



Speaking from Experience Asthma in Adults

Transcript for chapter 7 of 12: Medications

Arthur: I take medication daily - preventative medication, morning and night.

John: I take Becotide every day, and I take Ventolin, whenever I get wheezy. If I'm going to go out and play footy, I'll take a blast of Ventolin.

Arthur: If I wake in the morning and I've been coughing, I still continue with my preventative medication, and then I take my reliever medication.

Glenda: I take Flixotide, which is a preventer, and I take Bricanyl, which is... no I take Oxis mostly, which is a long-term reliever. I only take it once every twelve hours. Then I have Bricanyl, which is the same as ventolin, really, which I can take if I need to during the day.

De: I always have Ventolin in my handbag. I take Oxis, I take Becotide.

Glenda: I used to be on the pump a lot, but nowadays we don't use the pumps, which you probably came across with the children's asthma [*Asthma in Childhood topic*]. They use the spacer instead, which is much easier.

John: I remember that there was a row when they introduced me to this course of Cortisone. The doctor said, "Well, we could put him on a course of Cortisone." I remember sitting there in the surgery. And he said, "But I don't want to do that until it's absolutely an emergency." And I remember my father getting quite angry with him and saying, "This is an emergency." And me thinking, "Oh my god, I'm an emergency."

Margaret and Michael: I questioned the safety of it, very strongly, with my first pregnancy, especially with the Cortisones. I worried about the effect that it would have on the baby. But I was assured very strongly, and with lots of data to back up the fact that the Cortisones didn't cross the placenta and that the baby would be quite safe. And because of the fact that the asthma can get worse during pregnancy, it was really important that I did take them - probably more important than normally, so that I was at less risk.

De: No, I don't think about the side-effects at all, any more than I think about the side-effects of contraceptives or antibiotics if I've got the flu, or anything. I've been on them for forty-nine years. It's a bit late to start worrying about the side-effects now!

Leisl: My weight was exceptional, I was 110 kilograms and I was starting to have major side-effects from the drugs, like with Prednisolone my face puffs up. You feel very uncomfortable and sore. And I had been to numerous doctors and they all said to me, "Sorry, we've run out of ideas."

De: I also have a continuing prescription for Prednisolone.

Leisl: I got off Prednisolone this year, having been on it for seven years, at various doses, some which were extremely high. It took them a while to work out that I have a disease



called Avascular Necrosis, which has been brought on by mammoth doses of Prednisolone. So having to deal with that... I went off and I had big surgery on my hips.

Glenda: I had a friend once say to me, "I wish you wouldn't take that medication, Glenda. It's probably bad for your general health." And I remember for once getting a bit cross and looking at her and saying, "Well, alright Jenny, I won't take it. And when I'm lying dead in my grave I'll think 'I'm glad I didn't take that medication, it might've shortened my life.'" You know, people don't understand.

Margaret and Michael: Even the standard medications that you take, I mean, you've gone through a lot of change over the last, say, ten to fifteen years. It's not as though Marg is continually taking the same thing. As you said, the specialist looks at a range of medications as new things come on.

Arthur: Your condition can vary from time to time. It may be necessary to vary medications, either increase it or decrease it.

Margaret and Michael: My doctor especially is great at making sure he keeps adjusting the medication and going down to lower doses when he knows that I'm feeling a bit better. And adjusting it to suit the times.

Margaret and Michael: You've tried to question what the doctors are saying. And we've done that for you and with the children. Just so that you know the advice you are getting is right. At the end of the day though, we're not medication specialists. You've got to rely on what the doctors say. But you make sure that you know a bit more about it.

John: It's fine to say as an asthmatic, I'm not wheezing today, I'll skip the Becotide - you're in a hurry, you've cleaned your teeth, you're just rushing out the door, you're late already... Well that's not good enough. If you do that, you're going to get ill. That's all there is to it. It's not a big deal, it's not a big crisis, but you've got to do it.

Glenda: No, I don't think the medication's a nuisance. I just think, thank god it's here.