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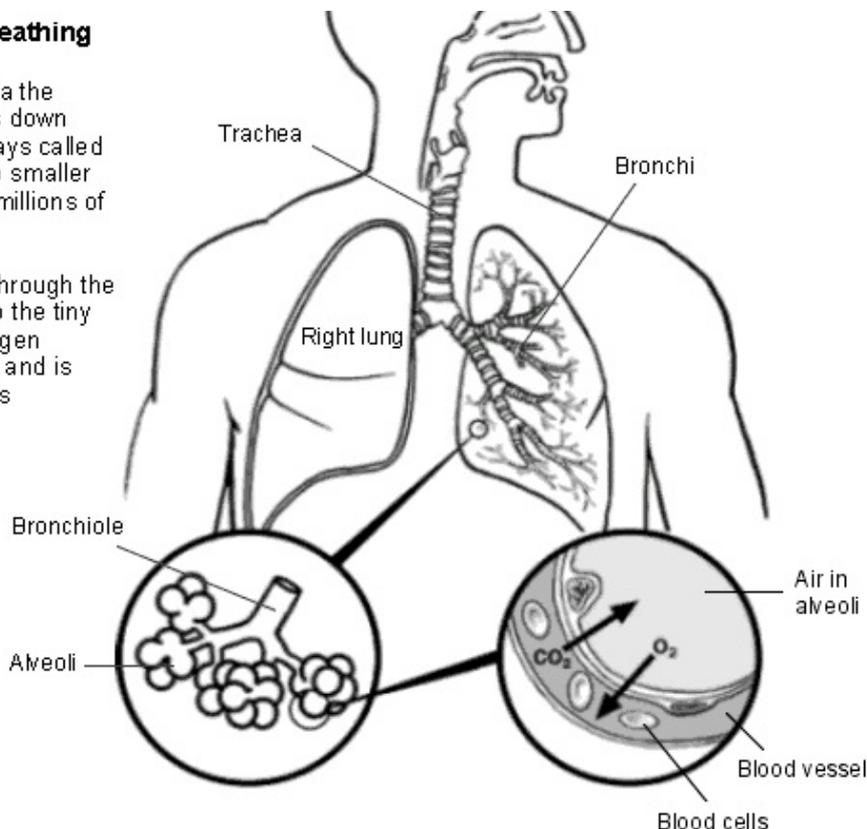
Asthma - Picture Summary

This leaflet gives a brief summary of asthma.

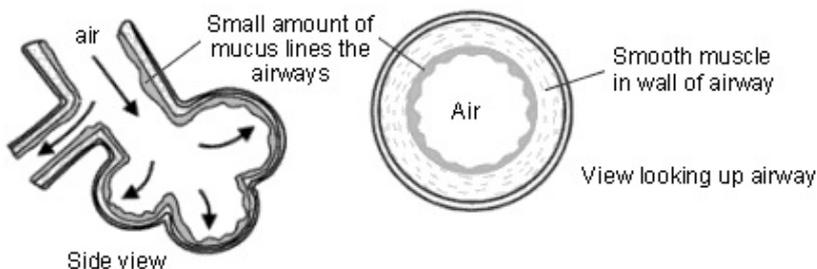
Normal airways and breathing

Air travels into the lungs via the windpipe (trachea). It goes down a series of branching airways called bronchi. These branch into smaller bronchioles and then into millions of tiny air sacs (alveoli).

Oxygen in the air passes through the thin walls of the alveoli into the tiny blood vessels nearby. Oxygen attaches to red blood cells and is carried in the blood vessels to the rest of the body

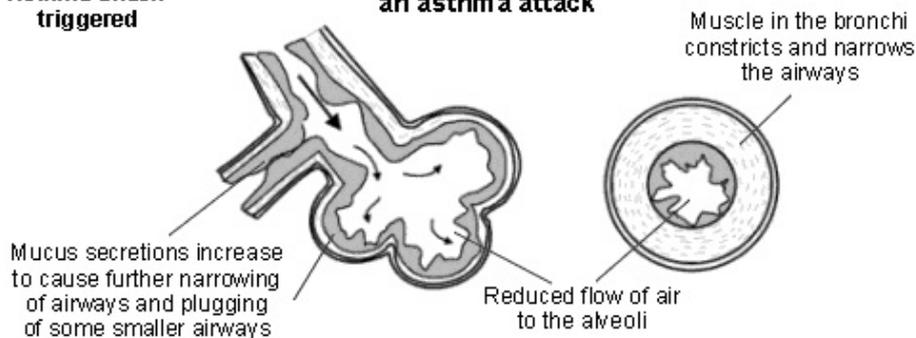


Cross sections of normal airway



Asthma attack triggered

Cross section of airway during an asthma attack



Some key points about asthma

- Asthma is caused by inflammation in the airways. The cause of the inflammation is not known. The inflammation causes the muscle in the airways to contract, and also extra mucus to form. These make the airways narrower than normal.
- Symptoms include wheeze, cough, and shortness of breath. Symptoms can range from mild to severe.
- Certain 'triggers' make symptoms worse in some people. For example, exercise, colds, pollen, allergy to pets, air pollution.
- Most people with asthma are treated with inhalers:
 - Reliever inhalers relax the muscle in the airways. This gives quick relief of symptoms as the airways open wider. These are also known as 'bronchodilator' inhalers as they widen (dilate) the airways (bronchi). You use these inhalers 'as required' if symptoms develop.
 - Preventer inhalers reduce inflammation. The medicine in most preventer inhalers is a steroid. Use these each day to prevent symptoms from occurring.
 - Long-acting bronchodilator inhalers work in a similar way to 'relievers', but work for up to 12 hours after taking each dose. One may be needed if symptoms are not fully prevented by the preventer inhaler alone. (Some brands of inhaler contain a steroid plus a long-acting bronchodilator for convenience.)
- Most people with asthma should take a regular preventer inhaler. The aim is to **prevent** symptoms so that you can get on with a normal life.
- You may need a short course of steroid tablets now and then to treat a bad attack of asthma. Steroids reduce inflammation.
- You should not smoke.
- Make sure you know:
 - How to take your inhalers.
 - Which is your reliever inhaler, and which is your preventer inhaler.
 - What to do if symptoms get worse.

Further help & information

Asthma UK

Summit House, 70 Wilson Street, London, EC2A 2DB

Tel: (Adviceline) 0800 121 62 44, (Admin) 020 7786 4900

Web: www.asthma.org.uk

Further reading & references

- [British guideline on the management of asthma](#); Scottish Intercollegiate Guidelines Network - SIGN (Oct 2014)
- [Asthma](#); NICE CKS, Dec 2013 (UK access only)
- [Asthma facts and FAQs](#); Asthma UK, 2014
- [Global Initiative for Asthma \(GINA\)](#)

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