

# THE EDUCATION OF PATIENTS WITH ASTHMA

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**Keywords:** asthma, education

**Abstract:** It is unanimously known that specific education for persons with asthma represents an important therapeutic method in this complex pathology management. The main purpose of the therapeutic education is to maintain the risk factors under strict observation to prevent asthma crises. Through therapeutic education, individuals will be involved in their own treatment by investing in their knowledge, self-attitude and customs development that will afford self-control, self-observation and the ability of taking decisions.

## INTRODUCTION

Due to its particularities, asthma has become a major problem in our country and worldwide; in the last years, the number of the new cases increasing constantly.(1)

Because of the expensive treatments for treating the outpatients and the inpatients suffering from asthma, in the last years, in Romania there have been organized frequent education programmes for preventing asthma. At the same time, programmes for tracking early asthma have been organized, workers in toxic environments being included in these programmes because of the substances founded at their working places, substances that can contribute to asthma manifestation.(1) In Romania, there has been used a specialized manual named GINA (Global Initiative for Asthma under World Health Organization guidance) which is being updated yearly and adapted for specific characteristics in our country.

## PURPOSE

The purpose of this study is to assess the asthma patient's knowledge regarding the risk factors and to inform patients about them, but also to offer information about the possible treatment. Also, the patient is being coached how to manage himself in the difficult situations caused by asthma presence.

## MATERIALS AND METHODS

The study was conducted within Sibiu Railway Hospital, Internal Medicine Department on 65 in-patients but also out-patients during the time interval 1<sup>st</sup> January – 31<sup>st</sup> December 2012. The study was based on a 7-question questionnaire with one answer choice, except for the question number 7, where patients could have chosen between one or multiple answers:

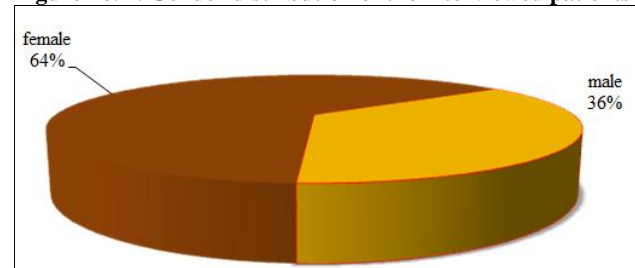
1. Do you smoke or have you smoked?
  - a. I am
  - b. I am not
  - c. I have
2. Do you know what asthma is/means?
  - a. Yes
  - b. No
  - c. A little
3. Do you recognize the onset signs of asthma?

- a. Yes
- b. No
4. Do you know which are the determining factors in the occurrence and aggravation of asthma?
  - a. Yes
  - b. No
5. Do you know any means/methods for preventing asthma occurrence?
  - a. Yes
  - b. No
6. Do you consider it is important for the patient suffering from asthma to take part in education programmes?
  - a. Yes
  - b. No
  - c. Maybe
7. Who do you consider to be suitable for providing information about asthma?
  - a. Family Doctor
  - b. Specialist Doctor
  - c. Mass- Media
  - d. Nurse

## RESULTS

For this study, a group of 65 people was selected from both rural and urban areas, the gender distribution being: female gender – 43 patients representing 64%, male gender – 24 patients, representing 36% (figure no. 1).

**Figure no. 1. Gender distribution of the interviewed patients**



The distribution of the interviewed patients according to their origin area is the following: urban – 41, representing 63 % and rural – 24, representing 37% (figure no. 2).

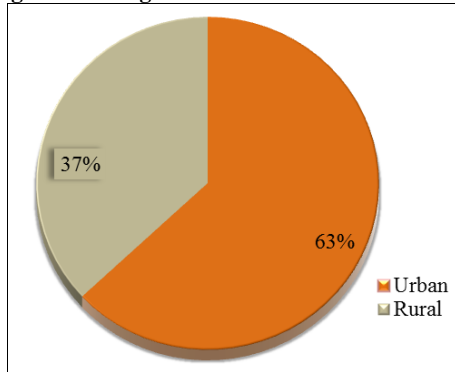
Regarding the question no. 1 “Do you smoke or Have you smoked?”, 11 persons representing 17% answered

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affirmatively, 45 persons representing 60% answered negatively and 9 persons representing 14 % answered they have smoked (table no. 1).

**Figure no. 2. Distribution of the interviewed patients according to their origin environment**



**Table no. 1. Answers to question no. 1**

| Answer         | Yes  | No   | I have | Total |
|----------------|------|------|--------|-------|
| Nr. of persons | 11   | 45   | 9      | 65    |
| Percentage     | 17 % | 69 % | 14 %   | 100 % |

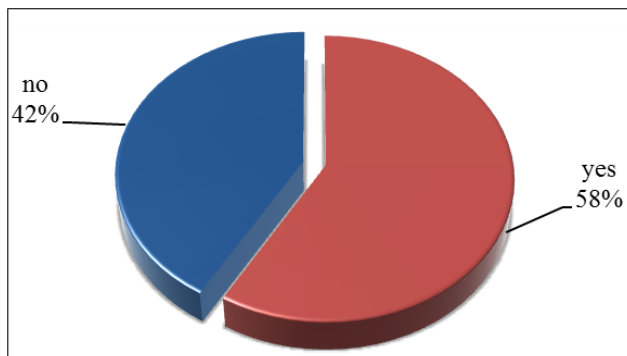
To question no. 2, “Do you know what asthma is?”, 41 patients, representing 63% answered affirmatively, 12 patients, representing 19 % answered negatively, 12 persons representing 18% answered they knew little about asthma (table no. 2).

**Table no. 2. Answers to question no. 2**

| Answer         | Yes  | No   | A little | Total |
|----------------|------|------|----------|-------|
| Nr. of persons | 41   | 12   | 12       | 65    |
| Percentage     | 63 % | 19 % | 18 %     | 100 % |

To question no. 3, “Do you recognise the onset signs of asthma?”, 38 persons representing 58% answered affirmatively and 25 persons representing 42% answered negatively (figure no. 3).

**Figure no. 3. Results of question no. 3**



To question no. 4 “Do you know which are the determining factors in the occurrence and aggravation of asthma?”, 38 persons representing 58% of the interviewed ones answered affirmatively and 27 persons representing 42% answered negatively (table no. 3).

**Table no. 3. Question no. 3 answers**

| Answers         | Yes  | No   | Total |
|-----------------|------|------|-------|
| Nr. of patients | 38   | 27   | 65    |
| Percentage      | 58 % | 42 % | 100 % |

To question no. 5, “Do you know any means/methods for preventing asthma’s occurrence?”, 41 persons representing

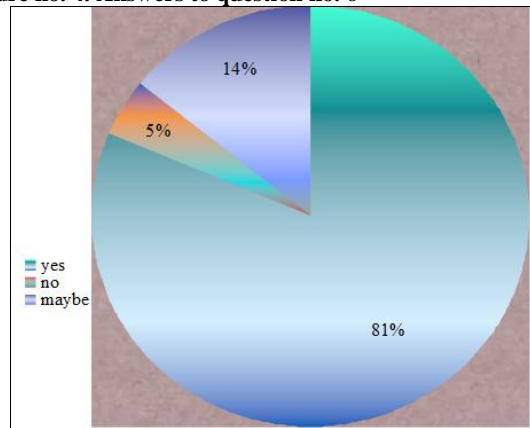
63% answered Yes and 24 persons representing 37% answered No (table no. 4).

**Table no. 4. Answers to question no. 5**

| Answers        | Yes  | No   | Total |
|----------------|------|------|-------|
| Nr. of persons | 41   | 24   | 65    |
| Percentage     | 63 % | 37 % | 100 % |

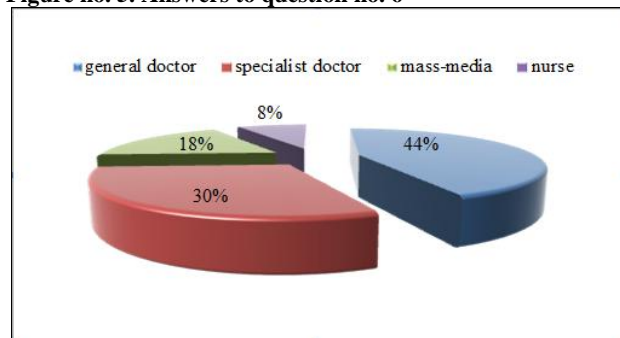
Regarding question no. 6, “Do you consider it is important for the patient suffering from asthma to take part in education programmes?”, 52 persons representing 81% answered affirmatively, 3 persons representing 5% answered negatively and 9 persons representing 14% answered “maybe” (figure no. 4).

**Figure no. 4. Answers to question no. 6**



To question no. 7, “Who do you consider to be suitable for providing information about asthma?”, the interviewed patients could have chosen between one or multiple answers. Thereby, they have chosen: family doctor – 49 (44%), specialist doctor – 34 (33%), mass-media – 20 (18%) and nurse – 9 (8%) (figure no. 5).

**Figure no. 5. Answers to question no. 6**



## DISCUSSIONS

The family doctor, the specialist doctor and the nurse know and can offer information and useful advice about this disease regarding risk factors, symptomatology, onset factors and those which intensify asthma, such as: animal allergen (house dust, cockroaches), vegetal allergens (pollen, mildew, rice, soya), food allergens (eggs, milk, cheeses, chocolate, strawberries), chemical allergens (nickel, cobalt, platinum, chrome, paintings, abluments, dyestuffs), drugs (antibiotics, yeasts).(2)

Smoking is one of the increasing factors in the occurrence of asthma in adults as well as in the children whose mothers are smoking.

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Air pollution (e.g.: the presence of sulphur dioxide in the air) can cause asthma.(3) Also, it is important for the patient diagnosed with asthma to take part in educational programmes, to learn how to administer the medication correctly, how to avoid the risk factors. They learn how to make the difference between medicines that control symptoms and those which improve the symptoms of asthma. They also learn how to monitor their health condition based on symptomatology, using the peak expiratory flow (PEF) if possible, how to identify suggestive signs that show the asthma aggravation, how to take the right measures when needed and to look for nursing care.(4)

After visiting the pneumologist, the treatment plan is to be indicated, such as inhaled medicines – adverse reactions are decreasing, or oral medicines – having the advantage of higher compliance.(5) In order to obtain positive treatment results, it is necessary for the patient to: administer correctly the inhaled medication; administer correctly the oral medicines (dose/day, rhythm of administration, time schedule) and to observe the indications provided by the pneumologist. All this information will be notified in a newsletter.(6)

### CONCLUSIONS

- Because of its particularities, in the last period of time, it has been given a great importance to asthma in our country and worldwide, as well: the increasing number of asthma cases, the expensive treatment which has to be paid on one side, by the patient and on the other side, by the institution providing the healthcare;
- The growth of new asthma cases could be reduced by involving the mass-media and the medical staff in offering information and also by involving the persons suffering from asthma by observing the provided information;
- According to this study, out of the interviewed patients, 45% of them said they do not smoke, emphasizing their interest in health maintenance;
- Regarding the recognition of the asthma signs, the interviewed persons answered as follows: 58% - affirmatively, 42% - negatively, showing increased interest in asthma signs recognition;
- Asthma will continue to be a serious disease causing the appearance of severe forms and frequent exacerbation, which will need hospitalization, involving expensive financial efforts paid on one side, by the patient and on the other side, by the hospital.

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