



## USING A SPACER

If you use a metered dose inhaler (MDI), a spacer will help get the correct dose of medication into your lungs. Ask your doctor about a spacer. If you don't already have one, you need one. Spacers increase your medication's effectiveness by up to 50%.

- 1 Shake the inhaler well (holding it upright).
- 2 Fit the inhaler into the opening at the end of the spacer.
- 3 Seal lips firmly around the mouth piece.
  - press the inhaler once only
- 4 Take 1–6 slow breaths in and out through your mouth. Do not remove the spacer from your mouth between breaths.
  - remove the spacer from your mouth
- 5 Repeat steps 1–4 for further doses.



## Washing your spacer

Wash your spacer once a week with warm water and dishwashing liquid. **DO NOT RINSE. DRIP DRY** to ensure that your medicine gets into your lungs and doesn't stick to the sides of the spacer.

## CLEANING YOUR MDI

All MDIs (Metered Dose Inhalers) need to be washed weekly. Here is how to wash and dry an MDI.

- 1 Remove the plastic mouth-piece cap.
- 2 Remove the metal canister (don't put it in water).
- 3 Rinse the mouthpiece and cap under warm water for at least 30 seconds.
- 4 Shake off any excess water and dry the mouthpiece and cap thoroughly.
- 5 Put the metal canister back in, and replace cap.



Check the manufacturers' instructions for any special instructions for your type of inhaler.

## USING YOUR TURBUHALER

- 1 Unscrew and remove the protective cover.
- 2 Hold the Turbuhaler upright.
- 3 Twist the coloured grip as far as it will go in one direction and then back again until you hear a click
  - Your Turbuhaler is now loaded with a dose of medication. Breathe out gently.
- 4 Place the mouthpiece between your lips.
  - Suck in deeply and forcefully through the Turbuhaler. You may not taste or feel the medication.
  - Remove the inhaler from your mouth and breathe out. Do not breathe back into the mouthpiece as you will make it damp inside.
  - If more than one dose is required, repeat the steps above.
  - When you are finished, place the cover back on the inhaler and twist shut.
- 5 Your Turbuhaler has a dose indicator window just below the mouthpiece. When you see red in the window it is time to get a new Turbuhaler.



## Caring for your Turbuhaler

- Do not wash your Turbuhaler as it will not work properly if it gets wet.
- Wipe the mouthpiece with a dry tissue or cloth.

Produced by the Asthma Foundation

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Helping New Zealanders breathe easier

Please call 0900 4 ASTHMA (0900 4 278 462) to make an automatic \$20 donation

All donations are appreciated

The Asthma Foundation is New Zealand's not for profit sector authority on asthma and other respiratory illnesses.

We advocate to government, fund research for better treatments and educate on best practice.

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# ASTHMA SELF MANAGEMENT PLAN

This Asthma Self Management Plan belongs to:

See your doctor for an  
influenza vaccination every March



**the asthma foundation**  
Better respiratory health for New Zealanders

# YOUR ASTHMA SELF MANAGEMENT PLAN

## ASTHMA SYMPTOMS

## YOUR MEDICATION IS CRUCIAL

FEELING GREAT

### Your asthma is under control when

- you don't have asthma symptoms most days (wheeze, tight chest, breathlessness, or a cough)
- you don't wake up at night with asthma symptoms
- you can continue with all your usual activities
- you can use a reliever **less than** 3 times per week

your peak flow reading is above

Preventer	puffs	morning and night every day
Symptom controller	puffs	morning and night every day
Reliever	puffs	as needed
Exercise management	puffs	5 – 10 minutes before exercise
Emergency Reliever		

### Medication alert

- if you regularly need to take more than 6 puffs of reliever every day, see your doctor as there is a risk of harmful side effects
- if you regularly take more than 3 doses of reliever a week you should be taking regular preventer medication

GETTING WORSE

### Caution - your asthma is getting worse when

- you are waking at night with asthma symptoms; or
- you are very breathless or wheezy; or
- exercise or daily activities are becoming difficult because of asthma symptoms; or
- you are using more reliever than usual; or
- your reliever lasts a much shorter time

your peak flow reading is below

### Let's keep calm, but get prepared...

- continue with your regular medication
- take your reliever as required (up to a maximum of 12 puffs in 24 hours)

- if you have been prescribed prednisone begin as follows:

prednisone	mg	for	days
and then		for	days

### Medication alert

- if you are not improving within 1 hour of taking your reliever or your symptoms worsen, move to the emergency zone
- if you need to take more than 12 puffs of reliever in 24 hours, see your doctor **today**; or
- if you have no prednisone **see your doctor or pharmacist\* today**
- if you are no better after 1-2 days of commencing prednisone, see your doctor
- if you require 2 or more courses of prednisone see your doctor

EMERGENCY

### Emergency

- you have severe breathlessness; or
- you are finding it hard to speak; or
- you feel faint or are frightened; or
- your reliever is not working

your peak flow reading is below

- dial 111 for an ambulance and explain you are having severe asthma
- sit upright and relax your shoulders
- take 6 puffs of your emergency reliever every 6 minutes until your symptoms are relieved or the ambulance arrives
- use a spacer with your metered dose inhaler if available

**Remember: 1 puff at a time into your spacer and 6 slow breaths in and out**

Best peak flow: \_\_\_\_\_

Plan prepared by: \_\_\_\_\_

Date prepared: \_\_\_\_\_

Review date: \_\_\_\_\_

GP: \_\_\_\_\_

Doctor's /Nurse's signature: \_\_\_\_\_