

Asthma : Stereotypes and unique case of the adolescent

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Asthma is a harmless disease

Wrong Asthma is a deceptive disease, with multiple symptoms indicating its' onset and continues to kill between 900 and 1000 persons per year in France, irrespective of age. Every 2 weeks, in our country, there will be a teenager that dies

The warning signs must never be ignored, especially if one or more of them are present:

- abnormal shortness of breath at rest or during exercise (difficulty breathing)
- whistling in the chest (especially on expiration)
- chest tightness
- persistent cough, cough after exertion has stopped, or cough when laughing

Asthma is under diagnosed

Right Wrong Asthma is indeed under-diagnosed but can also be over-diagnosed. It is therefore necessary to know the onset signs that we have cited above. One of these signs, whether alone or in combination, should lead to consulting a doctor who may or may not diagnose asthma. Ideally a pulmonologist should confirm the diagnosis, research the causes, set up the treatment plan and ensure follow-up. Regardless of age, the problem of patients with consulting their doctor explains the under-diagnoses.

Sometimes asthma is wrongly diagnosed as in the case of hyperventilation syndrome. This can mimic an asthma attack and be treated as such, without the medication having any effect. It is revealed by very rapid breathing (hyperventilation) and is linked to other symptoms in the body (very fast heartbeat, malaise, "head spinning", tingling in the fingers and around the mouth ...). In everyday language, this is sometimes called spasmophilia, tetany crisis or anxiety attack. Most frequently, there is no associated cough. Hyperventilation syndrome is more common in asthmatics and girls. It can be triggered by sport, stress or sometimes for no clearly identified reason.

Asthma is a disease that is controlled with a Ventolin® spray (bronchodilator)

Right Wrong Ventolin® is one of the treatments for an asthma attack. It is the most well-known, but there are many other inhalers containing bronchodilators. However, when attacks repeatedly occur more than twice a week, additional treatment with inhaled corticosteroids becomes necessary. This is the baseline treatment. The doses are tiny because they are administered directly to the suffering area. There are very few side effects, no weight gain, no need for a special diet. The goal of the pulmonologist is to seek the most minimal yet effective treatment. We are talking about "step-down" strategies (decreasing doses when everything is fine) and "step-up" (increasing doses at certain times when attacks are more frequent).

Stress can trigger an asthma attack

Right In an asthmatic person, stress can trigger an attack, and conversely, an asthma attack is a source of stress because it causes anxiety. So how to break out of this vicious circle?

Identify stressful situations to better channel them. Consider talking to someone about it. Do not isolate yourself and try to find answers by simply taking time for yourself:

- regular physical activities that are enjoyable and adapted for you
- relaxing activities (music ...)
- relaxation techniques (abdominal breathing, meditation, yoga ...)
- getting hold of those close to you and/or answering their calls

Understanding the disease combined with correct treatment at the right time will quickly improve breathing and reduce stress.

FOCUS SUR LE CAS PARTICULIER DES ADOLESCENTS

As a teenager, the treatment is perceived as a bind

Right Adolescence is a period of critical transition. As asthma often begins during childhood, young people begin to reject their disease which results in poorer follow-up of their doctor's recommendations and inadequately taken treatment. It is therefore essential to help as much as possible by encouraging them to consult a doctor. When a baseline treatment is necessary, there are medications that can help the teen to stick to the treatment plan.

Taking inhaled corticosteroids will slow growth

Right Wrong Somewhat true: The regular intake of very large inhaled doses can slow down growth by 1 to 2 cm at the most, but this resolves at the end of treatment. However, a teenager who does not take his controller treatment will have frequent bouts of bronchitis called "exacerbations" for which oral corticosteroids will be given that will also slow down growth, expose the teen to general complications and decrease the quality of his immune system (immunosuppression). It is these exacerbation periods that are dangerous (emergency room visits ...).

Physical exertion is detrimental to asthmatic adolescents

Wrong On the contrary, physical activity increases breathing capacity, endurance, muscle capacity and reduces shortness of breath. Regular exercise improves asthma control, physical fitness, and exercise tolerance. It is also a social activity that contributes to psychological well-being, to friendly exchanges, to the building of confidence and self-esteem.

Here again, it is up to the health professional to adapt the treatment so that physical exertion is possible with respiratory tranquility, taking the bronchodilator 15 to 30 minutes before exercise, or combined with an inhaled corticosteroid or an oral treatment of Montelukast that may be pertinent in the case of asthma linked to physical exercise.

The medical treatment is a real constraint

Wrong Not anymore. If a controller treatment is necessary (using a rescue treatment > 2 times / week, a prolonged cough linked to asthma that wakes the sufferer up in the night, limited exertion) the teenager can take a treatment, suitable for 12 year olds and above, which combines a long-acting bronchodilator and a corticosteroid in a single inhaler, to be use as rescue treatment or controller treatment and in event of an attack, which simplifies things by only requiring one device.

Asthmatic adolescents should be exempt from sport

Wrong Sport is not contraindicated because of asthma. On the contrary, regular practice of sport is beneficial. It must be in conjunction with the doctor's advice to make sure that the best treatment is given at the right time and that recommendations are followed, which is essential for practicing one's sport in peace.

The best sport is the one that the teenager prefers. However, one should be aware that breathing large volumes of cold, dry air through the mouth can trigger asthma attacks. A simple way to avoid this may be to wear a scarf that warms and humidifies the inspired air. The practice of equestrian riding may be difficult because of the many dust particles and allergens present in the stables.

Scuba diving with a tank is not recommended, but should be carefully discussed with the pulmonologist. It is up to the health professional to adapt to the adolescent and his illness as much as possible so that it is not experienced as a handicap.

Smoking cannabis is less toxic than tobacco because it is a natural product

Wrong All inhaled by products of combustion irritate the respiratory tract. Cannabis may have a mild bronchodilator effect at the beginning of inhalation which is quickly counterbalanced by the irritation induced by the by-products of combustion that will trigger coughing and possibly an asthma attack.