

Asthma and inhaler use

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Asthma is a disease of the respiratory system. People who have asthma sometimes have trouble breathing. When people who have asthma have this trouble breathing, it is called an asthma attack. Lots of people have asthma attacks and they are aggravated during winter.

Why does asthma occur and what happens during an asthma attack?

When most of us breathe, the muscles that are wrapped around the air tubes (airways) are very loose and relaxed, and the lining inside the airways is very thin. This lets the airways open up very wide so that it is easy to get air in and out of the small air sacs that make up our lungs. These small sacs are called alveoli. The muscles that are wrapped around the airways are very thin and loose, and the airway is wide open. This makes it easy to move air in and out of the air sacs

During an asthma attack, the muscles around the airways tighten, or "spasm" and the lining inside the airways swell or thicken, and get clogged with lots of thick mucus. This makes the airways much skinnier than usual so it is harder to move air in and out of the air sacs. This makes it hard to breathe!

During an asthma attack, it is actually harder to breathe out than it is to breathe in. This means that during an asthma attack, it takes much longer to breathe out (expire) than it does to breathe in (inspire)

Since it is so hard to breathe out during an asthma attack, more and more air gets trapped inside the lungs making it feel like one cannot breathe in or out!

What causes asthma attacks?

Lots of different things can cause an asthma attack. Something that causes an asthma attack is called a trigger. Some common triggers of asthma attacks are:

- λ Allergies
- λ Infections like colds or bronchitis
- λ Exercise
- λ Changes in the weather (from mild to cold)
- λ Smoke

What does it feel like to have an asthma attack?

Everybody does not feel the same things when they have an asthma attack.

- λ Sometimes during an asthma attack, people will cough and cough and cough,
- λ Sometimes people feel like they cannot catch their breath,
- λ Sometimes people feel like air is trapped in their lungs and they cannot get it out,
- λ Sometimes they have pain in their chest,
- λ Sometimes during an asthma attack, they have very noisy breathing.

How do doctors help make asthma better?

There are many different medicines that doctors may use to help people with asthma. Some medicines are swallowed (pills or liquids), some medicines are inhaled (breathed in through

your mouth or nose), and some medicines are injected (given as a shot in one of your muscles or veins). For most people, inhaled medicines are used first because they start working very fast (usually in less than five minutes!) and they don't have too many side effects. This is because inhaled medicines go right into the lungs and not into other parts of the body.

(MDI) seems simple, but most patients do not use it the right way. When you use the MDI the wrong way, less medicine gets to your lungs.

The following steps can help using inhaler in proper way.

Getting ready

- λ Take off the cap and shake the inhaler hard.
- λ Breathe out all the way.

press down on the inhaler. Within 5 seconds, begin to breathe in slowly.)

λ Keep breathing in slowly, as deeply as you can.

Hold your breath

- λ Hold your breath as you count to 10 slowly, if you can. This lets the medicine reach deep into your lungs.
- λ For inhaled quick-relief medi-

around the hole, clean the inhaler. Remove the metal canister from the L-shaped plastic mouthpiece. Rinse only the mouthpiece and cap in warm water. Let them dry overnight. In the morning, put the canister back inside. Put the cap on.

Replacing your inhaler

For control medicines you take each day, write the date you need to replace it on the canister.

For example, say your new canister has 200 puffs (number of puffs is listed on canister) and you are told to take 8 puffs per day. This canister will last 25 days. If you started using this inhaler on May 1, replace it on or before May 25. Write the date on your canister.

Don't put your canister in water to see if it is empty. This does not work.

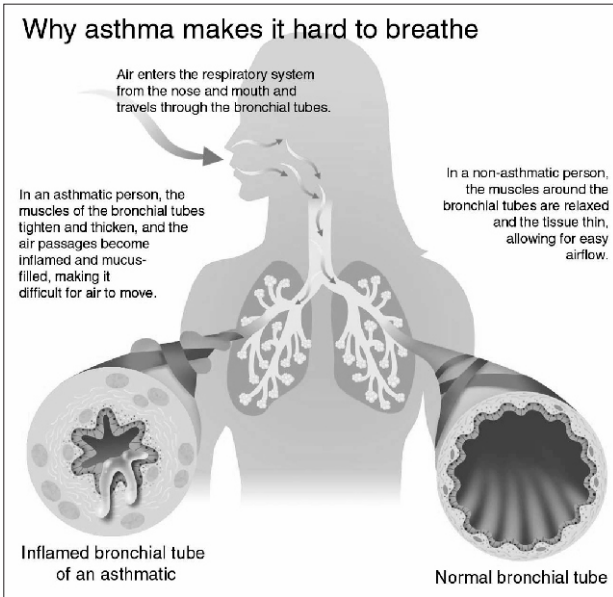
Children and inhalers

Young children may not be able to control their breathing enough to use a metered dose inhaler. A spacer can help. It is a chamber with a mouth piece that attaches to the inhaler. Once the medication is released, the spacer holds it until the child takes a breathe and inhales it. Other alternatives are to give the medication by mouth if it comes that way or to give it by a nebulizer.

Storage

Store your metered dose inhaler at room temperature. It may not work well if it is too cold. The contents of the canister are under pressure. So, do not get it too hot or puncture it.

Clean your inhaler the way the package insert tells you to.



How to use an inhaler properly

The main problem using inhaler is its improper use. People often do mistake using inhaler and they don't get actual result. Sometimes many people give up inhaling for the time being and the condition become worsen.

Using a metered-dose inhaler

- λ Hold the inhaler 1 to 2 inches in front of your mouth (about the width of two fingers). Alternatively, place the MDI into a spacer and insert the spacer into your mouth.

Breathe in slowly

- λ Start breathing in slowly through your mouth, and then press down on the inhaler one time. (If you use a spacer, first

cine (beta-agonists), wait about one minute between puffs. There is no need to wait between puffs for other medicines.

- λ Rinse your mouth afterward, to help reduce unwanted side effects.

Clean your inhaler as needed

Look at the hole where the medicine sprays out from your inhaler. If you see powder in or

'Smoking is hazardous to health' -- Simply not enough

DR MD HABIBE MILLAT

It has long been recognised that smoking tobacco kills slowly. People may die 22 years earlier than the average mortality rate. Smoking is hazardous to health (*Dhumpun Shasther Jonno Khoticon*) this warning is simply not enough now-a-days. The tobacco companies refuse to reveal what additives they put in to cigarettes, saying they are trade secrets. People have right to know the ingredients and their ill effects. 'The tobacco companies must be forced to reveal all the ingredients and have them tested for toxicity' said David Byrne, EU Commissioner for Health and Consumer protection. Awareness against devastating effects against smoking is growing worldwide.

The full extend of damage caused by smoking is still unknown. Every day more diseases are being discovered to be caused by smoking. The effects of passive smoking are as bad as that of active smoking. While 25 per cent of people are affected due to direct smoking, 75 per cent of the people get affected by inhaling the smoke released by the active smokers.

In Bangladesh, over all 50 per cent male and 3 per cent female population are cigarette smoker. In addition to that 16 per cent male and 31 per cent female population use oral smokeless tobacco. Men age 35-49 years have highest smoking prevalence at 70 per cent and smoking prevalence is highest among the poorest. Smoking prevalence declines proportionally as income increases. 83 per cent of smokers in lower socioeconomic class smoke bidi than more expensive cigarette. We don't have the data on how many people are suffering, how many people are dying early directly or indirectly from diseases related to smoking. We don't know smoke related health problems adding to our constrained health budget. But there is no doubt millions of people are suffering, a considerable portion of health budget is wasted every year from diseases caused by smoking. More over there is no quality control over the cigarette, bidi and other tobacco products. As the number of smokers are decreasing in the developed world, the tobacco companies are

targeting poor people of the developing countries like Bangladesh.

British American Tobacco (BAT) is a ubiquitous presence through its glossy media advertising, cigarette display cases, and storefront sign. In 1998, BAT spent 3.4 million US dollar on brand promotion and develop-



ment. The situation is alarming. We need to stand together to save our nation from smoke related damages.

Dr Ann McNeill of University college London describes the situation as a tobacco epidemic and warns the full extent of the damage has not been realised. Tobacco cause more deaths world wide than the HIV, TB, maternal mortality, road traffic accidents, homicidal and sui-

cidal deaths combined.

A new initiative to slash smoking

European smokers are due to be bombarded with graphic images designed to scare the smoke out of them in the New Year. Forty-two gruesome photographs are due to appear on cigarette pack-

tion theatre (heart surgery for block artery), woman carrying empty buggy (impotence) etc.

Significance and usefulness of the photographs

The idea of photographs was first tried out in Canada followed by Brazil. A year later after their introduction, a study by the Canadian Cancer Society found they could motive for more than a third of smokers trying to give up. The study also found 43 per cent of smokers were more concerned about the aftermath of smoking due to warning and one or more occasions, almost a quarter of smokers tempted to have a cigarette decided not to because of warning.

Ireland will be the first country to use the new images. This country was the first to ban the advertising of tobacco back in the late 1970s and it was also the first country to outlaw smoking all indoor places of work and also in all public places. Malta has also banned smoking in work places. Sweden will follow next year.

David Byrne, The EU Commissioner for Health and Consumer protection said 'People need to be shocked out of their complacency about tobacco. I make no apology for some of pictures we are using. The true face of smoking is disease, death and horror, not the glamour and sophistication the pushers in the tobacco industry try to portray.'

Developing country like Bangladesh, where the budget is always in constrain, people are less aware about their health problems, many people are under poverty level, cannot afford to bear another burden which is unnecessary. Government has to take step by step initiatives like banning advertise of smoking in newspaper, magazine, radio, TV, internet, stopping cigarette firms to sponsor sports, cultural or other events, increasing tax on tobacco products, not selling tobacco products under 18, banning smoking in work places, increasing social awareness against this dirty and deadly habit.

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Symptoms of appendicitis

Appendicitis is inflammation of the appendix. The appendix is a closed-ended, narrow tube that attaches to the cecum (the first part of the colon) like a worm. (The anatomical name for the appendix, vermiform appendix, means worm-like appendage.) It is thought that appendicitis begins when the opening from the appendix into the cecum becomes blocked.

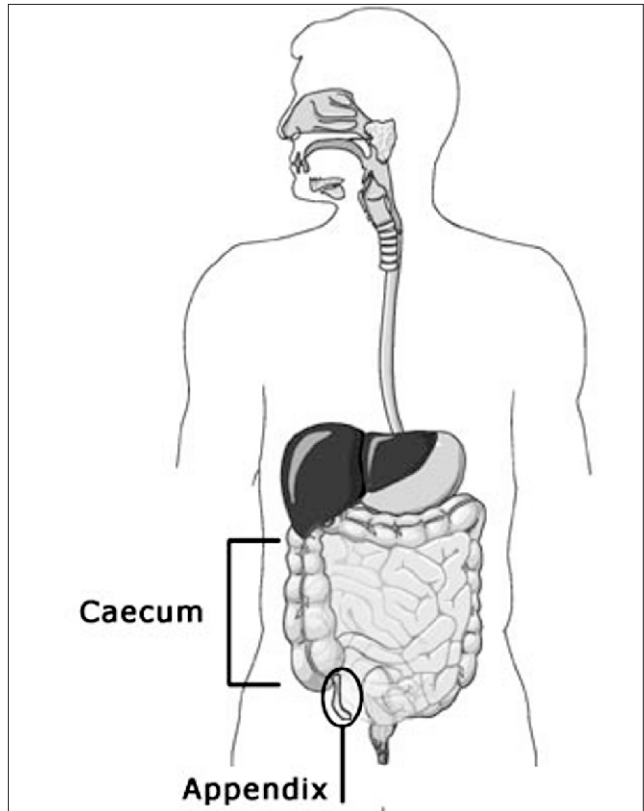
The pain of appendicitis is very severe. But people often misinterpret the pain of appendicitis with other acute abdominal pain. Some people may be nervous whether they have an appendicitis. So it may be helpful for you if you know the symptoms and characteristics of appendicitis.

Symptoms of appendicitis

The main symptom of appendicitis is abdominal pain. The pain is at first diffuse and poorly localised, that is, not confined to one spot. (Poorly localised pain is typical whenever a problem is confined to the small intestine or colon, including the appendix.) The pain is so difficult to pinpoint that when asked to point to the area of the pain, most people indicate the location of the pain with a circular motion of their hand around the central part of their abdomen.

As appendical inflammation increases, it extends through the appendix to its outer covering and then to the lining of the abdomen, a thin membrane called the peritoneum. Once the peritoneum becomes inflamed, the pain changes and then can be localized clearly to one small area. Generally, this area is between the front of the right hip bone and the belly button. The exact point is named after Dr. Charles McBurney--McBurney's point. If the appendix ruptures and infection spreads throughout the abdomen, the pain becomes diffuse again as the entire lining of the abdomen becomes inflamed.

Nausea and vomiting also occur in appendicitis and may be due to intestinal obstruction.



DID YOU KNOW?

Your child could be at risk of type 2 diabetes



Your child's risk

Type 2 diabetes is on the rise. Your child is at risk if your child is overweight or has a family history of diabetes.

Warning signs

Keep an eye out for the following warning signs of type 2 diabetes --

- λ Increased thirst,
- λ Frequent or nighttime urination,
- λ Blurry vision,
- λ Unusual fatigue; and
- λ Dark skin around the neck or

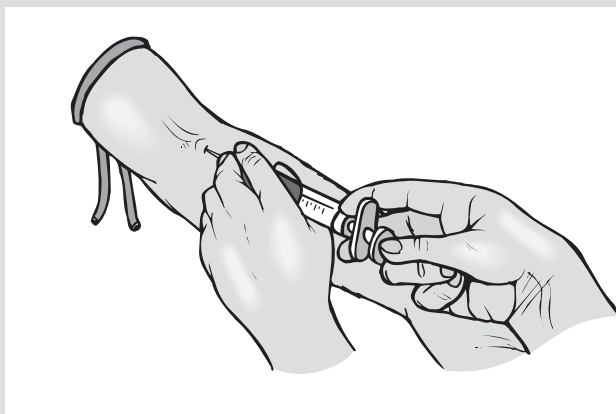
Prevention

There are things you can do to prevent type 2 diabetes. Encourage active play, physical activity and healthy meals. For kids who are overweight, here are some changes to try (if needed) --

- λ Limit time for television and video games to less than 4 hours a day,
- λ Drink less regular sodas, sports drinks and juice,
- λ Drink more water instead,
- λ Limit fast foods or eat smaller portion sizes.

HEALTH TIPS

Hepatitis B: Healthcare providers are at greater risk



There are so many ways that Hepatitis B virus can spread. Blood is one of the most important way. Healthcare providers like doctors, nurses, laboratory technicians frequently come in contact with blood for various purposes like blood drawing, infusion of saline, transfusion of blood, injecting the patients and so on. Some of these patients may carry diseases which spread through blood like hepatitis B, AIDS etc.

So health service providers should get protected against these diseases. But it is surprising that most of them are not well protected e.g. most of them have no vaccination against hepatitis B.

It is very important to get protected against hepatitis B. As it was not included in the EPI vaccine schedule in our country most of our people are not vaccinated against hepatitis B. Check whether you, your relatives or friends especially who work at hospital or diagnostic centre are vaccinated against hepatitis B.

Always remember that you are never too old to get shots against hepatitis B.

Breast self exam

As early detection of any cancer is helpful to reduce the morbidity and mortality, awareness can cut the risk of breast cancer dramatically. That is why doctors continually proclaim the message for women to be aware, to check, to double check and to keep on checking for the rest of their lives.

Every women should become proficient in regular breast examination and carry this out on a regular basis from the late teens. This must be an ongoing exercise for the rest of one's life. It is very simple and easy to carry on.

The ideal time to perform this is just after a period. Many women tense, tender breasts just prior to menstruation and they may become sore and uncomfortable, but when a period starts large amount of fluid are excreted, usually as urine. Breast fullness tends to wane and this is the best time to check.

There are many simple ways of carrying it out. You may do it under the shower, when the body is wet and the hands soapy. Gently feel and palpate the entire breast area, covering each quadrant and then concentrating on the nipple area and parts underneath. It takes only a few minutes. If there is any abnormality or strange lump, this could be suspect.