

Dec 2007



Upcoming Events:

- * Jan 23-24 Freedom From Smoking Facilitator Training, Plymouth Meeting
- * Jan 17 Open Airways for Schools training, Scotch Plains, NJ
- * Feb 23 Asthma Awareness Day, Wilmington, DE

Know of any upcoming events? Send them to us! Contact Sara at SLewis@lunginfo.org

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Partners Sharing

Featured Partner...

Hospital & Health System of Pennsylvania

Since 1921 The Hospital & Health System of Pennsylvania has been representing nearly 250 Pennsylvania acute and specialty care, primary care, sub acute care, long-term care, home health and hospice providers. HAP provides services to Pennsylvania's hospitals and health systems to support them in the delivery of safe efficient quality health care to patients.

HAP supports the providers who care for asthma patients and those who receive care. It does this in part through advocating for public policy that supports:

- * Access to appropriate and necessary health care for all individuals through all stages of their lives regardless of financial status, race, ethnicity, or geographic location.
- * Access to health care that extends beyond acute care to services provided along the full continuum of care.

*The role individuals play in improving and maintaining their own health status and the right individuals have to make informed decisions regarding their health care.

*Advancing the health of communities and the health status of residents of those communities.

HAP also provides education, information, and opportunities for networking and shar-

ing of best practices.

HAP believes that individuals with chronic illness, asthma and other illnesses have the best opportunity to maintain optimal health status through commitment of the individual patient to support their own wellness through:

- *Informed choices
- *Having access to a "medical home" where care can be managed to prevent crisis, rather than care provided solely in response to crisis
- *Finance and public policy that supports care management, and not just medical emergencies
- *Health care that is coordinated across the continuum of care

For more information or specific questions about HAP, please contact Cheri Rinehart at 717 -561-5325 or [at crinehart@haponline.org](mailto:crinehart@haponline.org).

Steps to avoid winter weather-related asthma triggers:

- * **Wear a scarf or mask over your nose and mouth, to warm the air before it enters the lungs.**
- * **Exercise indoors on days when the outside air is cold and dry.**
- * **If you experience exercise-induced asthma, use medication prior to exercise in accordance with your health care provider's recommendations.**
- * **Keep your quick-relief rescue inhaler close by and in a warm place.**
- * **Avoid or limit outdoor exposure on especially cold days.**



The National Environmental Leadership Award

Need CME credits for FREE? Try visiting this website: <http://www.rethinkasthma.com/home.html>

National Environmental Leadership Award

The National Environmental Leadership Award is presented to health plans and providers with exemplary asthma management programs that have shown exceptional leadership in improving asthma through the management of environmental asthma triggers. Recipients of the National Environmental Leadership Award are selected through a highly competitive process and are judged on established criteria. Winners are honored at EPA's **Communities in Action for Asthma-Friendly Environments** National Asthma Forum from **May 1-2, 2008, in Washington, D.C.** and these programs' achievements will be highlighted throughout the year. Learn more

about the National Asthma Forum at www.epaasthmaforum.com.

Visit www.asthmaawards.info to learn more about the award and apply. The deadline for submitting an application for the 2008 National Environmental Leadership Award is **February 1, 2008**.

For a year-round resource and mentoring network to support your asthma management program, visit and join the Online Community Network at www.asthmacommunitynetwork.org.

EPA STAR Grant RFA: Health Effects of Near-Roadway Exposures to Air Pollution

Open Date: 11/13/2007 - Close Date: 01/15/2008

Summary: The U.S. Environmental Protection Agency (EPA), as part of its Science to Achieve Results (STAR) program, is seeking initial proposals to study the health effects of near-roadway exposures to air pollution. The objectives of the award(s) to be made under this solicitation are to improve understanding of the type and severity of health outcomes associated with near-road exposures and the factors associated with roadways that may impact public health.

To respond to this Request for Initial Proposals (RFIP), applicants will submit: a re-

search proposal (not to exceed five pages); budget summary; 424 form and Key Contacts form; and two-page resumes of investigators (see Section IV for further information). EPA will review the initial proposals and the submitters of the highest-ranked proposals will be asked to submit full applications. After review of the full applications, one application will be selected for funding as a cooperative agreement.

URL: http://es.epa.gov/ncer/rfa/2008/2008_star_healtheffects.html

Get Those Flu Shots! It's not too late. Asthmatics are considered high-risk for the flu. To find more information or to use the free Flu Clinic Locator please visit www.facesofinfluenza.org

By the way: You can also find a picture of our very own PAP member Dr. Tyra Bryant-Stephens on the website!!

For your own copy of the 2006 Pennsylvania Asthma Action Plan please visit: www.health.state.pa.us

The New HFA Inhaler

Whether you are a provider, or a consumer of asthma medications you will soon be noticing a few changes on new albuterol inhalers. The letters "HFA" may now be printed behind the name of your medication.

The medication in the inhaler has not changed. In the past, a substance called chlorofluoroalkanes (CFCs) has been used to push the albuterol out of the inhaler. The Food and Drug Administration (FDA) has now decided that a different substance, hydrofluoroalkane (HFA), should be used. This change was made in an effort to protect the environment, not because it was bad for

patients.

You may notice some differences in your HFA inhaler:

- * The mist may be softer, warmer and have a different taste
- * Expiration dates are shorter
- * Shaking or "floating: the inhaler to check emptiness will not work
- * May need to be cared for differently

One area of concern for patients and providers is the increased cost of the medication. Two reasons why an increase is being felt are: (1) these new inhalers are not available in generic form, and (2) these inhalers expire more

quickly than the CFC inhalers.

Other tips for getting the most out of your HFA inhaler include:

- * Always use your inhaler as prescribed
- * Properly care for your inhaler by following the directions that come with your inhaler
- * Keep track of the number of doses used in your inhaler

If you have any questions about your new HFA inhaler, ask your provider or pharmacist.

For more information on the new HFA inhalers go to: <http://www.aafa.org/display.cfm?id=7&sub=92&cont=554>

Free Inhaled Device Handouts - Spanish Version

The American College of CHEST Physicians and The CHEST Foundation are pleased to offer free educational handouts in Spanish, demonstrating the proper use of inhaled aerosol devices. Packaged as a set of 17 laminated sheets, these handouts can be copied and given to patients. The printing and distribution of these materials have been made possible through a generous contribution from Bart Chernow, MD, Master FCCP and his wife, Mrs. Peggy Chernow.

Concerned over studies demonstrating that between 20% and 68% of patients prescribed aerosol devices did not use them correctly enough to benefit from their use, several of the ACCP Networks collaborated to produce these handouts. Also available in English and Spanish on the ACCP Web site at www.chestnet.org/patients/guides/inhaledDevices.php, the handouts can be downloaded and printed by health-care providers and patients.

It is our hope that these materials will help your patients breathe easier. To receive a free packet of the Spanish version handouts, e-mail your request to Spanishmaterials@chestnet.org with your complete mailing address. A limited supply is available.



Center for Disease Control has a 12-page guidance document titled *Strategies for Addressing Asthma within a Coordinated School Health Program*. It was initially published in 2002 and re-published with updated resources last year. You can find it at: www.cdc.gov/healthyyouth/asthma/strategies.htm. Call 1-800-CDC-INFO or email CDC-INFO@cdc.gov to order hard copies at no cost.

New Drug Reduces Childhood Asthma Attacks

02.19.07

Young children with attacks of sporadic, recurring asthma who were treated with the prescription drug montelukast by their parents had fewer unscheduled trips to the physician, missed less days from school or childcare and caused their parents to take fewer days off work for their care.

Colin F. Robertson, MD, of the department of respiratory medicine at Royal Children's Hospital in Melbourne, Australia, and eight associates studied 202 children, ages 2 to 14, who were given either montelukast or placebo by their parents when needed for one year. All of the children had intermittent, physician-diagnosed asthma.

By the end of the year-long study, the patients treated with montelukast had 163 unscheduled health resource visits for their illness, as compared with 228 in the placebo group.

"Symptoms were reduced by 14 percent, nights awakened by 8.6 percent, days off from school or childcare by 37 percent and parent time off from work by 33 percent," says Robertson.

In asthma, children's airways become chronically inflamed, with various stimuli causing episodes of airway obstruction and breathing difficulties. The disease is the most common chronic disorder of childhood and affects an estimated 6.2 million children under age 18 in the U.S.

Intermittent asthma is the most common pattern of the disease in children, accounting for attacks in 75 percent of affected youngsters.

Montelukast sodium, a specific leukotriene receptor antagonist that has been shown to be effective in children, is used to prevent mild, persistent asthma. It reduces the swelling and inflammation that tend to close airways, and relaxes the walls of the bronchial tubes, allowing more air to pass through to the lungs.

"Acute episodes of asthma in young children place a significant burden on healthcare resources," says Robertson. "Admission to the hospital for asthma in children aged 0 to 4 years is five times more common, and for those aged 5 to 14 years, twice as common as for adults who have asthma."

"A key component of the study was the impact of asthma on the family, as measured by days absent from school or childcare, nights of disturbed sleep, and the number of parent days lost from work," says Robertson. "Furthermore, the strategy of parent-initiated therapy required children on average to take the study drug only 30 days per year, rather than 365, providing a further cost-benefit for the family."

An analysis of cost showed that the use of montelukast resulted in a savings of about \$96 U.S. dollars — or 29 percent less per treated episode than the placebo controlled arm of the trial.

"Admission to the hospital for asthma in children aged 0 to 4 years is five times more common, and for those aged 5 to 14 years, twice as common as for adults who have asthma."

Source: American Thoracic Society

Please note: effectiveness of this product has not been thoroughly tested. Article provided for informational purposes only.

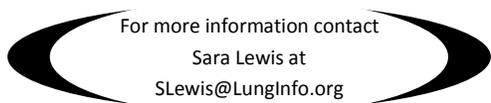
Website link:

<http://www.therapytimes.com/content=5901J64848B69A841>

Pennsylvania Asthma Partnership

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The Pennsylvania Asthma Partnership (PAP) is the joining together of all individuals interested in reducing the asthma burden throughout Pennsylvania. Partners work on short, medium and long-term outcomes, that when implemented can be measured. The ultimate goal is to decrease asthma morbidity, mortality, and costs to increase the quality of life for those with asthma. Partners participate in workgroups such as: Surveillance/Evaluation; Environment/Workplace; Awareness/Education; Provider; Disparities; and Public Policy. Workgroups move towards achieving the goals within the 2006 Pennsylvania Asthma Action Plan. Membership is free and open to anyone.

The Pennsylvania Asthma Partnership is managed by the American Lung Association of Pennsylvania and is sponsored by the Pennsylvania Department of Health through a cooperative agreement with the Centers for Disease Control and Prevention.

For your own copy of the 2006 Pennsylvania Asthma Action Plan please visit www.health.state.pa.us.

Have an interesting article you'd like featured in the newsletter? Let us know! Send a copy to Sara at SLewis@lunginfo.org

Workgroup Update...

Executive Committee: The second meeting was held on Nov. 12th, where the results from conference evaluations were reviewed. Ideas for the Spring conference were also discussed. *Next meeting date: Jan 16, 10:00-12:00*

Awareness/Education: Will be developing a state-wide list of available programs (by region). Send those programs you know of to Nancy Kaminski at Kaminski.nj@gmail.com. Also will be developing a list of free online resources, send your suggestions to pbenigno@lunginfo.org. Myka Diller is now chairperson. *Next Meeting: End of Jan*

Disparities: Philadelphia county is where most toolkits will be distributed. Focus will occur first on the free clinics throughout the area. This will reach the lowest income levels and get the knowledge to our target audience. Survey to be developed for toolkits still. Frank McKee is now chairperson. *Next Meeting: End of Jan*

Environment/Workplace: Will be working to get data that better correlates asthma and hospitalization date with environmental hazards. Co-Chairs Nathan Willcox and Erin McCarville *Next Meeting: January*

Providers: A letter addressed to all hospitals in PA will be going out to recruit an asthma champion from each facility. This will help to spread the word on correct asthma treatment methods and other information to all providers state-wide. Chair Dr. Gerald Kolski, Vice-Chair Ann Wilson and Secretary Dr. Allison Freeman. *Next Meeting: end of Jan*

Public Policy: Will be working to gather state insurers and Medicaid providers for a meeting to improve consistency from all insurers. Will develop a packet for decision makers on World Asthma Day and distribute. Reviewed current legislation which effects asthma. Deb Brown is now chairperson. *Next Meeting: end of Jan*

Surveillance: Workgroup did not meet yet, due to lack of membership. Please let Sara know if you are interested in joining this workgroup. *Next Meeting: TBD*

A special thank you goes out to all speakers and leaders that participated so willingly in our first PAP Conference!