

What should I do now?

- Get a written asthma action plan from your doctor.
- Tell your obstetrician and midwife that you have asthma and discuss your written asthma action plan with them.
- Keep taking your preventer medication.
- Always carry your reliever medication with you.
- Have regular asthma check-ups during your pregnancy (every 4-6 weeks).
- Tell your doctor, obstetrician or midwife if your asthma symptoms are changing.
- Avoid exposure to tobacco smoke.

Do you?

- Ever wake up at night coughing, wheezing or breathless?
- Become short of breath with normal activity?
- Use your reliever puffer more than two days a week?

If you answered YES to any of these questions, it may indicate that your asthma is not under good control. See your doctor.

**Remember:
if you can't breathe,
neither can your baby.**

Asthma First Aid

1 Sit the person upright

- Be calm and reassuring
- Do not leave them alone



2 Give 4 separate puffs of blue/grey reliever puffer

- Shake puffer
- Put **1 puff** into spacer
- Take **4 breaths** from spacer



Repeat until **4 puffs** have been taken

Remember: Shake, 1 puff, 4 breaths

OR give 2 separate doses of a Bricanyl inhaler (age 6 & over) or a Symbicort inhaler (over 12)

3 Wait 4 minutes

- If there is no improvement, give **4 more separate puffs of blue/grey reliever** as above



OR give 1 more dose of Bricanyl or Symbicort inhaler

4 If there is still no improvement call emergency assistance Dial Triple Zero

- Say 'ambulance' and that someone is having an asthma attack
- Keep giving **4 separate puffs** every **4 minutes** until emergency assistance arrives



OR give 1 dose of a Bricanyl or Symbicort every 4 minutes - up to 3 more doses of Symbicort

Call emergency assistance immediately - Dial Triple Zero (000)

- If the person is not breathing
 - If the person's asthma suddenly becomes worse or is not improving
 - If the person is having an asthma attack and a reliever is not available
 - If you are not sure if it's asthma
 - If the person is known to have Anaphylaxis - follow their Anaphylaxis Action Plan, then give Asthma First Aid
- Blue/grey reliever medication is unlikely to harm, even if the person does not have asthma**

 **Asthma Australia**

Contact your local Asthma Foundation
1800 ASTHMA Helpline (1800 278 462)
asthmaaustralia.org.au

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Asthma & Pregnancy



This brochure, developed by Asthma Australia, provides basic information about managing asthma while you are pregnant.

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All Asthma Australia information is endorsed by our Medical and Scientific Advisory Committee and is referenced to peak health bodies.

Asthma Australia information does not replace professional medical advice. People should ask their doctor any questions about diagnosis and treatment.

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Pregnant or planning a pregnancy?

Looking after your asthma is more important than ever. You will be breathing for yourself and your baby.

Having good control of your asthma when you are planning a pregnancy and during pregnancy will provide the best protection for you and your baby.

Understanding your level of asthma symptom control

Think about your asthma over the last 4 weeks and look at the chart below to see if your asthma control is good, partial, or poor.

| Good control | Partial control | Poor control |
|---|---|---|
| All of: | One or two of: | Three or more of: |
| Able to do all your usual activities | Less able to do your usual activities | Less able to do your usual activities |
| No asthma symptoms during night or on waking | Any asthma symptoms during night or on waking | Any asthma symptoms during night or on waking |
| Daytime symptoms no more than 2 days per week | Daytime symptoms more than 2 days per week | Daytime symptoms more than 2 days per week |
| Need reliever no more than 2 days per week* | Need reliever more than 2 days per week* | Need reliever more than 2 days per week* |

(*Not including reliever puffer taken before exercise.)

Planning a pregnancy?

If you are planning a pregnancy, see your doctor to discuss your asthma, before you become pregnant.

It is important to achieve good asthma control before you become pregnant and to maintain it during pregnancy. Asthma that is poorly controlled or untreated increases the chances of complications during pregnancy.

Your doctor will check that you are on the best medications for your asthma and for pregnancy. They will also discuss any other medications or complementary therapies you are taking and any vaccinations that are recommended (e.g. influenza).

If you want to try any changes to your asthma medications, this is best done before you become pregnant, or after the delivery.

Be sure to ask your doctor for a written asthma action plan, or, if you already have one, ask your doctor to review it with you.

If you smoke, now is the best time to quit.

Being a non-smoker increases your chance of becoming pregnant and reduces your risks of complications during pregnancy. For help, speak to your doctor or call the Quitline on 13 78 48.



I am pregnant – what do I do about my asthma?

1 in 9 people in Australia have asthma. During pregnancy, some women will have an increase in asthma symptoms.

The key to staying well with asthma during pregnancy is having frequent check-ups about your asthma, knowing how to respond if you have an asthma flare-up, and, for most pregnant women with asthma, taking a preventer every day.

Your level of asthma symptom control can change during your pregnancy. Make sure you are well prepared.

- Keep taking your asthma medications, including your daily preventer
- Have regular asthma check-ups with your doctor - every 4-6 weeks during your pregnancy
- Ask your doctor for a written asthma action plan or, if you already have one, ask your doctor to review it with you
- Discuss your written asthma action plan with your obstetrician and midwife
- Tell your doctor, obstetrician or midwife about any changes in your asthma symptoms

Will my asthma become worse during pregnancy?

There is a chance it could. At least one in three women in Australia with asthma will find it becomes worse during pregnancy.

The risk of a serious asthma flare-up is higher if you stop taking your asthma medications.

If your asthma becomes worse, follow your written asthma action plan and see your doctor.

Will asthma medications harm my baby?

Most asthma medications are safe and should be continued during pregnancy. Taking prescribed medications for asthma is safer for you and your baby than having poorly-controlled asthma.

If you stop taking your medications there is a far greater risk of harm to your baby as it increases your chance of a serious asthma flare-up.

Can I just put up with asthma symptoms while I'm pregnant?

No — this is unsafe and not recommended.

Untreated or poorly controlled asthma or having asthma flare-ups increases the risk of pregnancy complications such as low birth weight, pre-term birth or your baby may suffer from a reduced oxygen supply.

What happens if I have an asthma flare-up or attack?

An asthma flare-up can come on suddenly, or slowly over days to weeks. Your written asthma action plan will show you what to do if your asthma is becoming worse. Make sure to also see your doctor and let them know your asthma has changed.

An asthma flare-up can be sudden or severe (often called an **asthma attack**). An asthma attack is managed the same way during pregnancy as at other times.

If you are having an asthma attack or your asthma is worsening, follow the Asthma Emergency section of your written asthma action plan or start Asthma First Aid and call an ambulance.

Seek help early. Do not wait until your asthma is severe to start Asthma First Aid.

Remember to tell ambulance and emergency staff that you are pregnant.

Hayfever and allergy control?

If hayfever or other allergies trigger your asthma symptoms, you may be able to treat this with medications. Speak to your doctor or midwife before buying or taking allergy medications.

Need help to quit smoking?

Smoking is harmful to your unborn baby, and increases the chance your baby will develop asthma or other health problems. It can also make your own asthma worse. There has never been a more important time to quit. For help, speak to your doctor or call the Quitline on 13 78 48, for specific advice about quitting and pregnancy.