Inhalers and Spacers

Information for patients and parents

This leaflet can be made available in other formats including large print, CD and Braille and in languages other than English, upon request.

You have been given this leaflet because you have been diagnosed with either asthma or a wheeze associated with viral infections and need to use Metered Dose Inhalers (MDI's) and spacers.

The information in this leaflet is to be used together with the teaching from your nurse or doctor to give you the best information on how to give inhaler medication in hospital and at home.

What does an inhaler do?

Inhaled medications are the main treatment for asthma and other forms of wheezing. The medicine inside the inhaler goes directly into your airways. This means you will need a smaller dose than if the medicine was taken as a tablet or liquid by mouth. It also means there are fewer side effects.

What are the different types of inhaler medicines?

There are 2 main types of inhaler medicines: reliever and preventer inhalers.

**Reliever inhalers** work quickly to relax the muscle in your airways. This opens the airways wider and eases the symptoms. The reliever medicines are also called bronchodilators, because they dilate (widen) the airways. There are a few different types of reliever medicines. You are most likely to be sent home from hospital with Salbutamol, which usually comes in a blue inhaler.

**Preventer inhalers** control the swelling and inflammation in the airways. They are taken every day to prevent symptoms from developing and usually contain steroid medicine. Steroids help to reduce inflammation in the airways. The steroid medicine does not work immediately and usually takes 7 - 14 days to take full effect.

What inhaler medicine will I have?

If you have recently been diagnosed with asthma or a post-viral wheeze you will usually be given a reliever inhaler.
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Which inhaler device will I have?

There are different types of inhaler devices which give the same medicine. The type you will have been given is called a Pressurised MDI (Metered Dose Inhaler). The MDI is the most commonly used inhaler and one you may have seen before. It contains a pressurised gas that propels (sends) a set dose of medicine with each puff. The MDI device is most commonly used with a spacer device for children.

What is a spacer device?

A spacer is a plastic container which has a mouthpiece or a facemask at one end and a hole for the inhaler at the other end. There are several different types of spacers, the spacer which is usually given is called a Volumatic.

The spacer device holds the dose of medicine from the MDI as you breathe it in. There is a valve at the mouth-end, which controls the release of the medicine.

The advantages to using a spacer are:

• you get twice as much medicine into your lungs than by using an MDI alone.

• some people are unable to coordinate their breathing correctly, between pressing the top of the inhaler to release a puff and breathing it in. By using the spacer device you do not need good co-ordination.

Older children (usually those over 3 years old) who are able to open the valve with their breathing will use a spacer device with a standard mouthpiece. Younger children and infants who are unable to use the mouthpiece effectively should use a spacer with a soft facemask.

How do I use an inhaler and spacer?

Before using the spacer for the first time

You should:

• wash the spacer and mask (if provided) in hot soapy water and rinse thoroughly (to prevent the medicine sticking to the walls of the spacer)

• allow the spacer to air dry. Do not dry with a cloth as it could create static electricity inside which can make the medication stick to the sides of the spacer instead of travelling through.
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Before every use of the spacer

You should:

• check the expiry date of the inhaler.
• clean the mouthpiece of the inhaler with a damp cloth.
• make sure the spacer has been washed within the last 4 weeks.
• puff 1 dose of the inhaler into the spacer to form a lining to prevent the prescribed dose sticking to the walls of the spacer.

How do I give the prescribed dose?

Spacer with facemask (usually for children under 3 years)

You should:

• position your child so they are comfortable and prepare your child by reducing their anxiety in your normal way (for example, cuddles, favourite music or story).
• shake the inhaler well to mix the medicine before each puff.
• attach the inhaler to the non mouth-end and hold the facemask against your child’s face making sure it is well sealed around their mouth and nose.
• press the top of the inhaler to give 1 puff only. Your child will not get all of their medicine if more than 1 puff is put in the spacer at the same time.
• try and allow your child to take about 10 normal breaths via the spacer. If your child is very distressed and cannot manage then try only 5 - 6 good breaths.
• check the spacer device is making a clicking sound for each good effective breath. If your child is unable to make the spacer click, then place it at a 45 degree angle in order to open up the valve.
• remove the spacer and allow your child to breathe normally for 20 - 30 seconds between puffs, if your child needs more than 1 puff. Repeat the procedure until the prescribed amount of puffs has been given.
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Spacer with mouthpiece (for most children over 3 years and some adults)

You should:

• sit or stand whilst using the spacer and your breathing should be as relaxed as possible. Slow deep breaths in are best.

• insert the mouthpiece into your mouth. Always make sure you do not push your tongue through the mouthpiece, as this may reduce the amount of medicine you get.

• shake the inhaler well to mix the medicine before each puff.

• attach the inhaler to the non mouth-end and press the top of the inhaler to give 1 puff only. You will not get all of your medicine if more than 1 puff is put in the spacer at the same time.

• you should take about 10 normal breaths via the spacer. With children it may be helpful to count aloud.

• check the spacer is making a clicking sound for each good effective breath. If you are unable to make it click, you should follow the instructions provided in the leaflet with your spacer.

• remove the spacer and breathe normally for 20 - 30 seconds between puffs, if you need more than 1 puff. Repeat the procedure, until the prescribed amount of puffs have been given. Unless you have been directed otherwise.

How should I store my inhaler?

You should:

• store your inhaler at room temperature, away from direct light.
• keep the lid of the inhaler on at all times when not in use.
• replace all inhalers before they expire.
• replace your spacer every 12 months.
• make sure you have a repeat prescription from your GP.

Plan in advance to make sure you do not run out of inhalers, especially over holidays.

You must get rid of unused inhalers at your local pharmacy.
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Helpful hints and tips

If you are using a steroid preventer inhaler e.g. Beclomethasone, you should wash your face with warm water after use. This will remove any unwanted traces of steroid from the skin.

Hold your young child in a firm but gentle cuddle and wrap them in a blanket to reduce any wriggling.

Counting out loud with each breath in can encourage slow regular breathing.

You may find it helpful to have a second person to help with the giving of inhalers whenever possible.

Reward children with star charts or stickers.

Remember

Your child may not like having their inhalers but it is important to remember that no matter how upsetting it may become, your child needs to have their medication.

Further information available from:

Asthma UK Advice Line
telephone: 08457 010 203
or via the website at: www.asthma.org.uk

NHS Choices
telephone: 111 (when it is less urgent than 999)
Calls to this number are free from landlines and mobiles phones or via the website at: www.nhs.uk
This leaflet has been produced in partnership with patients and carers. All patient leaflets are regularly reviewed, and any suggestions you have as to how it may be improved are extremely valuable. Please write to the Quality Assurance Team, University Hospital of North Tees or email: patientinformation@nth.nhs.uk.

Comments, Concerns, Compliments or Complaints

We are continually trying to improve the services we provide.

We want to know what we're doing well or if there's anything which we can improve, that's why the Patient Experience Team is here to help.

Our Patient Experience Team is here to try to resolve your concerns as quickly as possible. If you would like to contact or request a copy of our PET leaflet, please contact:

- telephone: 01642 624719
  Monday – Friday, 9.00 am – 4.00 pm
  Messages can be left on the answering machine and will be picked up throughout the day.

- freephone: 0800 092 0084
- Mobile: (can use text): 0779 561 883
- Email: patientexperience@nth.nhs.uk

Out of hours if you wish to speak to a senior member of Trust staff, please contact the hospital switchboard who will bleep the appropriate person.

- telephone: 01642 617617
  24 hours a day, 7 days a week

The Patient Experience Team is available to discuss your concerns in person Monday – Friday, 1.30 pm – 4.30 pm.

Data Protection and use of patient information

The Trust has developed a Data Protection Policy in accordance with the Data Protection Act 1988 and the Freedom of Information Act 2000. All of our staff respect this policy and confidentiality is adhered to at all times. If you require further information please contact the Head of Communications.

- telephone: 01642 624339 or www.dataprotection.gov.uk

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