

North Road Medical

Caring medicine to the whole family

THUNDERSTORM ASTHMA

On Monday 21st November 2016, Melbourne experienced a freak thunderstorm asthma event. It saw 8,500 people attending emergency departments within Melbourne. Unfortunately 8 people have died following the event with one person remains in critical condition in intensive care.

ASTHMA AND THUNDERSTORMS

Thunderstorms cause the rapid increase in the number of pollens, mould and dust in the air, and also changes in humidity and temperatures. The change from the hot wind where there is an increased pollen load in the air to an incoming storm front which adds lots of moisture to the air, will see the pollen absorb the moisture and burst. This releases thousands of tiny allergen particles which are then easily inhaled by people. Breathing this in can irritate the lining of the airway causing swelling and extra mucus to be produced. This then causes the airway to narrow and triggers an asthma flare up. These flare ups may become severe very quickly.

YOU DO NOT HAVE TO BE A KNOWN ASTHMATIC OR ALLERGIC TO POLLENS OR GRASSES TO EXPERIENCE THUNDERSTORM ASTHMA

During severe storms, some people who have never been diagnosed with asthma experience breathing difficulties. Those with a history of asthma, allergies or hay fever (allergic rhinitis) are at an INCREASED risk. The risk appears to be greatest during the grass flowering season, which is typically October to mid December.

WHAT TO DO IF A THUNDERSTORM IS FORECAST

- Always carry your blue reliever with you (Ventolin, Asmol, Bricanyl or Airomir)
- If taking Symbicort - follow your SMART plan provided by your GP
- This is your emergency asthma first aid medication
- This will provide relief from asthma symptoms within minutes by relaxing the muscles around the airways

Directors

Dr Patrick Casey
Dr Noelene Jacka
Dr Daniel Mann Segal

Doctors

Dr Lynette Hatherley
Dr Yulya Gorovy
Dr Millie Leykin
Dr Simon Cooper

Practice Nurses

Linda Gore
Nurit Tatarsky

Practice Manager

Rebecca Laver

Reception Staff

Melissa Sowerbutts
Jessica Nippard
Bethany Mannix

Allied Health:

Physiotherapy - Isaac Spivak
Psychology - Rochelle Umansky
Podiatrist - Julie Miller
Dietitian and Exercise Physiology - Lifestyle Breakthrough

Onsite Pathology:

Healthscope Pathology

Surgery Opening Hours

Mon-Fri: 8am-6.30pm

Sat: 8am-12.30pm

Sun: Closed

Public Holidays: Closed

Online booking available at:
www.northroadmedical.com.au

- Ideally use with a spacer
- If you have been prescribed a preventer, ensure you are taking it as prescribed by your GP to keep your lungs healthy
- Know the signs of worsening asthma and your asthma first aid steps
- If you start developing any signs of asthma, follow the asthma first aid steps
- If your symptoms are worsening , please call 000 and say you are having an asthma attack.
- **COMMON SIGNS:** difficulty in breathing (grasping for air). chest tightness and wheezing
- If you know you are sensitive to pollen - you may wish to stay indoors on high pollen and windy days and during and after a thunderstorm. HOWEVER, this may not always help, you must remain alert to the signs of your asthma worsening.

PREVENTION IS THE BEST MEDICINE

Those with known asthma should always keep their symptoms under control through regular checkups with their GP and nurse, and use their relievers and preventers as prescribed.

People who suffer from pollen, grass, fungal, dust allergies and or hay fever (allergic rhinitis) , If you wheeze during Spring, please see your GP.

We have to learn from these events - we encourage you to come and discuss your asthma management, allergies or hay fever (allergic rhinitis) with our GP or nurses

STAY INFORMED

- ▶ Asthma Australia - Asthma App ([available form i-Tunes](#))
- ▶ Mobile App - Melbourne Pollen Count and Forecast -
<http://www.melbournepollen.com.au/index.php/melbourne-pollen-count-app>
- ▶ Asthma Foundation of Victoria -
<http://www.asthmaaustralia.org.au>
Tel: **1800 278 462** or **(1800 ASTHMA)**
- ▶ Allergy and Anaphylaxis Australia
Tel: **1300 728 000**

REFERENCE:

<http://www.betterhealth.vic.gov.au>

<http://www.allergy.org.au>

Chief Health Officer Alert 29/11/16

<http://www.kidspot.com.au/health/disorders/allergies-and-immune-system/everything>

<http://www.abc.net.au/news/2016-11-29/thunderstorm-asthma>

First Aid for Asthma

1	<p>Sit the person comfortably upright. Be calm and reassuring. Don't leave the person alone.</p>		
2	<p>Give 4 puffs of a blue/grey reliever (e.g. Ventolin, Asmol or Airomir) Use a spacer, if available. Give 1 puff at a time with 4 breaths after each puff Use the person's own inhaler if possible. If not, use first aid kit inhaler or borrow one.</p>	OR	
3	<p>Wait 4 minutes. If the person still cannot breathe normally, give 4 more puffs.</p>		
4	<p>If the person still cannot breathe normally, CALL AN AMBULANCE IMMEDIATELY (DIAL 000) Say that someone is having an asthma attack. Keep giving reliever. Give 4 puffs every 4 minutes until the ambulance arrives. <small>Children: 4 puffs each time is a safe dose. Adults: For a severe attack you can give up to 6–8 puffs every 4 minutes</small></p>	<p>Give 2 separate doses of a Bricanyl or Symbicort inhaler <small>If a puffer is not available, you can use Symbicort (people over 12) or Bricanyl, even if the person does not normally use these.</small></p> <p>Wait 4 minutes. If the person still cannot breathe normally, give 1 more dose.</p> <p>If the person still cannot breathe normally, CALL AN AMBULANCE IMMEDIATELY (DIAL 000) Say that someone is having an asthma attack. Keep giving reliever while waiting for the ambulance: <small>For Bricanyl, give 1 dose every 4 minutes For Symbicort, give 1 dose every 4 minutes (up to 3 more doses)</small></p>	
HOW TO USE INHALER	<p>WITH SPACER</p>  <ul style="list-style-type: none"> • Assemble spacer • Remove puffer cap and shake well • Insert puffer upright into spacer • Place mouthpiece between teeth and seal lips around it • Press once firmly on puffer to fire one puff into spacer • Take 4 breaths in and out of spacer • Slip spacer out of mouth • Repeat 1 puff at a time until 4 puffs taken – remember to shake the puffer before each puff • Replace cap 	<p>WITHOUT SPACER</p>  <ul style="list-style-type: none"> • Remove cap and shake well • Breathe out away from puffer • Place mouthpiece between teeth and seal lips around it • Press once firmly on puffer while breathing in slowly and deeply • Slip puffer out of mouth • Hold breath for 4 seconds or as long as comfortable • Breathe out slowly away from puffer • Repeat 1 puff at a time until 4 puffs taken – remember to shake the puffer before each puff • Replace cap 	<p>BRICANYL OR SYMBICORT</p>  <ul style="list-style-type: none"> • Unscrew cover and remove • Hold inhaler upright and twist grip around and then back • Breathe out away from inhaler • Place mouthpiece between teeth and seal lips around it • Breathe in forcefully and deeply • Slip inhaler out of mouth • Breathe out slowly away from inhaler • Repeat to take a second dose – remember to twist the grip both ways to reload before each dose • Replace cover

Not Sure if it's Asthma?

CALL AMBULANCE IMMEDIATELY (DIAL 000)

If a person stays conscious and their main problem seems to be breathing, follow the asthma first aid steps. Asthma reliever medicine is unlikely to harm them even if they do not have asthma.

Severe Allergic Reactions

CALL AMBULANCE IMMEDIATELY (DIAL 000)

Follow the person's Action Plan for Anaphylaxis if available. If the person has known severe allergies and seems to be having a severe allergic reaction, use their adrenaline autoinjector (e.g. EpiPen, Anapen) before giving asthma reliever medicine.

For more information on asthma visit:
Asthma Foundations – www.asthmaaustralia.org.au
National Asthma Council Australia – www.nationalasthma.org.au



Although all care has been taken, this chart is a general guide only which is not intended to be a substitute for individual medical advice/treatment. The National Asthma Council Australia expressly disclaims all responsibility (including for negligence) for any loss, damage or personal injury resulting from reliance on the information contained. © National Asthma Council Australia 2011.