



ASTHMA

Proposed Management of Allergic Rhinitis on Medical Missions in Resource-Limited Settings

Case definition

Chronic intermittent respiratory symptoms (cough, difficult breathing, tight chest or wheezing) with onset in childhood/early adulthood AND one of:

Responsive to salbutamol

Worse at night or early morning

Triggered by respiratory infection, exercise, weather changes or stress

History of hay fever or eczema

Consider hospital referral for the following symptoms:

Respiratory distress despite bronchodilator treatment

Patients requiring regular prednisolone

Clinical management

1. Avoid smoke-filled rooms and indoor use of biomass fuels
2. Reduce dust by using damp cloths to clean furniture, sprinkling the floor with water before sweeping, cleaning blades of fans regularly and minimizing soft toys in sleeping areas
3. Eliminate cockroaches from the house and shake and expose mattresses, pillow, blankets to sunlight

Pharmacologic management

Salbutamol 2 puffs q4h prn (MDI inhaler attached to 150cc cup as spacer)

Albuterol 4mg pills or elixir (0.1-0.2mg/kg TID, not >12mg/24h)

Prednisone for acute episodes

Adapted from: