**PPG Newsletter- September 2019**

**Asthma – a tale of two inhalers!**

Asthma is a common lung condition that causes breathing difficulties.

It affects people of all ages and often starts in childhood, although it can also develop for the first time in adults. In the UK, 5.4 million people are currently receiving treatment for asthma. One million of these are children.

NHS England says every asthma patient should be supported to manage their condition and offered regular reviews.

Asthma is caused by swelling (inflammation) of the breathing tubes that carry air in and out of the lungs. This makes the tubes highly sensitive, so they temporarily narrow.

It may occur randomly or after exposure to a trigger influence.

There's currently no cure, but there are treatments that can help keep the symptoms under control to minimise impact on your life.

Symptoms of asthma

The main symptoms of asthma are:

• a whistling sound when breathing (wheezing)

• breathlessness

• a tight chest, which may feel like a band is tightening around it

• coughing

The symptoms can sometimes get temporarily worse. This is known as an asthma attack.

Treatments for asthma

Asthma is usually treated by using an inhaler, a small device that lets you breathe in medicines.

The main types are:

• reliever inhalers – used when needed to quickly relieve asthma symptoms for a short time

• preventer inhalers – used every day to prevent asthma symptoms occurring

If using reliever and preventer inhalers do not control your asthma, you may need an inhaler that combines both.

Some people also need to take tablets.

Reliever inhalers

Most people with asthma will be given a reliever inhaler. These are usually blue.

A reliever inhaler is used to treat symptoms when they occur. They should relieve symptoms within a few minutes.

Tell your GP or asthma nurse if you have to use reliever inhaler 3 or more times a week. They may suggest additional treatment, such as a preventer inhaler.

Preventer inhalers

If you need to use a reliever inhaler often, you may also need a preventer inhaler.

A preventer inhaler is used every day to reduce the inflammation and sensitivity of the airways, which stops the asthma symptoms occurring. It's important to use a preventer inhaler even when there are no symptoms.

Preventer inhalers contain steroid medicine.

Speak to your GP or asthma nurse if you continue to have symptoms while using a preventer inhaler.

Preventer inhalers do not usually have side effects, but can sometimes cause:

• a fungal infection of the mouth or throat (oral thrush)

• a hoarse voice

• a sore throat

You can help prevent these side effects by using a spacer, which is a hollow plastic tube you attach to your inhaler, as well as rinsing your mouth or cleaning your teeth after using the inhaler.

Combination inhalers

If using reliever and preventer inhalers do not control your asthma, you may need an inhaler that combines both.

Combination inhalers are used every day to help stop symptoms occurring and provide long-lasting relief if they do occur. It's important to use combination inhalers regularly, even if you do not have symptoms.

Tablets

You may also need to take tablets if using an inhaler alone is not helping control your symptoms.

Leukotriene receptor antagonists (LTRAs)

LTRAs are the main tablets used in asthma treatment. LTRAs also come in syrup and powder form. You take them every day to help stop your symptoms occurring.

Theophylline

Theophylline may also be recommended if other treatments are not helping to control your symptoms. These are also taken every day to stop your symptoms occurring.

Steroid tablets

Steroid tablets may be recommended if other treatments are not helping to control your symptoms.

They can be taken either:

• as an immediate treatment when you have an asthma attack; or

• every day as a long-term treatment to prevent symptoms – this is usually only necessary if you have very severe asthma and inhalers do not control your symptoms.

Long-term or frequent use of steroid tablets can occasionally cause side effects such as:

• increased appetite, leading to weight gain

• easy bruising

• mood changes

• fragile bones (osteoporosis)

• high blood pressure

You'll be monitored regularly while taking steroid tablets to check for signs of any problems.

Complications

Although asthma can normally be kept under control, it's still a serious condition that can cause a number of problems.

Millions of asthma patients in the UK are not getting basic care they need to manage their condition, says Asthma UK, a charity, which carries out an annual survey.

Asthma UK questioned more than 4,500 patients, say two-thirds of asthma sufferers miss out on yearly check-ups, tailored advice and lessons in how to use their asthma inhalers.

Their latest annual asthma care survey suggests:

* Eight in every 10 people with asthma do not have their condition under control
* Almost half of the respondents said their asthma symptoms got in the way of day-to-day life
* Although most said the care they received was either satisfactory or excellent, few received a full package of the most basic care

Asthma UK says it is not just medical staff who need to do more, people with asthma must take responsibility for their own care too.

NHS England also endorse this line "Whilst we recognise the important issues in this annual survey, we also expect patients to take shared responsibility for managing aspects of this long term condition.

"It is important that patients consult with their GP where necessary and know how to use their medication properly.

"In future, digital solutions may improve dialogue with health professionals and ensure the widespread development of personal asthma action plans to help avoid unnecessary and costly hospital visits for treatment."

So it’s important to follow your treatment plan and keep an eye on symptoms, if they're getting worse.

Do you have an Asthma Plan?

Your asthma action plan should tell you everything you need to know about looking after your asthma in one place. Your personalised asthma action plan has all the information and tips you need to stay well. Based on your asthma history, it tells you:

• which medicines to take each day

• how to spot if your asthma’s getting worse – and what to do

• what an asthma attack is and what to do if you have one.

Research shows using one means you’re four times less likely to need a hospital stay for your asthma. And with fewer asthma symptoms you’ll be less likely to need time off work or school.

When you attend the surgery for your annual asthma check-up the nurse will go through your personalised asthma plan with you.

**Friends and Family Test Results**

The data below shows how likely our patients are to recommend our practice to friends and family. If you wish to fill out a Friends and Family Test Questionnaire a form can be obtained from reception.

June 2019 July 2019 August 2019

Extremely likely 37 28 37

Likely 11 18 10

Neither likely nor unlikely 1 2 1

Unlikely 0 0 0

Extremely Unlikely 0 1 1

Don’t know 0 1 0

**DNA Data**

The data below shows how many appointments were wasted due to patients not attending. If you’re unable to attend your appointment please let the surgery know so we can offer the appointment to someone else.

June 2019: 6hrs 25m (39 appointments)

July 2019: 8hrs 15m (50 appointments)

August 2019: 8hrs 40m (52 appointments)

**Orchard Family Practice PPG**

**September 2019**