



# Better Asthma Control for Kids

## 1:1 BACK Asthma Medication Lesson Plan

**Topic:** Asthma Medications

**Objectives:** At the end of the session, student will be able to explain the difference between controller and reliever medicines and when to use them.

**Teaching aids:**

- Rainbow of Inhalers Medication Chart
- Airway diagram
- Airway Model (Sushi) - optional
- Demo inhaler (as a visual) - optional

**Suggested steps prior to visit:** Review asthma care plan on file for student to see medications used.

**Time:** 10 minutes

**Suggestions for use:** All students with asthma at the beginning of the year, any newly diagnosed asthma students.

**Procedure:**

1. Begin by letting the student know that you want to talk about their asthma medicines. Ask them if they know what medicine they use for their asthma.  
Older students may know the names of their medicines. Some students will not be able to do.
  - i. Use the Rainbow of Inhalers Medication Chart to see if the student can point to what their medicines look like.
  - ii. If the student still cannot identify them, that is ok. Refer to the asthma care plan.
  - iii. To probe about a controller (if not on the care plan), you can ask if there is an inhaler that they take at home in the morning and/or at night.
  - iv. For younger students, you can use the practice inhaler as a visual if they cannot identify which medicine they use. Sometime they can recognize the shape of the inhaler.
2. Talk about what their different medications do for their bodies.  
You can explain what each of their medicines do.



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- i. Relievers - Used to alleviate symptoms short term during an asthma attack or increased symptoms. Also known as rescue inhalers.
  1. Short-acting beta<sub>2</sub>-agonist (SABA)
    - a. Work by relaxing the smooth muscle around the airway.
    - b. Relieves difficulty breathing, wheezing, and shortness of breath.
    - c. Can be used as a pretreatment for physical activity.
    - d. Last 4-6 hours
- ii. Controllers - Used to manage asthma long term to prevent asthma symptoms and attacks. Also known as preventers.
  1. Inhaled Corticosteroids (ICS)
    - a. Reduces inflammation in airway
  2. Long-Acting Beta<sub>2</sub> Agonists (LABA)
    - a. Relaxes smooth muscles around airway
  3. Long-Acting Muscarinic Antagonists (LAMA)
    - a. Reduces mucous production in airway
  4. Combination inhalers
    - a. Combination of above medications
- iii. Miscellaneous – oral medications and biologics
  1. Oral, IV, or IM (shot) corticosteroid
    - a. Systemic Anti-inflammatory
    - b. Used to quickly control asthma flare ups and exacerbations.
    - c. Used short term and normally given in ER, urgent care or doctor's office.
  2. Oral Leukotriene Modifiers
    - a. Blocks chemicals that cause inflammation
  3. Biologics
    - a. Medications that target cell and inflammation pathways
    - b. Used to manage long-term asthma control by reducing inflammation
    - c. Delivered by injection or infusion
    - d. Frequency varies based on medication

You can show them on the sushi model or the lung diagram what is happening in their body and how the medicine helps it.



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iv. For example; Show them the bronchospasm on the sushi model.

“This shows the muscles around your airway squeezing and tightening. When you have an asthma attack this is happening inside your body. Your reliever medication is what is used to make the muscles relax and feel better.”

v. You can use other examples or different parts of the model to explain.

You can change the language explaining the types of medications to fit the age of the child.

Reiterate that their medicines do different things for their bodies, so it is important to take them.

If a student does not have a controller medicine at home (some do not), you can still explain that there are different medicines that do different jobs.

Answer any questions that might arise.



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