

Understanding the Signs of Childhood Asthma

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Does your child have a persistent, nonproductive nighttime cough? Does your teenager think she's out of shape because she's short of breath after playing sports?

They might not seem like it, but those symptoms can be signs of childhood asthma.

Many more children have asthma than medical experts once thought. In my practice, I estimate that one in four children show evidence of intermittent bronchospasm – or asthma.

Asthma is a disease that causes swelling and narrowing of the airways in the lungs and in some cases an attack can be fatal. But sometimes its signs are subtle. Many children with asthma can breathe normally most of the time. However, coming in contact with certain substances or certain conditions can trigger an attack in which breathing becomes more difficult.

Those substances include animal hair or dander, dust, mold, pollen, air pollutants, and certain medications. Cold weather and exercise can lead to breathing issues. Tobacco smoke is one of the biggest triggers. No one should smoke around children.

If your child has a dry cough at night, panting, mouth breathing or chest tightness, even if the symptoms aren't alarming, it's wise to contact your primary care physician to see if he or she has asthma. Many kids who are short of breath while playing sports aren't out of shape at all, but have asthma brought on by exercise.

Don't wait until your child wheezes to see the doctor. We can help long before it gets that bad.

Properly treating a child with asthma can have a dramatic difference in the child's life. It can turn around the stigma of a sickly child who can't physically keep up with other kids. Children with asthma can and do play sports. Even some Olympians have asthma.

The problem is, about half the people with intermittent asthma symptoms aren't treated.

In the clinic we can give lung function and other tests to determine whether the child has asthma and, if necessary, prescribe medication. We now have much-improved ways to deliver the medications, such as nebulizers for younger children and dry power inhalers for older ones.

Lung function tests can be normal when the allergen is gone, so it's best to see a physician when the child is having problems.

In my office, we often advise parents to give over-the-counter loratadine (Claritin or generic substitutes) to children with asthma, as well as to get rid of house dust, provide a hygienic sleep environment (wash bedding weekly) and keep the house free of tobacco smoke.

Because asthma can be a fatal disease, it is important to get immediate medical help if the child begins to change color, have difficulty breathing or become upset because he or she can't breathe well.

But most childhood asthma is easily controllable if diagnosed.