

Summary of interview

1:25 – Wheeze as a symptom of asthma

2:05 – What actually is asthma?

2:58 – Why do you think this wheeze and asthma misconception exists?

ALL ABOUT WHEEZE

4.03 – What's a wheeze and does it mean someone's asthma is getting worse?

5:02 – Do you hear an asthma wheeze when you breathe in or breathe out?

5.45 – Some people don't wheeze all the time, can asthma symptoms change with different triggers?

7:20 – Is it normal to wheeze all the time with asthma?

BUSTING THE MYTH – NON-WHEEZING + SYMPTOMS

8:38 – We've heard people don't ever get a wheeze with asthma and we've heard this term coined silent asthma, is this correct?

10.41 – for people who don't wheeze is cough the most common symptom? (looks at all symptoms and triggers, looking for patterns of triggers and symptoms)

FOR PARENTS

12:22 So thinking about parents - so recognising that not everybody wheezes with their asthma what kind of symptoms or signs should a parent look out for that 1. Their child might have asthma (non-wheeze) or 2. They're having a flare-up or an asthma attack?

13.42 – What about in really young children like a three year old, is there anything physical that you might see?

DIAGNOSING ASTHMA IN PEOPLE WHO DON'T WHEEZE – TIPS WITH GPs

15:22 – From a diagnostic point of view, is it more difficult to diagnose people with asthma who don't have a wheeze?

16:50 – Does every GP do spirometry and if they can do spirometry are there any age limits that apply?

18.19 – Do patients come to you with symptom diaries, is this useful? Or for their child?

20.20 – Question from Facebook – parent presenting child to the GP but the flare up has stopped, GP tells parent to go home to monitor symptoms.

23:43 – Can any GP do an Asthma Action Plan for someone with asthma?

24.17 - This has come through our Facebook page - is yawning a symptom of asthma?

26.36 - Is there anything else on World Asthma Day that you think is important to share?

Transcript – Q&A

1.25: Wheeze as a symptom of asthma.

Wheeze is one of the cardinal symptoms of asthma. It's a common one but it's not present in everyone, and it may be less common than some people think. So some people may wheeze but people need to look out for the sudden absence of wheezing, that can actually be a danger sign and they need to get checked out. People get symptoms of asthma but don't get wheeze as their main symptom, they have other symptoms.

2.05 – What actually is asthma?

It's a common long-term health condition that often lasts a long time through people's lives. It's mainly inflammation in the airways, in the tubes going down to the lungs. What that does is it makes the airways narrower – so the muscles go narrower and make the tubes small; there's inflammation which means swelling and often that produces mucus as well. All of these things narrow the tubes so the passage of air going up and down to the lungs is reduced and more difficult. That difficulty produces the symptom that people will recognise as their common asthma symptoms, and wheeze may be one of those but it's not the only one.

2:58 – Why do you think the wheeze and asthma misconception exists?

Wheeze... it is what people are asked about when they see a doctor, often what they experience, or what family members might talk about when they get asthma, often what school teachers will ask about. It's one of the common symptoms that isn't associated with many other conditions. One of the important things for us as doctors is that it's unusual that there's just a single feature of an illness, so the pattern of time and other symptoms associated with it are often what is really important in order to tell what's happening with someone.

4:03 – What's a wheeze does it mean someone's asthma is getting worse? *Constant wheeze.*

Wheeze is a symptom of those narrow airways. When the airways are narrow, and the air is going in and out of those, each little airway whistles a little bit like a flute or a tin whistle, and you can hear all of that whistling at once. That's why it often associated with people's asthma. If people are getting wheeze regularly, people need a check up to get it under better control so people don't actually wheeze.

5:02 – Do you hear an asthma wheeze when you breathe in or breathe out?

Usually it's on breathing out. So the air gets trapped inside the lungs and people often have to work quite hard to get the air out of the lungs through these narrow tubes – and that's what often makes people cough, to sort of push the air out. Wheeze can happen when breathing in, that's not a normal thing so people should be getting checked out with their GP.

5:45 – Some people don't wheeze all the time but have asthma, can asthma symptoms change with different triggers?

Some people will find when they grow – move from children to teenagers to adults, and as they get older, the state of their lungs changes too so people's symptoms can certainly change and people's triggers can certainly change. People's symptoms can change, depending if it's more an inflammatory process or more an allergic process. People become familiar with their own asthma

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symptoms, whether they provoke difficulty breathing or a cough, so knowing your own asthma symptoms is really important.

7:20 – Is it normal to wheeze all the time with asthma?

My sense as a GP is that asthma treatment is so much better than it used to be and that our aim is to stop people being short of breath, stop people wheezing and most importantly people should be able to live their normal life that they want to live without being limited by shortness of breath. That includes being able to sleep throughout the night.

8:38 – We've heard people don't ever get a wheeze with asthma and we've heard this term coined silent asthma, is this correct?

I'm fascinated by all the people that have talked about their non-wheezing asthma. As we mentioned wheeze is one of the symptoms but it's not an exclusive symptom. There's a group of people out there who won't be wheezing but will be coughing and feeling short of breath, so that may be called silent asthma. There are almost two versions of silent asthma. One is those symptoms of asthma that aren't wheezing, and one that worries me very much as a doctor is when we listen to the lungs, they're struggling so much to a get air in and out of the lungs, you can't hear wheeze. So we often call this silent asthma or silent chest. This is a sign of someone being very unwell from their asthma and needing quite urgent treatment for it.

10:41 – For people who don't wheeze is cough the most common symptom?

That would be one of them. I think feeling short of breath as well, of not being able to get enough air in. Feeling tight across the chest and that's because the (airway) tubes are literally actually tight. A sign we actually look for if people are talking to us about asthma is the ability to speak full sentences, and the ability to do the activities they'd usually do without getting short of breath. So any of those would be symptoms we'd be looking out for in someone with asthma who didn't have wheeze. And then the timing of those symptoms as well. Any asthma symptoms often have triggers associated with them and people often know those quite well. Often associated with picking up a viral illness like cold or flu. Often at night time because everyone's airways are narrower at night, and they're often associated with cold temperature – so can be particularly worse colder times of year and early hours in morning. And worse with physical activity such as playing sport. That pattern of symptoms can be a really important pointer to asthma as well.

12:22 So thinking about parents - so recognising that not everybody wheezes with their asthma what kind of symptoms or signs should a parent look out for that 1. Their child might have asthma or 2. They're having a flare-up or an asthma attack?

So some children might wheeze, others it will be a cough. Coughing is common in children because they're very fond of passing around their illnesses between each other but that pattern of cough – overnight, cold weather, particular triggers, exercise and viral illness can be a pointer to having asthma.

Ultimately for older children greater than six years old, adolescents and adults – spirometry is actually the best way of being able to get an asthma diagnosis. Because that's a demonstration of the narrowing of the airways to the lungs, that is reversed by the reliever puffer (salbutamol).

13:42 – What about in really young children like a three year old, is there anything physical that you might see?

Symptoms and signs for young children can be quite subtle. If you're worried – then it's something to get checked out. There's a range of conditions that trigger similar symptoms, so I'd be looking for any child struggling to breathe, like they're working hard to breathe – that could well be asthma. Obviously hearing a wheeze and that pattern of cough we were talking about but sometimes it shows itself in times of feeding or times of physical activity; if they're struggling more to do that or if they're more tired than you'd expect or they're waking up in the night – those could all be signs of asthma. I think if there's something unusual for your child that you don't think is quite right, that's definitely worth getting checked out.

I was speaking with a parent and they said they look at their child's tummy, if their tummy is moving a bit excessively then that's a good indicator for them that their child might be having difficulty breathing

15:22 – From a diagnostic point of view, is it more difficult to diagnose people with asthma who don't have a wheeze?

It probably is because wheeze is considered to be the classic asthma symptom and without that, there may be other causes of the symptoms they may have. Spirometry is really useful at working out those different possibilities. We tend to collate all that information together to make a decision with the patients. So the storing of feelings that person has; and the pattern that their symptoms come on; the examination of the listening to the lungs; seeing what the oxygen levels in the blood are; seeing how much they're struggling to breathe; and then spirometry on top of that. And sometimes looking to other causes that may be responsible for those symptoms.

16:50 – Does every GP do spirometry and if they can do spirometry are there any age limits that apply?

It's worth checking with your GP if they do spirometry. Increasing numbers of GPs are doing spirometry and practice nurses will be trained to do that. Certainly we're encouraging easy access to spirometry, it's the best test we have. Younger children will struggle to do the breathing test and push air through the tube so it's often the older children over six or seven who are able to do that. Spirometry can be hard to do if you're having an asthma attack so often we do it when people are well again to confirm the diagnosis that we suspected. Some people who might be older sometimes struggle to get the volume of air through the machine and sometimes there can be a mixed pattern with other conditions such as Chronic Pulmonary Obstructive Disease (COPD).

18:19 – Do patients come to you with symptom diaries, is this useful?

They're really useful. It's better than memory. You actually can spot the patterns. And often people will keep a symptom diary and patterns will become obvious even more seeing a GP. It can be really helpful at just spotting those patterns coming out at particular times of day, particular activities, particular triggers. Those are really helpful in making a diagnosis, those patterns we were talking about earlier.

A really good tip for people or parents is to have as much information as they can about their asthma as they can before seeing their GP. Have a symptom diary, observe their children - so when they see their GP they're providing a good clinical picture of asthma symptoms that the GP can cross reference with their medications and their Asthma Action Plan.

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If people are worried, they should share that with the GP as well. Very often they are right, and it's helpful to know what the patterns are.

20:20 – Question from Facebook – parent presenting child to the GP who has a wheeze at night but the wheeze has stopped during the day, GP tells parent to go home to monitor symptoms.

What tips can you give to parents?

... One of the really helpful things can be saying to your GP – *can you just explain – I was worried, I know the asthma symptoms are usually worse through the night – can you just explain to me why you think that's not the case?* And keep asking until you have an explanation that you're satisfied with.

The other way might be something like this:

I was wondering if this could be a worsening of asthma, do you mind if we try one of the 'step-up' inhalers just to see if that's going to benefit.

I think it just engages the GP in a conversation about what you think is happening and what the possible options are.

When managing asthma it's really important to get across asthma, even ring Asthma Australia on the 1800 ASTHMA to speak with an asthma educator, get all the pieces of puzzle together.

The Asthma Action Plan to be a real friend in that as well. It's a shared plan. When symptoms are worsening perhaps overnight, you can say - this is what's happening as per the AAP (symptoms), and at this stage this is the action I take – it says at this stage I use a different inhaler; It can be a really useful point of discussion with health professionals

23:43 – Can any GP do an Asthma Action Plan for someone with asthma?

Yes absolutely. I think it's better you have a GP you know and trust and they know how your asthma is behaving. But that's not always the case for many reasons. Any GP can do one, ideally find a GP you know and trust and the Asthma Action Plans will be even better than if they don't know you.

24.17 - This has come through our Facebook page - is yawning a symptom of asthma?

This is really interesting. When you look through the textbooks, it's usually not described as a symptom, but it's certainly reported by patients that it is.

The mechanism of yawning is to draw more oxygen into the body so it's quite plausible for some people when they're having an asthma attack or their asthma is worsening the body responds by going let's draw more oxygen in and one of the mechanisms for doing that is actually yawning.

So it's not well reported, there's a little bit of reports with it, with something called dysfunctional breathing which I'm not sure I found a helpful term but I suspect it's a symptom of asthma that many people will have that's not well reported in the medical literature.

There are other symptoms that aren't common that I've come across too. Like an itchy chin.

I can't explain that at all, but I've heard of people reporting it.

Host: It all comes back to the fact that it's really important for people to know how their asthma impacts them and what to look out for in their children. And not to dismiss something because it's to

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a wheeze or a cough. So if a child is constantly yawning as you said, it could be an indication that something isn't quite right with their asthma.

26.36 - Is there anything else on World Asthma Day that you think is important to share?

We talked about Asthma Action Plans earlier. I think it's really important to have an asthma action plan for you or your child that sets out what to do at each stage of the symptoms. That can be useful for relatives who may be looking after the child, schools, childcare or the workplace. So there isn't that sense of panic 'oh what should we do?' It's a plan that's formulated in advance. One of the important things we know as asthma gets worse, is actually being able to keep calm during that because it's a terribly anxious time when you're with someone who feels like they can't breathe. So having that plan, knowing what to do and having it reviewed regularly by a GP – that can be really useful to know what should happen if asthma was to get worse and what to do to keep it settled.