Use of 'as required' as opposed to 'fixed high dose' weaning of Salbutamol following an acute episode of wheeze in children.



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Introduction and objectives:

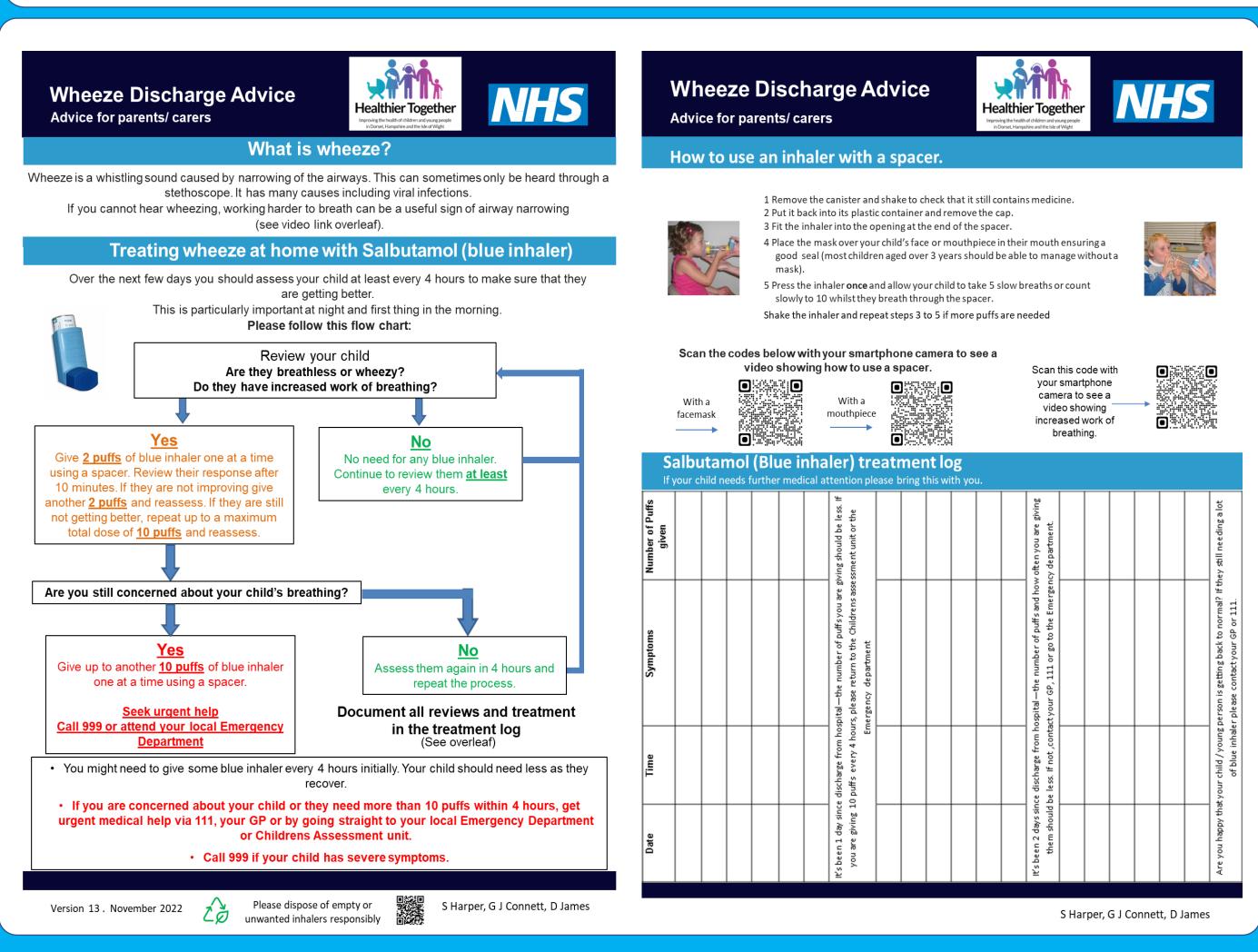
Patients discharged after an episode of wheeze were often given variable fixed high dose Salbutamol weaning plans which is not an evidence based treatment. Advice given was not standardised and was often decided by the professional making a correct diagnosis of viral Induced wheeze or Asthma. There is evidence to suggest that 'regular SABA therapy may potentially mask deterioration and could delay care givers seeking medical advice' Martin et al 2022.

The aim: To create a single easy to use document for use following an episode of wheeze, when discharged with a salbutamol inhaler, despite their diagnosis, with safety netting advice included.

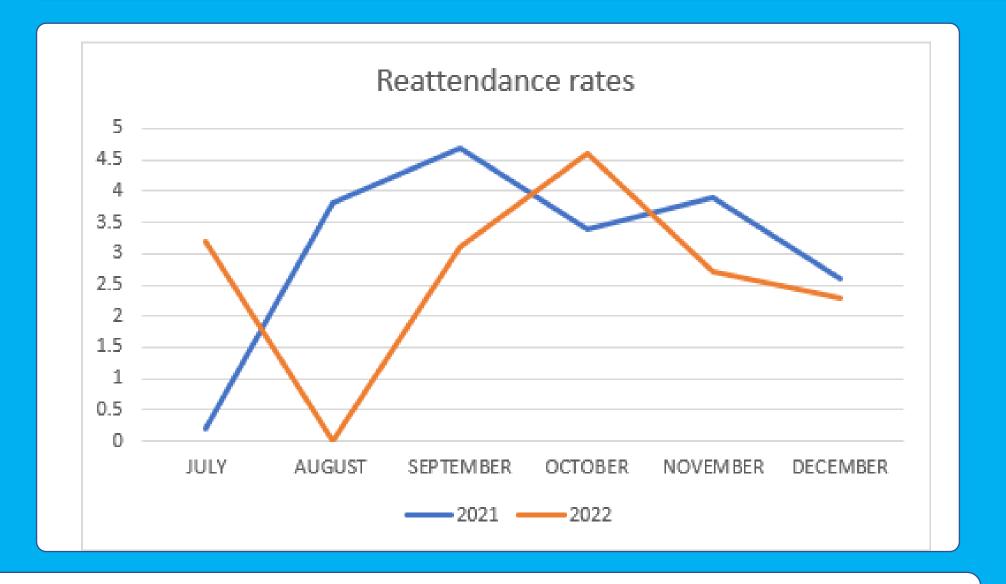
Method: Professional and parent/carer forums held to create a draft document. This was subsequently trialled on 16 patients. Due to the success in this small trial it was rolled out to all patients being discharged from UHS following an episode of wheeze.

103 patients received a follow up telephone call after discharge.

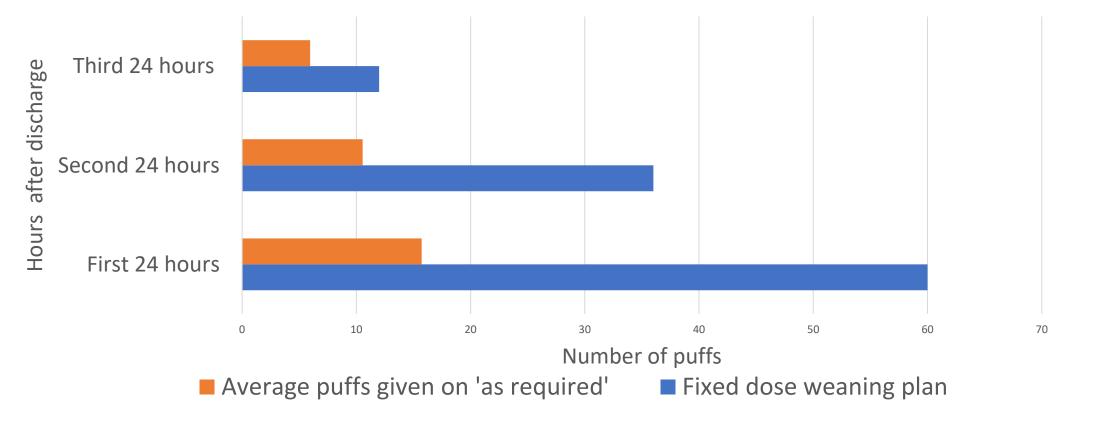
Retrospective data of admissions to ED coded as Viral induced wheeze or Asthma. 81 with presumed viral induced wheeze, 22 with a diagnosis of Asthma aged 0-16.



Results: Patients discharged using an as required plan used markedly less Salbutamol on average 16 puffs in the first 24 hours, 10 puffs in the second 24 hours and 6 puffs in the third 24 hours. 1.9% (2) patients reattended the emergency department for the current illness. 7.7% (8) visited the GP for ongoing symptoms. All parents/ carers found the flow chart easy to follow. 12.6 % (13) were still using salbutamol after day 3 of discharge. 23% (24) of parents/carers found that the table was useful to record the doses given. We evaluated reattendance data for the year prior to introducing as required salbutamol and were pleased to see no increase in the rates.



Conclusion: High fixed dose Salbutamol regimes are not required in the discharge of patients with wheeze. The amount of Salbutamol given following parent/carer review allowed for reduced dosing while maintaining patient safety. Giving consistent advice ensures patients are safety netted appropriately and avoids patient or parent/ carer confusion.



Parent/carer feedback

"Liked the flexibility of it and that you actually pay attention to the child"

"Found the table useful to record the doses."

"Flow chart was easy to flow. All made sense."

"Recorded the doses on my phone. Found the flow chart easy to follow. Thought it was good that you didn't have to give 10 puffs."