Title page

Asthma management

Self- management education is essential for the patients because it familiarizes them with the procedures that they can follow. Healthcare professionals have a responsibility to explain the steps involved in management care of asthma. This enables them to optimize their conditions of health and stability. A professional review is required for evaluating self-management of the patient’s that stresses on improving asthma control, reducing exacerbations and improving quality of life. Written personalized action plan is provided to the patient that explains the daily management strategy. Training skills allow the patient to take adequate care that will reduce the likelihood of their admission to the hospital. An important intervention for managing asthma is the use of peak flow meter. This will improve the patient's ability to assess asthma regularity (Guilbert, et al., 2019). The frequency and severity of the symptoms are identified through appropriate use of meter.

An agreed personalized action plan is crucial for enhancing the quality of patient’s life that provides information on the use of peak flow meter. It includes the use of regular medications, recognition of deterioration and appropriate actions taken according to the need of the situation. The meter measures peak expiratory flow rate explaining if the lungs are open for airways. The peak flow meter allows the patient to recognize symptoms like wheezing and shortness of breadths. Monitoring demands identification of the symptoms of peak flows and specifying thresholds for individual actions. The evidence reveals that the healthcare providers face the challenged of non-adherence (Pinnock, 2015). They need to provide information on different inhalers to the patients and regular use of steroids. The action plan is formulated after considering the severity of the disease.

Patients are advised to use the peak flow meter on a daily basis even when they feel that the asthma symptoms are not apparent. The meter provides information on the coughing, wheezing and shortness of breath. The most critical step for using the meter is to understand the readings. The patients are explained that the meter must read zero or show the lowest reading when it is not used. It is used while keeping it in a straight position. The patient before recording must take a deep breath. The peak flow meter is then placed in the mouth and the tongue is below the mouthpiece. The patient closes his lips tightly around the device. The patient is them advised to blow hard, without throwing the head out of the mouth. The patient breathes a few more times with a normal breath. This process is repeated for times and recordings are noted. An appropriate way is to note the highest number (Wensley & Silverman, 2004). The procedure is repeated again if the tongue blocks the mouthpiece. If the patient experiences cough or spits the procedure will be performed again.

An important step for self-management and the use of peak flow meter is developing baseline measurement. It is important for the patient to get the right estimation of the peak flow value. This demands adequate practice for interpreting the reading. Three measurements are performed for assuring reliability of the obtained readings. The patient records the highest peak flow value as the measures are between 80 to 100 per cent. Readings that are below normal range reveals that the airway is narrowing (Wensley & Silverman, 2004). This exhibits seriousness depicting that the patient must visit the doctor. The physicians suggest peak flow testing once a day during the morning. When the readings are below the required level of normal the patient is advised to consult the doctor.

References

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