



Exercise and Sport in School

Exercise has many benefits to children with CF and is an important part of the daily treatment routine. It can help clear mucus in the airways and lungs, build strength and improve cardiovascular fitness.

How much exercise a child is able to participate in will depend on their level of health, how they feel from day to day and the intensity of the exercise.

When going to school, children with CF should have a health care plan and any medical needs or risks associated with exercise should be detailed in this. It is important that sports teachers are familiar with the child's medical plan.



Medication

Before exercising, some children with CF may need to take Ventolin or other medications. If you have a child with CF in your class, they may need to be reminded to take their medication. They may also need to carry their medication with them during sport.

Coughing

During exercise, children with CF may cough, wheeze or be breathless, even when they are well. Coughing is encouraged to help keep their lungs clear and is not contagious to others.

They may cough up mucus. This is a normal part of having CF. Some children may have streaks of old blood



in their mucus, which is usually not cause for concern however should be communicated with parents. If a child coughs up fresh blood they should stop exercise and parents should be notified immediately. Coughing up large quantities of blood is rare, but is serious and requires urgent medical attention.

Hydration

People with CF are more susceptible to dehydration due to excess salt lost in their sweat; therefore, it is important for them to drink plenty of water.

Access to water during exercise is vital and they should be encouraged to drink regularly. Salt replacement tablets and sports drinks may be required in warmer weather.

Continence

Some children with CF have weakened pelvic floor muscles due to excessive coughing and constipation and may experience incontinence with exercise. Incontinence is an accidental leakage of urine, faeces or wind. Incontinence can be quite embarrassing and may lead to reduced participation in sport. Allowing toilet breaks when requested is important and may reduce embarrassment.

Digestion

Children with CF may need to go to the toilet more often and may spend longer in the toilet than other children as a result of general CF digestion issues. It is important to consider access to toilets during sport.

PICCs and Ports

Some children with CF may come to school with a PICC line. A PICC line is a long flexible tube inserted into the child's arm, leg or neck and is used to administer IV (intravenous) medicine at home. The line is sealed and covered with a bandage which enables them to continue on with their daily life, however during this time they should not lift heavy objects, swim, play contact sports or do repetitive movements with the arm. This will obviously inhibit their participation in many sports.

A port (infusaport) is a more permanent device inserted under the skin of the chest and is used to allow direct access to the blood stream for delivery of medication. If the port is in use (needled) they should avoid swimming, contact sport and upper body weighted exercises. At other times, the port won't be needled, and the child can participate as normal.

Germs

Colds and viruses can have more serious consequences for people with CF, leading to possible lung infections. Following good hand hygiene and ensuring all sports and gym equipment is regularly cleaned is the best way to minimise the spread of germs.

School Education

If further information and support is needed, CFWA can provide students, teachers and/or other staff with CF education. Contact education@cfwa.org.au

Useful Resources

- CFSmart- Resources for Teachers
- CFFit- Information for Personal Trainers & Coaches
- CFWA Factsheets

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