

Status Asthmaticus

Status asthmaticus is a potentially fatal episode of asthma.

What Is Status Asthmaticus? An acute, severe asthma attack that doesn't respond to usual use of inhaled bronchodilators and is associated with symptoms of potential respiratory failure is labeled status asthmaticus. Status asthmaticus is life-threatening and requires immediate medical attention. It is important to be aware of status asthmaticus and prevent it with early intervention. **What Are The Symptoms of Status Asthmaticus?** The symptoms of status asthmaticus may include persistent shortness of breath and the inability to speak in full sentences. You may have breathlessness even while lying down in bed. Your chest may feel closed and your lips may have a bluish tint. In addition, you may feel agitation, confusion, or an inability to concentrate. You may hunch your shoulders, sit or stand up to breathe more easily, and strain your abdominal and neck muscles. These are signs of an impending respiratory system failure. You may not have more wheezing and coughing with status asthmaticus. In fact, the presence of wheezing or coughing is not a reliable standard for judging the severity of an asthma attack. Very severe asthma attacks such as status asthmaticus may affect breathing airways so much that the lack of air in and out of your lungs does not cause a wheezing sound or coughing. **Are There Warning Signs of Status Asthmaticus?** Status asthmaticus often occurs with few warning signs. It can happen quickly and progress rapidly to asphyxiation. Some findings show that patients with status asthmaticus have poor control of allergens or asthma triggers in the home and/or workplace. These people may also have infrequent use of a peak flow monitor and inhaled corticosteroids. Inhaled steroids are potent anti-inflammatory drugs that are highly effective in reducing inflammation associated with asthma. **Does Wheezing Indicate Status Asthmaticus?** Wheezing does not necessarily indicate asthma. Wheezing can also be a sign of other health conditions, such as respiratory infection, heart failure, and other serious problems. **What Causes Status Asthmaticus?** Whereas the causes of status asthmaticus are unknown, those people who have status asthmaticus may have a history of infrequent health care, which may result in poor treatment of asthma. People with status asthmaticus may also have a history of intubation or hospitalization for asthma. Also, those who have poor mental health or psychosocial stressors are at a higher risk for status asthmaticus. That's why ongoing monitoring of lung function using a peak flow meter is necessary in anyone who has persistent asthma. **How Is Status Asthmaticus Diagnosed?** To diagnose a severe asthma attack as status asthmaticus, your doctor will notice physical findings such as your consciousness, fatigue, and the use of accessory muscles of breathing. Your doctor will notice your respiration rate, wheezing during both inhalation and exhalation, and your pulse rate. Some other tests may include peak expiratory flow and oxygen saturation, among others. Other physical symptoms will be noticed with the chest, mouth, pharynx, and upper airway. **How Is Status Asthmaticus Treated?** Status asthmaticus may not respond quickly to routine treatment with asthma inhalers. Continuous use of an asthma nebulizer and injections of medications such as epinephrine and prednisone for asthma are often necessary. Other therapies may include terbutaline injections, magnesium sulfate (induces smooth muscle relaxation of the airways), and leukotriene inhibitors, which are anti-inflammatory drugs. During an episode of status asthmaticus that does not respond to asthma medications, a mechanical ventilator may be needed to assist the lungs and respiratory muscles. A facemask is applied or a breathing tube is inserted in the nose or mouth for this asthma treatment. These breathing aids are temporary and are removed once the attack has subsided and the lungs have recovered sufficiently to resume the work of breathing on their own. A short hospital stay in an intensive care unit may be necessary with status asthmaticus. To avoid hospitalization with a severe asthma attack, it is imperative to begin immediate early treatment at the first sign of symptoms either at home or in your doctor's office. If you have asthma, it's also important to see your doctor frequently to monitor your lung function and to assess your asthma medications. Also, using your peak flow meter several times daily can help you monitor your breathing, so you can start treatment immediately if you notice a lower reading, even if you may feel fine. **How Does Status Asthmaticus Differ From an Acute Asthma Attack?** An acute, or sudden, asthma attack is usually caused by an exposure to allergens or an upper respiratory tract infection. The severity of the asthma attack depends on how well your underlying asthma is controlled (reflecting how well the airway inflammation is being controlled). An acute asthma attack is potentially life-threatening because it may continue despite the use of your usual quick-relief medications (inhaled bronchodilators). When the acute asthma attack is unresponsive to treatment with an asthma inhaler (albuterol), this may then be status asthmaticus, where you'd need immediate medical attention and treatment. Asthma attacks do not stop on their own without asthma treatment. If you ignore the early warning signs of an asthma attack, you put yourself at risk of developing status asthmaticus, which may then need hospitalization for treatment.

If you have an asthma attack that does not respond to your usual bronchodilator inhaler, this is considered to be a medical emergency. These severe attacks require immediate emergency care.