



Rhode Island Asthma Coalition

Addressing the asthma epidemic in Rhode Island

A collaboration between the RI Department
of Health, the American Lung Association
of RI, and the Community Asthma
Programs at Hasbro Children's Hospital

May 16, 2005



- 100 years of history
- Protecting lungs, whether you like it or not!
- Current work



What do they have in common?



Barbara McGuire



Dania De La Cruz



Morgan Stone

Do you know how it feels?



Breathing Exercise

- Take one straw and place it between your lips
- Breathe through the straw, **ONLY**, for 30 seconds
- Hold your nose if needed
- Share your reaction or thoughts



Today's Chat, Asthma

Definition

Asthma is a chronic disease of the lungs characterized by the swelling of the airways and asthma attacks



Know Your Symptoms

- Coughing
- Wheezing
- Shortness of breath
- Chest pain or tightness



Causes of Asthma

- Hereditary
- Allergy induced
- Exercise induced
- Work related (Occupational Asthma)



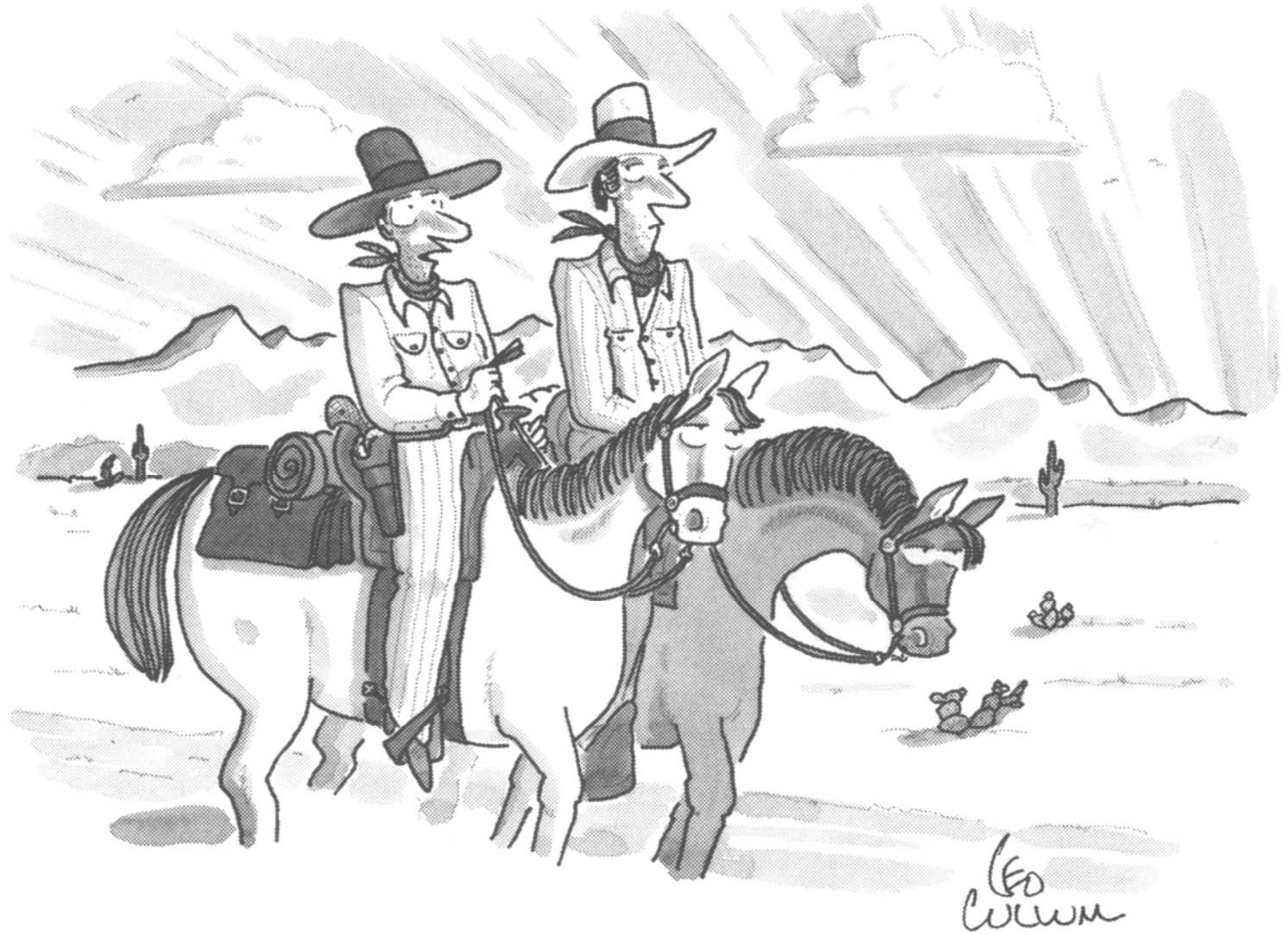
Asthma is an Epidemic!





Asthma Epidemic in RI

- RI ranks third in the US with the worst asthma rates
- 1 in 10 Rhode Islanders currently have asthma (over 100,000 people)
- Rhode Islanders pay about \$41 million per year
- Adults living in poverty suffer a stronger impact (RI BRFSS, 2001-2003)



"It's not so much riding off into the sunset as it is heading west till my asthma improves."



Other Asthma Facts

- African Americans and Latinos experience higher incidence, hospitalization and death rates than other groups (National Institute of Allergy and Infectious Disease)
- In the US, asthma causes 14.5 million missed school days every year (National Health Interview Survey, 2003)
- In the US, **14 people die each day** from an asthma attack (Asthma and Allergy Foundation of America)



Asthma Impacts Worksites





Worksite Asthma Facts

- In RI, there are **over 60,000** employed adults with “lifetime” asthma (RI BRFSS, 2002)
- 2 types of Occupational Asthma
 - Trigger sensitization (long-term development)
 - Irritant-induced (immediate single high exposure)
- Over 200 known agents can cause Occupational Asthma (RICOSH)



Asthma Costs Worksites





Worksite Cost – 1

In the US, asthma causes 15 million lost workdays each year resulting in total costs of nearly \$3 billion in total lost productivity (Morbidity and Mortality Weekly Report, Surveillance for Asthma, US CDC, 2002)



Worksite Cost – 2

Annual per capita disability claims of employees with asthma are 3 times higher than those employees with no record of asthma treatment (\$14,827 vs. \$5,280) (Journal of Allergy and Clinical Immunology. 2002 Feb;109(2):264-70)



Worksite Cost – 3

Annual per capita employer expenditures for asthmatic patients were approximately 2.5 times those for individuals with no prior record of asthma treatment (\$5,385 vs. \$2,121) (Journal of Allergy and Clinical Immunology. 2002 Feb;109(2):264-70)



**How can we address asthma at a
state level in RI?**





RI Asthma Coalition

Overview

- Funded by the CDC through RI DOH
- Follows strategies outlined in the RI Asthma Control Plan
(www.health.ri.gov/disease/asthma/index.php)
- This is a 3-year project



Our Goals

- Promote respiratory health through better prevention, detection and treatment of asthma
- Promote education for asthma patients, their families, and the health care provider who serves them
- Promote a statewide network for communication, coordination and access to resources



Three Focus Areas

1 – Housing

Healthy Housing trainings, tenant and landlord education, working closely with RI housing authorities, and policy advocacy





Three Focus Areas

2 – Schools

Nurse and school personnel trainings,
family support and education, policy
advocacy

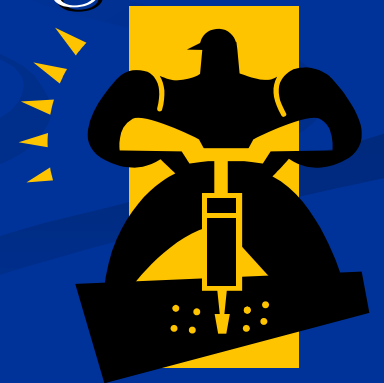




Three Focus Areas

3 – Worksites

Employer trainings, support and education on legislation (i.e. smoke-free worksite law), promote health programs





Our Target



Cities and Populations

- Woonsocket, Pawtucket, Central Falls, Providence, and Newport
- Low-income, Latinos and African Americans



Coalition Structure

Steering Committee

- Guide our focus according to the State Asthma Plan
- Meets quarterly



Coalition Structure

Management Team

- RI Department of Health
- American Lung Association of RI
(lead agency)
- Asthma Programs at Hasbro
Children's Hospital



Coalition Structure

Subcommittees

- Asthma Educators
- Housing, Minorities
- Schools
- Worksites (Worksite Wellness Council of RI)
- Public Education
- Summit
- Physicians



Coalition Structure

Communication

- monthly updates
- quarterly Asthma Advocate
- semi-annual Breathe Easy for School Nurse-teachers
- routine e-mails and meetings
- coalition summits



Controlling Asthma

Sample of Activities

- Grand rounds: Seminars delivered at hospitals
- Trainings: on various issues related to schools, housing and worksites
- Draw a Breath Program: regularly scheduled classes for families (English and Spanish)



Controlling Asthma

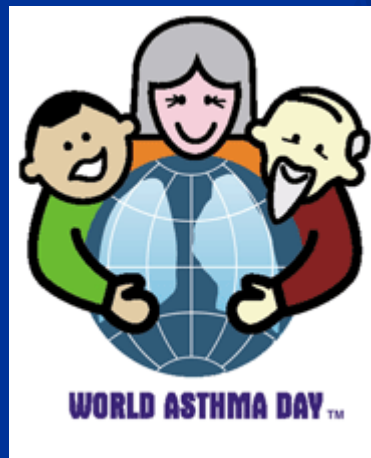
Sample of Activities (cont)

- Breathmobile: Spirometry testing, COPD, smoking cessation and asthma education
- Summits/Events: convening coalition members and other key stakeholders
- Media Campaigns: building public awareness



How You Can Get Involved

Promote a respiratory health program at your worksite!





Promote the Asthma Control Test!

Take the Asthma Control Test™ now to help you better control your asthma

The American Lung Association recommends everyone 12 years of age and older with asthma take the Asthma Control Test, no matter how well controlled you think your asthma is.

Your answers to this 5-question quiz will provide you a score that may help you and your doctor determine if your treatment plan is working or if it might be time for a change.

How to take the Asthma Control Test

Step 1. Write the number of each answer in the score line provided.

Step 2. Add up each score for your total.

Step 3. Take the test to your doctor to talk about your total score.

1. In the past 4 weeks, how many of the times did your asthma keep you from getting as much done at work, school or at home?

Not at all	1	1	2	3	4	5	Score
Not at all	1	1	2	3	4	5	

2. During the past 4 weeks, how often have you had an asthma attack?

None at all	1	2	3	4	5	Score
None at all	1	2	3	4	5	

3. During the past 4 weeks, how often did your asthma symptoms (wheezing, coughing, shortness of breath, chest tightness or difficulty getting up or going to bed) bother you in the morning?

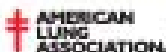
Not at all	1	2	3	4	5	Score
Not at all	1	2	3	4	5	

4. During the past 4 weeks, how often have you used your rescue inhaler or short-acting medication (not a controller)?

Not at all	1	2	3	4	5	Score
Not at all	1	2	3	4	5	

5. How well do you rate your asthma control during the past 4 weeks?

Not at all	1	2	3	4	5	Score
Not at all	1	2	3	4	5	



The American Lung Association supports the Asthma Control Test™ and encourages 12 years of age and older with asthma to take it.

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What does my score mean?



19 or less

- If you scored 19 or less, it may be an indication that your asthma is not under control.
- Make an appointment to discuss your Asthma Control Test score with your doctor and ask if you should change your asthma management plan.
- Ask your doctor about daily long-term medications that can help control airway constriction and inflammation, the two main causes of asthma symptoms. Many people need to treat both of these components of asthma on a daily basis for the best asthma control.

20 or more

- If you scored 20 or more, your asthma seems to be well controlled, but you should discuss your Asthma Control Test score with your doctor at your next appointment.
- Asthma is unpredictable. Your asthma symptoms may seem mild or consistent, but they can flare up at any time.
- Take the Asthma Control Test periodically no matter how good you feel, and continue to see your doctor on a regular basis to ensure you are taking the necessary steps to keep your asthma in control.

expect more



When your asthma is controlled, you should expect to be **MORE** active and have **LESS** symptoms.

Aim for 20 or more

20



Talk to your doctor about an asthma management plan that can give you more days of symptom relief. In addition to reviewing your Asthma Control Test results, ask the following questions at your next office visit:

- Is there something more I can do to help prevent my asthma symptoms?
- What's the difference between my fast-acting inhaler, like albuterol (also called a rescue or quick-relief inhaler), and a daily controller medicine?
- Do I need medication for the two main underlying causes of asthma symptoms — airway constriction and inflammation?
- How do I make sure I have identified all of my asthma triggers?
- Should I get a lung function test?

asthma info

Check these out on www.aalung.org for more information about asthma treatments and many other topics.

Name _____ Date of Birth _____

Address _____

City _____ State _____ Zip code _____

E-mail address _____

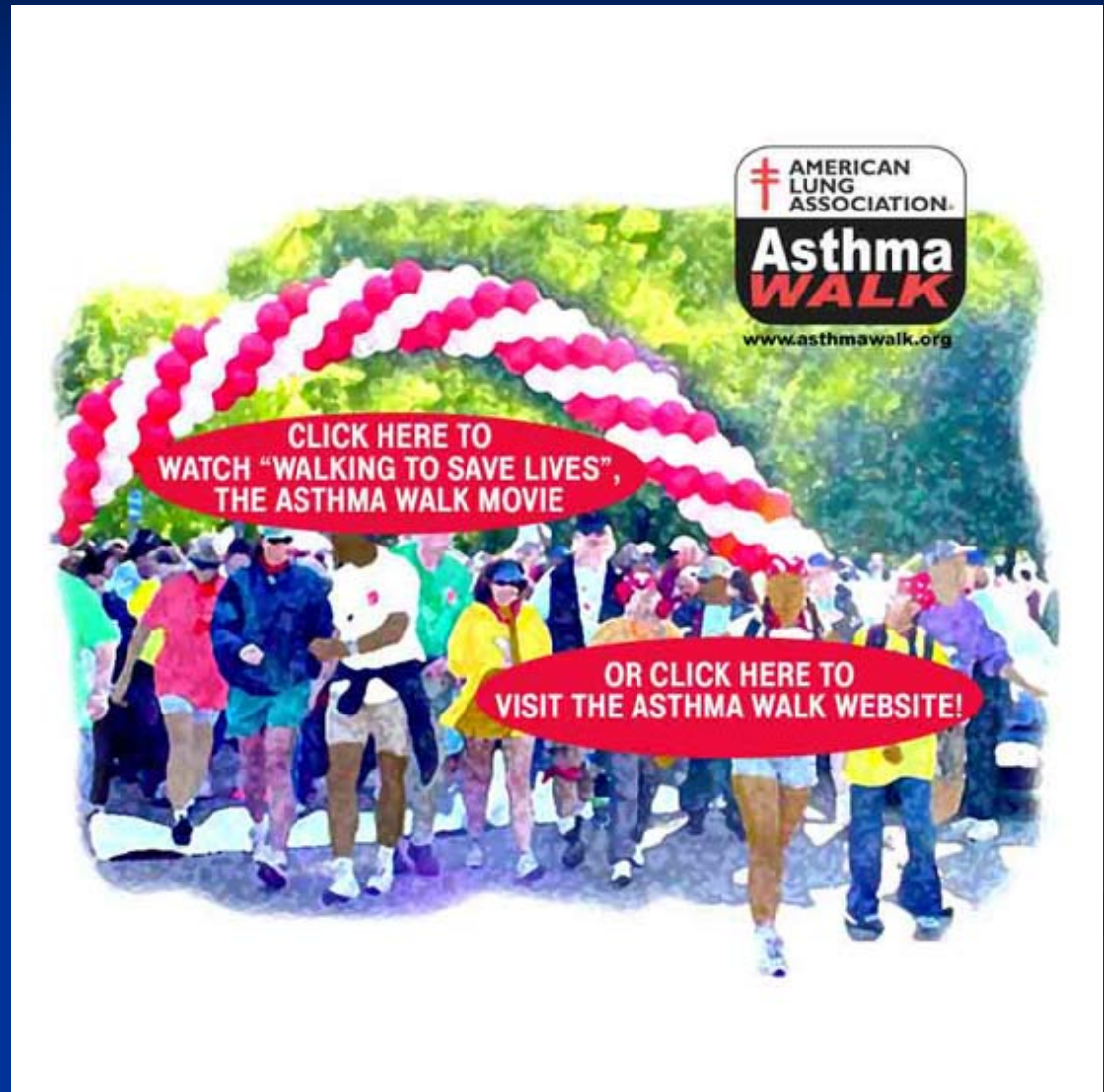
What prescription medications are you currently taking? _____

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Blow the Whistle on Asthma

Join us at our
Asthma Walk,
May 14 at Roger
Williams Park





RI Asthma Coalition

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