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ASTHMA SCREENING FOR CHILDREN

by Karla Grossman, BSN, RN, AE-C

Right now, there is an ongoing debate between health groups about asthma screenings for children. Asthma screenings are a way to help find out if a child has symptoms of asthma, such as coughing or wheezing. Asthma screenings can be performed by doctors, nurses, respiratory therapists, or certified asthma educators. They usually include a questionnaire about any past breathing problems and/or a pulmonary function test known as spirometry.

Asthma screenings sound like a great idea: asthma is one of the most common chronic diseases in children, causing repeated school absences and poor academic performance. The screenings could help diagnose children and provide an important step in ensuring that these children are receiving proper medication and education to manage their condition. However, concerns about screenings have been identified and highlighted in a report by the American Thoracic Society.

A panel of experts found it difficult to test a large group of people for asthma when they used the nine screening guidelines set by the World Health Organization. The World Health Organization guidelines provide a scientific and acceptable standard for screenings of any disease (refer to the newsletter sidebar for more details). For asthma, the screening events are expensive, and it's hard to provide the proper equipment and trained staff. The most important problem with screening was ensuring that each patient follows-up with their own doctor for a proper diagnosis. The panel also agreed that asthma is a very complex disease that is different with each patient. Sometimes people who develop asthma will not have any obvious symptoms, and currently there is no reliable test that can identify children with asthma before they develop symptoms. The panel agreed that although asthma is an important health problem, screenings are probably not the best approach to diagnosing large groups of people.

Even though the panel concluded that a widespread, population-based asthma screening may not be a good use of resources, they did note two important positive findings. Asthma screenings can be useful as educational events, providing information to the public about this little-understood disease. Asthma screenings can also be useful in areas where there are quite a few people with undiagnosed asthma, such as large cities like Detroit, Michigan.

In the meantime, parents, school staff, and doctors should pay careful attention to breathing problems in children. Anyone experiencing the common symptoms of asthma, like frequent coughing, wheezing, shortness of breath, and tightness in the chest, should see a doctor and ask about asthma. For more information about diagnosing asthma, from the provider or patient view, visit the [GetAsthmaHelp.org](http://www.GetAsthmaHelp.org) website.

Source: Gerald, L. B., (2007). *An Official ATS Workshop Report: Issues in Screening for Asthma in Children*. *Proceedings of the American Thoracic Society*, 4, 133-141.

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World Health Organization Guidelines for Screening Programs

- ✿ The condition must be an important health problem.
- ✿ The course of the disease should be understood.
- ✿ There should be an identifiable early stage of the disease.
- ✿ There should be accepted treatment for patients with recognized disease.
- ✿ There should be an agreed-upon policy for treatment.
- ✿ There should be facilities for diagnosis and treatment.
- ✿ There should be a suitable screening test.
- ✿ The screening should be acceptable to the population.
- ✿ The cost of screening (including diagnosis and treatment) should be reasonable.
- ✿ Screenings should be ongoing.

Source: Table 1 from the *Official ATS Workshop Report: Issues in Screening for Asthma in Children*.



ASK AN ASTHMA EDUCATOR

Guest AE-C,
Kathleen Slonager

"My new HFA inhaler feels different. Am I getting the same amount of medicine and should my technique be different for this inhaler?" -"Bonnie" from Lansing

Great Question Bonnie!

Even though the propellants in your inhaler have changed from one having chlorofluorocarbons (or CFCs for short) to one with hydrofluoroalkanes (HFAs), the medicine inside has not. HFA quick-relief albuterol inhalers are FDA-approved and are equally as safe and effective as your current CFC quick-relief albuterol inhaler. While the albuterol inside the HFA inhaler is the same as in the CFC inhaler, there are some differences between the two (such as taste and spray force) and you should expect this as you change your inhaler. For example, the "puff" of the HFA spray will be less forceful than what you may be accustomed to with the CFC inhaler.

If you have questions about your inhalers, it is very important that you talk with your doctor, certified asthma educator, or pharmacist about your concerns, even if you have used an inhaler for years. It is also a good idea to ask about how to clean your new inhaler, especially since HFA inhalers have specific cleaning instructions, provided with the product.

-Kathleen Slonager, RN, AE-C

Asthma Educator Update

Interested in becoming a certified asthma educator? Now is a great time to visit www.NAECB.org for the latest information on the Self Assessment Exam. The practice exam is similar in content and difficulty to the actual certification exam. The cost is \$65.00 and is available online.

Applications are still being accepted for the Linda B. Ford scholarship, but be quick! Applications are due July 31st. 🌸

Please direct questions and comments about this newsletter to:

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c/o American Lung Assoc. of Michigan
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Lansing, MI 48933-1179
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SUMMER ASTHMA TIP: Asleep with Asthma

It's bad enough with asthma symptoms strike during the day, but when coughing, wheezing and congestion strike at night, it also affects you and your child's sleep. Night time asthma symptoms are common, and cause tiredness and a lack of energy during the day.

Studies show that lungs work best during the day, especially in the afternoon, but lung function is at its worst around 4 a.m. It also doesn't help that quick relief inhalers often wear off while patients are asleep.

If you start to notice excessive napping, drowsiness, and school and work problems in you or your child caused by asthma, then making a few changes in your asthma care can make a drastic improvement in your sleep.



- 🌸 Monitor your/your child's asthma symptoms in a daily/nightly symptom diary.
- 🌸 Make sure you are taking all of your medications on time and correctly.
- 🌸 If night time asthma symptoms are causing you trouble, make a doctor appointment to review proper inhaler use and talk about other medical conditions like acid reflux and sleep apnea.
- 🌸 To control dust mites, wash bedding once a week in hot water, and put stuffed animals or pillows into the freezer overnight, then wash and dry.

Asthma and allergies should not keep you and your family from getting a good night's sleep. *Sweet dreams!*

MI ASTHMA CALENDAR

July

- 23 Asthma Management and Education Conference
Muskegon Community College, Muskegon, 10:00am-2:00pm, for more info: 866-711-4622
- 25 "Back to School" Asthma Awareness Event
East Lansing High School Student Union, East Lansing, 6:00pm - 8:00pm, for more info: 517-367-5177

August

- 25 Radio Disney "Healthy Kids" Tour
Oakland Mall, Troy, free, for more info: 517-784-2023

September

- 26 Summit of Michigan Asthma Coalitions
Lansing Community College West Campus, Lansing, 9:00am - 3:00pm, for more info: 517-484-7206

October

- 24-25 The Ninth Annual ACCP Community Asthma and COPD Coalitions Symposium
Chicago, IL, for more info: www.chestnet.org/CHEST/program/registration/php
- 23 NHLBI Guideline Dinner Discussion
Haggerty Center, Traverse City, 6:00pm-8:00pm, for more info: 1-866 EZ Lungs