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We hope you enjoy the new appearance and design of the Managing Asthma newsletter. We have updated the format to make it easier to find the information that interests you most.

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AIR QUALITY AND ASTHMA

Air pollution is a problem for everyone—not just people with asthma. Studies have shown that high levels of air pollution can be associated with decreased lung function and more frequent reports of respiratory symptoms.

This is especially true for people who spend a lot of time outdoors. Children may be particularly affected by pollution levels because they play outdoors, have faster breathing rates, and have lungs that are still developing. But although high levels of pollution affect everyone, people with asthma are more sensitive and experience the effects more quickly and severely.

 AIR QUALITY AND ASTHMA *See next page*

what are INVERSIONS?

Inversions occur during winter months when normal conditions (cool air above, warm air below) are inverted. Inversions trap a dense layer of cold air under a layer of warm air. They act like a lid, trapping within the cold air near the valley floor.

The Wasatch Front valleys and their surrounding mountains act like a pot, holding the air in the valleys. The longer the inversion lasts, the stronger the pollutants concentrate within it. Visibility often deteriorates well in advance of harmful concentrations of pollutants.



▶ *Continued from page 1*

AIR QUALITY AND ASTHMA

Additional studies have shown that ozone, particle pollution, and other forms of air pollution worsen asthma and increase hospital visits for people with asthma. And again, it's kids with asthma who are especially vulnerable to these effects.

POOR AIR QUALITY AFFECTS PEOPLE WITH ASTHMA

Pollutants in the air have the same effect on people with asthma as other triggers. They reduce lung function by inflaming the lining of the lungs. Exposure to pollutants in the air can cause flare-ups and may increase the chance of upper respiratory infections, which can worsen asthma symptoms. Plan any outdoor activities for early in the day, when air quality tends to be better, and avoid spending time in areas where there's a lot of traffic.

Improving the air quality in your home is also a good idea. You can do this by using an air cleaner, venting all gas appliances to the outside, and avoiding wood fires in your house. You should also talk to your child's doctor about increasing medication during times when air pollution is high. This can be included as part of your asthma action plan (*see page 7*).



Reference: Ozone, Air, and Asthma. Jun. 2007. 29 Jan. 2009 <http://kidshealth.org/PageManager.jsp?dn=PrimaryChildrens&article_set=39152&lic=5&cat_id=132>.

Although you can't single-handedly stop air pollution, you can take these important steps to help improve it when the air quality is poor.

- Don't drive—share a ride, take public transportation, ride a bike, or walk.
- Don't put gas in your car until after 7:00 p.m.
- Avoid using outboard motors, off-road vehicles, or other gasoline-powered recreational vehicles.
- Avoid mowing your lawn or using other gasoline-powered gardening equipment until the late evening or until the air quality improves.
- Don't use paints, solvents, or varnishes that produce fumes.
- If you're barbecuing, use an electric starter instead of charcoal lighter fluid.

WHAT TO ASK YOUR PHARMACIST

Be prepared to share the following information with your pharmacist when you fill a prescription:

- Have you ever taken this medicine before?
- What other prescription or over-the-counter medicine do you take?
- What vitamins, herbs, or alternative therapies do you take?
- What other medical conditions do you have?
- Do you have any allergies? If so, what are they?
- Have you had any reactions to medications in the past?
- What other healthcare providers do you see?
- Do you have any questions about your medication?
- Do you have any problems or concerns about your medication?

Before you leave the pharmacy with your prescription, make sure you're familiar with your medication. Can you answer these questions? If not, talk with your pharmacist.

- What is the name of the medication and what should it do for me?
- When and how should I take the medication (morning, evening, with food)?
- How soon should I feel the results of the medication?
- How long should I take the medication?
- What side effects might I experience from the medication and what should I do about them?
- What, if anything, should I avoid while taking the medication (certain food, alcohol, sunlight)?
- What should I do if I forget to take a dose?
- How should I store the medication?
- How many refills are available for the medication?

Reference: Allergy & Asthma Network Mother of Asthmatics. 29 January 2009 <http://www.aanma.org/pharmacy/ph_at_askyourpharmacist.htm>.

Extra Rx Tip

Carry a list of your allergies and medications in your purse or wallet along with the names and phone numbers of your physicians.

Update this list whenever you fill a new prescription.



understanding **INFLAMMATION**

Inflammation is the reaction of your body's tissues to injury, infection, or irritation. Anyone who's ever had a mosquito bite has seen inflammation in action. It's the swelling, redness, heat, and pain where the mosquito has bitten you. And if you're the type to scratch your mosquito bites, you know something else about inflammation: it tends to get worse quickly if you irritate the affected area.

You can't see the inflammation that happens with asthma. Asthma inflammation is deep inside your lungs, in your airways. Yet just as with a mosquito bite, treatment means reducing the existing inflammation, and working to avoid things that will irritate your lungs even more.

When you have asthma, your airways are inflamed much of the time. Even when you have no symptoms, you might still have inflammation in your airways, which will make you even more vulnerable to asthma triggers.



THE BASICS OF ASTHMA

Scientists don't really know what causes asthma. But they do know a lot about what causes asthma symptoms to flare up from time to time, and who tends to get asthma.

WHAT BRINGS ON AN ASTHMA FLARE-UP?

If you have asthma, the inflamed airways in your lungs are "twitchy"—overly reactive to irritants in the environment. These irritants are called triggers, and include conditions (such as an allergy or chest cold), substances (like pollution or dust), or activities (such as exercise) that inflame your airways. Triggers are different for different people. To control your asthma, you'll need to learn what your triggers are, and how to deal with them.

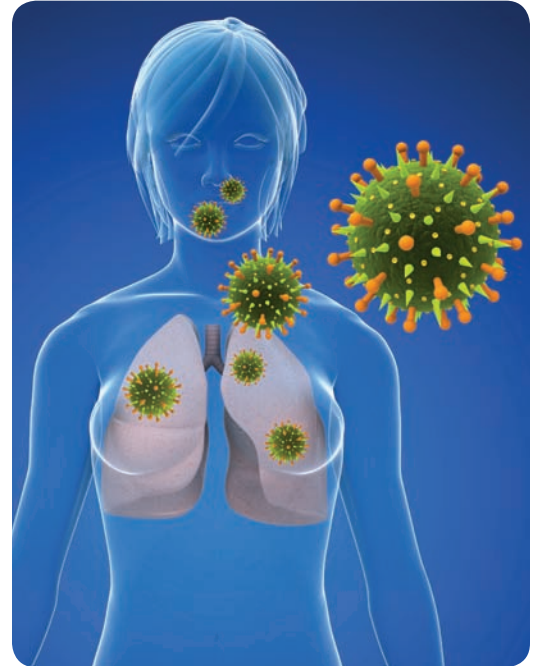
Although your airways are probably inflamed much of the time, you may not realize it. Instead, you may only think about your asthma during an asthma flare-up. An asthma flare-up (also called an asthma episode, exacerbation, or "attack") occurs when your already-inflamed airways react to a trigger. This causes the airways to become so narrow that you have trouble getting air into and out of your lungs.

WHO TENDS TO GET ASTHMA?

Although anyone can get asthma at any age, studies have shown the following trends:

- Asthma often starts in childhood, and is more common in children than in adults. Still, asthma affects people of all ages, and studies show an increasing number of cases of asthma in older people.
- More boys than girls have asthma, but in adulthood, more women than men have asthma.
- People who have allergies, or whose family members have allergies, are more likely than other people to have asthma.
- Asthma tends to run in families. If your mother, father, or siblings have asthma, you're at an increased risk for developing the disease.
- People who smoke, or are around a lot of secondhand smoke, are also more likely to get asthma.

Reference: Asthma: Breathing Easier booklet-1 Understanding Asthma. 2009. <<http://intermountainhealthcare.org/health/topics/Pages/Asthma.aspx>>





CAN KIDS WITH ASTHMA PLAY SPORTS?

CARINGforKIDS

with Asthma

Being active and playing sports is an especially good idea if you have asthma. Why? Because it can help your lungs get stronger so they work better.

PLAY ANY SPORT YOU CHOOSE

Some athletes with asthma have done more than develop stronger lungs. They've played professional football and basketball, and they've even won medals at the Olympic Games! Some sports are less likely to bother a person's asthma. Golf and yoga are less likely to trigger flare-ups, and so are sports like baseball, football, and gymnastics.

In some sports, you need to keep going for a long time. These activities may be harder for people with asthma. They include cycling, long-distance running, soccer, basketball, cross-country skiing, and ice hockey. But that doesn't mean you can't play these sports if you really like them. In fact, many athletes with asthma have found that with the right training and medicine, they can do any sport they choose.

AVOID FLARE-UPS AS YOU PLAY

But before playing sports, it's important that your asthma is under control. That means you aren't having lots of symptoms or flare-ups. To make this happen, it's very important that you take all asthma medicine just like your doctor tells you to, even when you are feeling OK.

Your doctor will also tell you some other things you can do to avoid flare-ups. This may mean skipping outdoor workouts when there is lots of pollen in the air, wearing a scarf or ski mask when you play outside during the winter, or making sure you always have time for a careful warm up and cool down.

Make sure your coach and teammates know about your asthma. That way, they will understand if you need to stop working out because of breathing trouble. It's also helpful if your coach knows which steps to take if you have a flare-up. Listen to your body and follow the instructions your doctor gave you for handling breathing problems. And if you keep your asthma in good control, you'll be in the game and not on the sidelines!

Reference: Can Kids with Asthma Play Sports? Jun. 2007. 4 Feb. 2009 <http://kidshealth.org/PageManager.jsp?dn=PrimaryChildrens&article_set=39135&lic=5&cat_id=20430>.





* The American Lung Association recommends everyone age 12 or older with asthma take the ACT.

PUT YOUR ASTHMA TO THE TEST

The Asthma Control Test (ACT) is a reliable and simple tool to help you maintain and improve your asthma control.* It is one way your doctor can assess how well your asthma is controlled.

Complete the ACT and take it with you to your next doctor's visit. Your answers to this five-question quiz will provide you a score that may help you and your doctor discuss your treatment plan.

How to take the test:

- Step 1.** Write the number of each answer in the score box provided.
- Step 2.** Add up each score box for your total.
- Step 3.** Take the test to your doctor to talk about your total score.

Reference: *Asth The GlaxoSma Control Test created for SelectHealth bymithKline Group of Companies* <<http://intermountainhealthcare.org/health/topics/Pages/Asthma.aspx>>.

A WALK IN THE PARK

The Lung Walk, presented by the American Lung Association of Utah, will be Saturday, May 16, 2009 at the Sugar House Park in Salt Lake City at 9:00 a.m.

For more information or to form a team, visit www.lungutah.org.

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

1 All of the time 2 Most of the time 3 Some of the time 4 A little of the time 5 None of the time

2. During the past four weeks, how often have you had shortness of breath?

1 More than once a day 2 Once a day 3 3 to 6 times a week 4 Once or twice a week 5 Not at all

3. During the past four weeks, how often did your asthma symptoms (wheezing, coughing, shortness of breath, chest tightness or pain) wake you up at night or earlier than usual in the morning?

1 4 or more nights a week 2 2 or 3 nights a week 3 Once a week 4 Once or twice 5 Not at all

4. During the past four weeks, how often have you used your rescue inhaler or nebulizer medication (such as albuterol)?

1 3 or more times per day 2 1 or 2 times per day 3 2 or 3 times per week 4 Once a week or less 5 Not at all

5. How would you rate your asthma control during the past four weeks?

1 Not controlled at all 2 Poorly controlled 3 Somewhat controlled 4 Well controlled 5 Completely controlled

TOTAL SCORE

If you scored **19** or less...

- Your asthma may not be controlled as well as it could be.
- Discuss your Asthma Control Test score with your doctor.
- Ask your doctor about daily long-term medications that can help control airway constriction and inflammation, the two main components of asthma. Many people need to treat both of these components of asthma on a daily basis for the best asthma control.

What Does Your Score Mean?

If you scored **20** or more...

- Your asthma may be well controlled. You should still talk to your doctor about your results.
- Asthma is unpredictable. Your asthma symptoms may seem mild or nonexistent, 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.

Date _____ Patient name _____ DOB _____

MD _____ MRN _____ Reviewed with guardian/patient Verbalized understanding Yes No

ASTHMA ACTION PLAN

- Breathing is easy
- No coughing
- No wheezing
- No shortness of breath
- Can work, play, and sleep easily
- Using quick-relief medication less than twice a week
- PEAK FLOW**
80% to 100% of personal best
_____ - _____



Avoid these asthma triggers _____

Take CONTROLLER medication _____

Take QUICK-RELIEF medication

- Before exercise _____
- Before exposure to a trigger _____

Keep ORAL STEROIDS on hand in case you fall into STEP 3 of the yellow zone or into the red zone.

- Using quick-relief medication more than twice a week*
- Coughing
- Wheezing
- Shortness of breath
- Difficulty with physical activity
- Waking at night
- Tightness in chest
- PEAK FLOW**
50% to 80% of personal best
_____ - _____



STEP 1: Add QUICK-RELIEF medication _____

STEP 2: Monitor your symptoms:

- If symptoms **GO AWAY** quickly, return to the green zone.
- If symptoms **CONTINUE** or return within a few hours

Add _____

STEP 3: Continue monitoring your symptoms

- If symptoms **CONTINUE** after step 2 treatment

Add _____
oral steroid medication

Call your healthcare provider: _____

- Medication is not helping
- Breathing is very difficult
- Cannot walk or play
- Cannot talk easily
- PEAK FLOW**
Less than 50% of personal best
_____ - _____



Call your healthcare provider _____

If you can't reach your healthcare provider quickly, go to the nearest hospital emergency room or call 911 immediately.

Go to the hospital emergency room or call 911 immediately.

- If you have an oral steroid at home, take _____ milligrams of _____ as you leave for the hospital.
- Continue to use your quick-relief medication _____ as you go to the emergency room.

Asthma symptoms can get worse quickly. When in doubt, seek medical help.



Manage Your Prescriptions Online

Log in to www.selecthealth.org/myhealth and click on “Pharmacy Tools” in the left navigation. Then click on “Go to My Pharmacy Tools” to get connected to your pharmacy benefit information. You’ll find the following information:



- Potential lower-cost alternatives for drugs you already take
- Tier statuses of prescription drugs
- Your prescription copays and benefits
- Maintenance drug (90-day) medications
- Your prescription history
- Explanation of Benefits (EOBs) for your drug claims
- Drugs requiring preauthorization and step therapy
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