them or the inhaled medicine will not reach your child's lungs.
- Ensure you know how and why the inhalers should be used.
- Ensure there is access to a reliever inhaler and spacer at all times for your child, including nursery/ school.
- If you have difficulties giving the treatment ask for help from your practice nurse or the hospital asthma nurse

## Care of the spacer

- Take apart the spacer
- Place the spacer in luke warm soapy water, with a mild detergent, gently agitate then leave to soak for 15 minutes.
- Shake out excess water and leave to air dry.

## How to use a spacer

Shake the inhaler well and remove the cap

1. Put the inhaler in the end of the spacer
2. Put the mouthpiece of the spacer between your child's lips and teeth, or place the mask firmly over their nose and mouth, ensuring a good seal
3. Press the inhaler down once
4. Ensure 5 normal breaths are taken in and out
5. Remove the device from your child's mouth or face
6. Repeat the process, if required
7. For each puff shake before each dose and leave at least 30 seconds between each dose.



## Notes

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Follow up: .....

.....

Signature: .....

*(doctor/non-medical prescriber/specialist nurse)*

Date: .....

## Contact Numbers

**Leeds General Infirmary Hospital**  
Main Switch board - 0113 243 2799

NHS Direct - 111

**Websites:**

[www.asthma.org.uk](http://www.asthma.org.uk)   [www.allergyuk.org](http://www.allergyuk.org)

All children with asthma **MUST** live in a smoke free environment

