Guidance for pool users who have asthma

Why is swimming good for me?

Regular swimming has a wide range of beneficial health effects, such as improved cardio-respiratory fitness, muscle strength and flexibility. Swimming also has positive psychological effects by relieving stress and tension. Virtually everyone can benefit from these effects, as long as some basic precautions are taken when attending the pool. Here are a few tips especially relevant to those who have asthma.

What is asthma?

Asthma is a very common; typically it causes a cough, a wheeze, a tight chest and shortness of breath. These symptoms are often brought on by irritating fumes, exercise and cold air. Having a cold or other respiratory infection usually makes asthma worse and the effects may continue for some weeks. In almost all cases, however, asthma is easily manageable with simple treatments.

Is the swimming pool environment safe?

There is no reason why almost all people with asthma should not go swimming. Based upon current scientific knowledge, there is no strong evidence that recreational swimming can cause asthma or make your asthma worse. In fact, many people with asthma find that the warm humid atmospheres in swimming pools can make their breathing a little more comfortable.

What about the chlorine?

Depending upon the condition of the water in your local pool, irritation to the eyes, nose and lungs may occur. The condition of the water is affected by factors such as the control of the pH of the water and the disinfectant (normally chlorine), the hygiene habits of bathers and the standard of the water treatment plant and its operation and maintenance. Since the hygiene of bathers is critical in maintaining good water conditions, always use the toilets and shower with soap, rinsing well, to ensure that your body is as clean as possible before going into the water.

If you have asthma, ensuring that it is well-controlled is integral to an enjoyable swim. Inappropriate water treatment and chlorine by-products (such as chloramines) can sometimes heighten lung irritation and increase the risk of an asthma attack. Generally, you should be ‘ruled by your senses’. If there are strong and unpleasant smells and after about 3 minutes of being in the pool area, you find them obnoxious (known as the ‘nose test’), you should make the pool management aware of this and not spend a long period of time in the water.
If you find that swimming makes your asthma worse then it may be a sign that you need better treatment; you should discuss this with your family or hospital doctor. Even if your treatment is correct, you may find it helpful to take two puffs of your reliever inhaler 10-15min before getting in the water. And if you are having a bad time with your asthma or if you have a very bad cold, it is advisable not to go swimming until you have fully recovered.

What if I train in the pool every day?

If we take the Olympic Games in Beijing as an example, the use of some asthma inhalers was highest among swimmers, synchronized swimmers and triathletes. These swimmers spend more time in the water than anyone else and the long training hours mean that their lungs are exposed to larger doses of chloramines. Competitive swimmers who have asthma should therefore take a few extra-precautions:

1. always start your session with a proper warm-up (as this usually reduces the breathing discomfort and the risk of a severe asthma attack)

2. always carry a reliever inhaler with you, and

3. always talk to your family or hospital doctor if you feel your breathing has deteriorated and/or your symptoms become more frequent. As a general rule, if you start using your reliever inhaler more than 5 times a week, it might be time for a medical check-up.

Remember: numerous successful elite swimmers have asthma. As long as your asthma is under good control, it won’t hinder your sport performance.

What if I get an asthma attack in the pool?

If you have an asthma attack while you are swimming, get out of the pool, rest and take your reliever inhaler immediately. If the situation fails to improve quickly, then make the pool lifeguard or nearest members of staff aware of the situation and ask them to assist.

What if I want to take my baby/babies to the pool?

Our advice to parents/guardians with babies and very young children is that you should not take your baby, who will have delicate lungs, into a pool which fails the ‘nose test’. Common sense and the smell of a pool should determine this. One option to consider is that young children with asthma or allergies in the family should be introduced to the water from the age of 3-4 years rather than when they are very young.
Where to read further

The Institute of Sport and Recreation Management gives guidance to the pool industry at www.isrm.co.uk where you should read ISRM Information Ref- 348: 01/09 which provides a synopsis of current research into swimming and asthma.

The Pool Water Advisory Treatment Group also gives guidance to the pool industry, in particular how to administer non-irritant water and air to the pool users. Their website can be found at www.pwtag.org.

The Committee on the Medical Effects of Air Pollutants is a Department of Health Committee that advises on all aspects of air pollutants. See COMEAP’s statement on ‘Asthma and exposure to chlorine and other associated reaction products at swimming pools’ at http://www.advisorybodies.doh.gov.uk/COMEAP. You will then need to click on ‘Statements and reports’ in the left hand column and the statement will then be downloadable.

Where to go for further advice

The first point of contact should always be your own doctor.

For questions relating to swimming: Customer Service Department, Amateur Swimming Association, Harold Fern House, Derby Square, Loughborough, Leics., LE11 0AL, Tel, 01509 618700

For general consumer questions on asthma: Asthma UK, Summit House, 70 Wilson Street, London, EC4A 2DB, Tel, 020 7786 4900, E-mail, info@asthma.org.uk

Members of asa Advisory Panel on Swimming and Asthma

Peter Burney MA MD FRCP FFPH FMedSci, Professor of Respiratory Epidemiology and Public Health, Imperial College London
Paul Cullinan MD, FRCP, Professor in Occupational and Environmental Respiratory Disease, National Heart & Lung Institute
Andy Elphick, BSc, Chemist and Technical Advisor to the Pool Water Treatment Advisory Group
Pascale Kippelen, PhD, Exercise Physiologist, School of Sport and Education, Brunel University
Dr Phil Penny, Occupational Health and Safety Physician and member of the ASA Medical Committee