Anxiety and depression are common in people with asthma.

The good news is that there are effective treatments both for asthma and for anxiety and depression.

With careful management, the symptoms of anxiety and depression can be treated along with those of asthma so they do not interfere with life.

**WHAT IS ASTHMA?**

Asthma is a condition of the airways. A person with asthma has symptoms that affect their breathing.

When asthma is uncontrolled, waking up at night and early morning due to asthma symptoms can leave a person feeling tired during the day. Having uncontrolled asthma can make it harder to join in with everyday activities, such as playing sport and other recreational interests. This can lead to feeling unmotivated and socially isolated.

There are effective and safe treatments available for asthma. These are not just to relieve symptoms when they occur, but to control the underlying condition so symptoms won’t interfere with your life, and to prevent asthma flare-ups or attacks occurring.

**WHAT IS ANXIETY?**

Anxiety is more than just feeling stressed or worried. Anxious feelings are a normal reaction to a situation where a person feels under pressure and usually pass once the stressful situation has passed, or the ‘stressor’ is removed.

Living with asthma is one of many things that can be a trigger for anxiety due to the constant fear of having an asthma flare-up or attack.

For this reason, anxiety is common and the sooner a person gets help, the sooner they can recover.

**SIGNS OF ANXIETY**

The symptoms of anxiety can often develop gradually over time. Given that we all experience some anxious feelings, it can be hard to know how much is too much. In order to be diagnosed with an anxiety condition, it must have a disabling impact on the person’s life.

There are many types of anxiety, and there are a range of symptoms for each. Anxiety can be expressed in different ways such as uncontrollable worry, intense fear (phobias or panic attacks), upsetting dreams or flashbacks of a traumatic event.

Some common symptoms of anxiety include:

- Hot and cold flushes
- Racing heart
- Tightening of the chest
- Snowballing worries
- Obsessive thinking
- Compulsive behaviour

There are effective treatments for both asthma and anxiety and depression. With careful management, the symptoms of anxiety and depression can be treated along with those of asthma so they do not interfere with everyday life. See page 3 for more information.
WHAT IS DEPRESSION?

While we all feel sad, moody or low from time to time, some people experience these feelings intensely, for long periods of time (weeks, months or even years) and sometimes without any apparent reason. Depression is more than just a low mood - it’s a serious condition that has an impact on both physical and mental health.

Depression affects how a person feels about themselves. A person may lose interest in work, hobbies and doing things he or she normally enjoys. Some people may lack energy, have difficulty sleeping or sleep more than usual, while some people feel anxious or irritable and find it hard to concentrate.

The good news is, just like a physical illness, depression is treatable and effective treatments are available.

SIGNS OF DEPRESSION

A person may be depressed if he or she has felt sad, down or miserable most of the time for more than two weeks and/or has lost interest or pleasure in usual activities. It’s important to note that everyone experiences symptoms of depression from time to time however, it may not necessarily mean a person is depressed. Equally, not every person who is experiencing depression will have all of these symptoms.

Some common symptoms of depression include:

- Not going out anymore
- Loss of interest in enjoyable activities
- Withdrawing from close family and friends
- Being unable to concentrate and not getting things done at work or school
- Feeling overwhelmed, indecisive and lacking in confidence
- Increased alcohol and drug use
- Loss or change of appetite and significant weight loss or gain
- Trouble getting to sleep, staying asleep and being tired during the day
- Feeling worthless, helpless and guilty
- Increased irritability, frustration and moodiness
- Feeling unhappy, sad or miserable most of the time with thoughts such as, “I’m a failure”, “Life’s not worth living”, “People would be better off without me”

The symptoms above will not provide a diagnosis. For an official diagnosis you will need to consult with your health professional. As with anxiety, there are effective treatments available for depression.

WHAT ARE THE TREATMENTS FOR ANXIETY & DEPRESSION?

Managing depression and anxiety can greatly improve people’s wellbeing and quality of life as well as their asthma and their attitude towards it. People with depression and/or anxiety can find it difficult to take the first step in seeking help. They may need the support of family, friends and a health professional.

There is no one proven way that people recover from depression or anxiety and it’s different for everybody. However, there is a range of effective treatments and health professionals who can help people on the road to recovery. There are also many things that people with depression, anxiety and asthma can do to help themselves to recover and stay well. The important thing is finding the right treatment and the right health professional that works for you.

Different types of depression and anxiety require different types of treatment. This may include physical exercise for preventing and treating mild depression or anxiety, through to psychological and medical treatment for more severe episodes. The treatment for anxiety or depression in someone with asthma involves a coordinated approach that monitors and treats the symptoms of anxiety, depression and asthma.

For more information on diagnosis and treatment of anxiety and/or depression, visit:

- Head to Health - headtohealth.gov.au
- Beyond Blue - beyondblue.org.au
- Lifeline - lifeline.org.au
WHAT ARE THE LINKS BETWEEN ANXIETY, DEPRESSION & ASTHMA?

Research indicates there is a link between anxiety, depression and asthma. More than two million Australians have asthma\(^1\) and more than three million Australians are living with depression or anxiety. One in five women and one in eight men will experience depression at some time in their life\(^2\). On average, one in four people will experience anxiety\(^2\).

For people who live with asthma, this figure is even higher.

- As is the case with other chronic illnesses, research shows that people with asthma are more likely to also have depression\(^3\).
- Research shows that having both depression and asthma is worse on a person’s health compared to having depression alone or asthma alone\(^4\).
- Both asthma and depression, if untreated, can impact greatly on a person’s ability to keep active and enjoy life.
- People with untreated depression can find it difficult to concentrate and stay motivated. As a result, they may not seek help for asthma, take prescribed medication, keep appointments or follow their written Asthma Action Plan.
- People with anxiety are more likely to have asthma and people with asthma are more likely to be anxious\(^5\).
- Asthma and anxiety share similar symptoms, such as a tightening of the chest, difficulty breathing, racing heart and feeling lightheaded. These symptoms may also be side effects of asthma reliever medications.
- Stress can act as a trigger for symptoms of asthma, anxiety and depression.
- Anxiety and depression make it harder for people to manage their asthma.

TREATING YOUR ASTHMA

The most effective treatment plan for asthma is one which is individualised to your specific situation. Inhaled preventer therapy is the mainstay of the medical treatment. This should be supported by an Asthma Action Plan, management of triggers and general health and wellbeing initiatives.

An Asthma Action Plan is written instructions about what asthma medicines you should take, how to recognise when your asthma is getting worse, and what to do if this happens. A written Asthma Action Plan gives you something to follow each day and helps you remember how to look after your asthma.

In your day to day management of asthma, it is important to:

- Take preventer medicine (if prescribed) regularly every day, even when well, to prevent asthma symptoms occurring and reduce your risk of asthma flare-ups.
- Monitor your asthma symptoms and need for reliever medication.
- Contact your doctor if your asthma symptoms are getting worse.
- Discuss any possible medication side effects and their impact on your asthma and mental health with your health professionals.
- The doctor managing your asthma needs to know if you also have depression or anxiety, for example to help write your Asthma Action Plan to help you distinguish symptoms of depression or anxiety from symptoms of asthma.

The most effective treatments are those that combine psychological and medical care, medical monitoring, individualised asthma education and adequate community support.

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PSYCHOLOGICAL TREATMENTS

Psychological therapies can help with recovery and can also help prevent a recurrence of anxiety or depression. These therapies help build skills in coping with stressful life circumstances and can be provided by a psychologist, psychiatrist or other trained health professional. A couple of psychological treatments are described here:

- **Cognitive behaviour therapy (CBT)** is an effective treatment for people with depression and anxiety. It teaches people to evaluate their thinking about common difficulties, helping them to change their thought patterns and the way they react to certain situations.

- **Interpersonal therapy (IPT)** is also effective for treating depression and some types of anxiety. It helps people find new ways to get along with others and to resolve losses, changes and conflict in relationships.

Please visit the Beyond Blue website to read more about the range of treatments available at beyondblue.org.au

MEDICATION

Antidepressant medication, alongside psychological therapies, can also play a role in the treatment of moderate to severe depression and some anxiety conditions.

Making a decision about whether a medication will be helpful and which is best for a person can be complex. The decision will be made in consultation with a doctor, after careful assessment and consideration. The doctor should discuss differences in effects and possible side-effects of medications. Stopping medication used to treat anxiety and depression should only be done gradually, with a doctor’s recommendation and under supervision.

Regular contact with and ongoing assessment by a doctor to check that treatments are working effectively is an important part of becoming and staying well. Many people taking medication will also benefit from psychological therapies, which may reduce the likelihood of relapse after the person has stopped taking the medication.
WHO CAN ASSIST?

A General Practitioner (GP) is a good first step to discuss your concerns. A good GP can:

- Make a diagnosis
- Check for any physical health problem or medication that may be contributing to the condition
- Discuss available treatments
- If appropriate, work with the person to draw up a Mental Health Treatment Plan so he or she can get a Medicare rebate for psychological treatment, provide brief counselling or, in some cases, psychological therapies
- Prescribe medication
- Refer a person to a mental health specialist such as a psychologist, social worker or psychiatrist

Make sure that the doctor managing your asthma knows if you have anxiety or depression.

It is recommended that people consult their regular GP or another GP in the same clinic, as medical information is shared within a practice.

Psychologists are health professionals who provide psychological therapies such as cognitive behaviour therapy (CBT) and interpersonal therapy (IPT). Psychologists are not doctors and cannot prescribe medication in Australia.

Psychiatrists are doctors who specialise in mental health. They can make medical and psychiatric assessments, conduct medical tests, provide therapy and prescribe medication. Psychiatrists often use psychological treatments such as CBT, IPT and/or medication. If the condition requires hospital admission, a psychiatrist will be in charge of the person’s treatment.

Mental health nurses are specially trained to care for people with mental health conditions. They work with psychiatrists and GPs to review a person’s mental health, monitor medication and provide information about mental health conditions and treatment. Some have training in psychological therapies.

Social workers in mental health are specially trained to work with people who are experiencing difficulties in life. Social workers can help people find ways to manage more effectively some of the situations that trigger these conditions such as family issues, financial problems, work stress and living arrangements. Mental health social workers can also provide focused psychological self-help strategies.

Occupational therapists in mental health help people who, because of a mental health condition, have difficulty participating in normal, everyday activities. Mental health occupational therapists also provide focused psychological self-help strategies.

Aboriginal and Torres Strait Islander mental health workers understand the mental health issues of Indigenous people and what is needed to provide culturally safe and accessible services. Some may have undertaken training in mental health and psychological therapies. Support provided by Aboriginal and Torres Strait Islander mental health workers might include case management, screening, assessment, referrals, transport to and attendance at specialist appointments, education, improving access to mainstream services, advocacy, counselling, support for family and acute distress response.

The cost of treatment from a mental health professional varies. However, in the same way that people can get a Medicare rebate when they see a doctor, they can also get part or all of the consultation fee subsidised when they see a mental health professional for treatment of anxiety or depression.

To find a mental health practitioner in your area, contact:

- Head to Health - headtohealth.gov.au
- Beyond Blue - beyondblue.org.au
- Lifeline - lifeline.org.au
HELPFUL STRATEGIES & TIPS

- Call **1800 ASTHMA (1800 728 462)** to speak with an Asthma Educator on how you can live well with your asthma
- Learn about anxiety, depression and asthma and how these conditions interact
- Learn how to distinguish the symptoms of asthma from the symptoms of anxiety or depression
- Plan with your doctor - have a written Asthma Action Plan and a mental health plan
- Visit your doctor regularly to review your asthma and mental health management
- Use your asthma medicine as prescribed. Talk to your doctor about possible barriers to taking medicine, such as cost, organisation or planning, as well as what to do if your asthma worsens, including Asthma First Aid
- Get help, support and encouragement from family and friends and have them help you to follow your asthma and mental health plans
- Learn relaxation techniques. Get involved in social activities. Stay active and exercise under the supervision of a doctor
- Ensure you’re eating a healthy diet that includes a wide variety of nutritious foods
- Limit your substance use (including alcohol, tobacco and coffee)

HOW FAMILY & FRIENDS CAN HELP

When a person has asthma and anxiety or depression, it can affect family and friends. It’s important for family and friends to look after their own health as well as looking after the person who has asthma.

Learn about asthma, anxiety and depression and their symptoms to help you recognise warning signs. Encourage the person to go to the doctor if their asthma, anxiety or depression gets worse. Make sure you seek help if you think you need it, too. Support the person by helping them to follow their asthma and mental health plans. Gently remind the person to take their asthma, anxiety and depression medication regularly and to attend all their medical appointments.

We’re here to help the person with asthma to work through their mental health challenges, to live freely and participate in normal activity alongside others.

This resource has been developed for the community by Asthma Australia.

Other Asthma Australia resources:
- Asthma Basic Facts
- Asthma Medications & Devices
- Things to Ask & Tell your Doctor
- Asthma & Pregnancy
- Asthma & Smoking

All Asthma Australia information is consistent with the National Asthma Council’s, The Australian Asthma Handbook (2019).

Asthma Australia information does not replace professional medical advice. People should ask their doctor any questions about diagnosis and treatment.

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**ASTHMA FIRST AID**

**Blue/Grey Reliever**
Airomir, Asmol, Ventolin or Zempreon and Bricanyl

Blue/grey reliever medication is unlikely to harm, even if the person does not have asthma.

1. **DIAL TRIPLE ZERO (000) FOR AN AMBULANCE IMMEDIATELY IF THE PERSON:**
   - is not breathing
   - suddenly becomes worse or is not improving
   - is having an asthma attack and a reliever is not available
   - is unsure if it is asthma
   - has a known allergy to food, insects or medication and has SUDDEN BREATHING DIFFICULTY, GIVE ADRENALINE AUTOINJECTOR FIRST (if available), even if there are no skin changes, then use a reliever

2. **SIT THE PERSON UPRIGHT**
   - Be calm and reassuring
   - Do not leave them alone

3. **GIVE 4 SEPARATE PUFFS OF RELIEVER PUFFER**
   - Shake puffer
   - Put 1 puff into spacer
   - Take 4 breaths from spacer
     - Repeat until 4 puffs have been taken

   If using Bricanyl, give 2 separate inhalations (5 years or older)

   If you don’t have a spacer handy in an emergency, take 1 puff as you take 1 slow, deep breath and hold breath for as long as comfortable. Repeat until all puffs are given

4. **WAIT 4 MINUTES**
   - If breathing does not return to normal, give 4 more separate puffs of reliever as above

   **Bricanyl:** Give 1 more inhalation

5. **IF BREATHING DOES NOT RETURN TO NORMAL**
   - Say ‘ambulance’ and that someone is having an asthma attack
   - Keep giving 4 separate puffs every 4 minutes until emergency assistance arrives

   **Bricanyl:** Give 1 more inhalation every 4 minutes until emergency assistance arrives

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