HOW TO USE YOUR INHALER DEVICE





Using an inhaler is the most common and effective way of taking asthma medicines.

If you're NOT using your inhaler correctly, you might not be getting the full dose of medicine your doctor or asthma nurse prescribed because the medicine can't reach your lungs. Instead it might be hitting the back of your throat, or staying on your tongue or in your mouth where it won't help atall.

Getting your inhaler technique checked

Ask your GP, asthma nurse or pharmacist to show you how to use all your inhalers correctly when they're first prescribed. After this, take your inhalers (and spacer) with to every single visit so that they can go through it again with you. It's best if you actually show the doctor what you are doing so they can see whether you need to do things a bitdifferently.

Types of asthma inhalers and how to use them

There are different kinds of asthma inhalers, with different types of medicine in them. Because these inhalers are used in different ways you may find some easier to use than others.

Metered dose inhalers (MDIs)

The most common "asthma pump" is the 'press and breathe' metered dose inhalers (MDIs). MDIs work better with a spacer. Spacers collect the medicine inside them, so you don't have to worry about pressing the inhaler and breathing in at exactly the same time.



If you have a 'press and breathe' MDI inhaler and are using it directly in your mouth the steps to follow for the "single breath inhalation technique" are:

- Shake
- Breathe out as much as possible
- Immediately insert into mouth with good seal
- Start breathing in slowly

This is the same technique that you could use with a spacer, especially if you can take all the air from the spacer in with one long slow breath. Using a spacer helps you get more medication to the lungs and is recommended for all children and adults.

- Press inhaler immediately after you started breathing in
- Breathe in slowly to fill your lungs
- Hold breath for 10 seconds
- Breathe out through your nose



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Children who cannot take one breath in or who cannot co-ordinate pressing the canister with breathing in, should use a spacer with a one way valve at the front, and use the "6 breath technique".

- Use a valved spacer
- Shake
- Insert into mouth with good seal
- Actuate inhaler

Very small babies who cannot put the spacer in their mouths properly will have need a face-mask attached to the spacer. Also use the "6 breath technique" but make sure there is a very good seal between the facemask and the face. The medicine will escape through the side if the seal is not good enough. Stop using a face mask as soon as the child is able to breathe in and out through their mouths alone.

- Breathe deep in and out slowly
- Stop after taking at least six breaths



Nebulisers

Nebulisers turn liquid medicine into a spray of mist. Nebulisers are much less effective than an asthma pump attached to a spacer. Nebulisers should ideally not be used for the chronic treatment of asthma. When using a nebuliser breathe slowly and deeply through the mouth as far in and as far out as possible. Use a mouthpiece rather than a facemask.

Even acute asthma attack can be treated with a metered dose inhaler and spacer while you are on your way to hospital. To do this, you need to use 6 to 10 puffs of the medication to get a decent dose. Each puff must be given separately with about a minute between each puff. This is called multidosing.

Are you making any of these common mistakes with your inhaler technique?

- Not breathing out first. Always breathe out as much as you can just before taking your inhaler to make more space in your lungs for your next breath in.
- Not holding your breath after taking your inhaler. When you hold your breath after inhaling the medicine, you give more time for the medicine to get into your lungs.
- Inhaling too early before pressing the canister. If you're already half way through breathing in by the time the medicine is released from the inhaler, you won't have enough time to breathe in all the medicine because your lungs will already be full.
- Inhaling too late after pressing the canister (unless you're using a spacer). If you use a pump in the mouth and don't breathe in immediately, most of it will hit the back of your throat.
- Not leaving enough time between doses. Use one puff at a time, breathe it in fully, then shake again before the next puff.