



ATHLETES & ASTHMA

Athletes with shortness of breath who don't improve with asthma treatment could be misdiagnosed and over-medicated.



SEE ONE OF OUR ASTHMA SPECIALISTS IF

- More than two days a week of symptoms
- On a large number or large doses of medicine
- Admitted to hospital for breathing problems
- Not responding to asthma therapy in the way you think you should



VISIT OUR PEDIATRIC EXERCISE TOLERANCE CENTER

It's the only center of its kind in Colorado.

We take special interest in diagnosing and treating patients who have difficulty breathing during exercise. Our pediatric breathing and exercise specialists have the tools and expertise to get you breathing better.



COMPETITIVE ATHLETES

Asthma is the most commonly diagnosed chronic medical condition in competitive athletes.

20–25% of athletes in certain sports experience shortness of breath.

These athletes could be getting the wrong treatment.



STANDARD ASTHMA TREATMENT

These medications relax the airway muscles, reduce inflammation or prevent the immune system from having an allergic reaction.

- Beta agonists
- Inhaled steroids
- Inhaled anticholinergics
- Inhaled anti-mast cell agents
- Leukotriene modifiers
- Oral steroids
- Anti-IgE
- Theophylline

TOOL FOR A DIAGNOSIS

A test called continuous laryngoscopy can diagnose vocal cord dysfunction (VCD), whose symptoms initially can look like asthma.

- Performed during exercise to watch how vocal cords behave while the symptoms are happening in real time
- An important test — symptoms can stop as soon as exercise stops; you can't see findings from this test in any non-invasive procedure or exam



DEVELOP A TREATMENT PLAN

- Speech therapy to keep vocal cords open during exercise
- Biofeedback



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