Resources & Guidance

Resources
The following information from the Center for Disease Control (CDC) has been reviewed by Children's Minnesota Asthma Clinic and is a resource for Children's Minnesota patients with asthma who have specific questions regarding COVID-19 (also known as novel coronavirus).

- Please refer to the CDC website for the most up-to-date COVID-19 updates.
- Please refer to the Children’s Minnesota website for more information on COVID-19.
- Please refer to the Children’s Minnesota website for more information on asthma, asthma medications and asthma triggers.

Risk of Getting COVID-19
People with asthma may be at higher risk of getting very sick from COVID-19. COVID-19 can affect your respiratory tract (nose, throat, lungs), cause an asthma attack, and possibly lead to pneumonia and acute respiratory disease.

Treatment
There is currently no specific treatment for or vaccine to prevent COVID-19. It is very important to keep your asthma under good control by taking your asthma medication and avoid being exposed to this virus. Recommended safety precautions are the same as for flu, such as frequent hand washing and covering coughs and sneezes with a tissue or your elbow. The CDC does not recommend the use of face masks by people who are not infected.

Prepare for COVID-19
- Take everyday precautions to keep space between yourself and others.
- When you go out in public, keep away from others who are sick.
- Clean your hands often by washing with soap and water or using an alcohol-based hand sanitizer.
- Avoid crowds and people who are sick.
- Avoid cruise travel and non-essential air travel.
During a COVID-19 outbreak in your community, stay home as much as possible to further reduce your risk of being exposed.
- If someone in your home is sick, have them stay away from the rest of the household to reduce the risk of spreading the virus in your home.
- Avoid sharing personal household items such as cups and towels.

**Follow your Asthma Action Plan**
- Take your asthma medication exactly as prescribed.
- It is very important to continue on your daily or controller medication if you are on one.
- Have adequate refills of controller and rescue medications for at least 2-3 months.
- Have decadron or prednisone at home for an asthma flare up.
- Make sure that you have 30 days of non-prescription medications and supplies on hand too in case you need to stay home for a long time.

**Know how to use your inhaler**
Consider use of metered dose inhalers at home to minimize aerosolized particles to protect those at risk (elderly and those with underlying conditions).
- [Asthma inhaler (video)]
- [Asthma inhaler - Spanish (video)]

**Avoid your asthma triggers**
- Do not smoke or vape
- No smoking or vaping in the home
- Clean and disinfect frequently touched surfaces like tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks daily to protect yourself against COVID-19.
- Avoid disinfectants that can cause an asthma attack
- Take your allergy medications as prescribed

If you have symptoms contact your health care provider before going in to ask about your symptoms.
How Can I Tell the Difference Between the Coronavirus, the Flu, a Cold or Seasonal Allergies?

There are some symptoms that are similar between these respiratory illnesses. The following chart from the Asthma and Allergy Foundation of America, World Health Organization and Centers for Disease Control can help you figure out if you may be feeling symptoms of allergies or a respiratory illness like COVID-19. If you have a fever and a cough, call your clinic.

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Coronavirus* (COVID-19)</th>
<th>Cold</th>
<th>Flu</th>
<th>Seasonal Allergies</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Symptoms range from mild to severe</td>
<td>Initial onset of symptoms</td>
<td>Initial onset of symptoms</td>
<td>Initial onset of symptoms</td>
</tr>
<tr>
<td>Length of symptoms</td>
<td>7-25 days</td>
<td>Less than 14 days</td>
<td>7-14 days</td>
<td>Several weeks</td>
</tr>
<tr>
<td>Cough</td>
<td>Common (usually dry)</td>
<td>Common (mild)</td>
<td>Common (usually dry)</td>
<td>Rare (usually dry unless it triggers asthma)</td>
</tr>
<tr>
<td>Shortness of breath</td>
<td>Sometimes</td>
<td>No**</td>
<td>No**</td>
<td>No**</td>
</tr>
<tr>
<td>Sneezing</td>
<td>No</td>
<td>Common</td>
<td>No</td>
<td>Common</td>
</tr>
<tr>
<td>Runny or stuffy nose</td>
<td>Rare</td>
<td>Common</td>
<td>Sometimes</td>
<td>Common</td>
</tr>
<tr>
<td>Sore throat</td>
<td>Sometimes</td>
<td>Common</td>
<td>Sometimes</td>
<td>Sometimes (usually mild)</td>
</tr>
<tr>
<td>Fever</td>
<td>Common</td>
<td>Short fever period</td>
<td>Common</td>
<td>No</td>
</tr>
<tr>
<td>Feeling tired</td>
<td>Sometimes</td>
<td>Sometimes</td>
<td>Common</td>
<td>Sometimes</td>
</tr>
<tr>
<td>Headaches</td>
<td>Sometimes</td>
<td>Rare</td>
<td>Common</td>
<td>Sometimes (related to sinus pain)</td>
</tr>
<tr>
<td>Body aches and pains</td>
<td>Sometimes</td>
<td>Common</td>
<td>Common</td>
<td>No</td>
</tr>
<tr>
<td>Diarrhea</td>
<td>Rare</td>
<td>No</td>
<td>Sometimes for children</td>
<td>No</td>
</tr>
</tbody>
</table>

*Information is still evolving. **Allergies, colds and flu can all trigger asthma, which can lead to shortness of breath. COVID-19 is the only one associated with shortness of breath on its own. Sources: Asthma and Allergy Foundation of America, World Health Organization, Centers for Disease Control and Prevention.

Disclaimer: This guideline is designed for general use with most patients; each clinician should use their own independent judgement to meet the needs of each individual patient. This guideline is not a substitute for professional medical advice, diagnosis or treatment.