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AE-C

May 2018

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Upcoming Events

**2018 AAE Annual Conference
July 20-22, 2018**

The 2018 Annual Conference "Assembling the Puzzle of Asthma Education and Treatment" will be held on July 20-22, 2018 at the Arizona Grand Resort and Spa in Phoenix, Arizona. AAE has selected a resort destination (Arizona Grand Resort) which has numerous amenities including pools, water slides, outdoor sports, golfing and more! Consider bringing your family and make it an end of the summer vacation trip!

There will be an amazing pharmacology preconference on Thursday, July 21st that will highlight asthma therapies in special populations. Speakers include Maureen George, Karen Gregory, Christine Wagner, Mona Tsoukleris and Michael Schatz. Dr. Schatz is the current editor-in-chief of the Journal of Allergy and Clinical Immunology in Practice and is an expert in asthma therapies during pregnancy. Dr. Schatz will also be speaking at the general meeting as well. See more at <https://www.asthmaeducators.org/>

23rd Annual Regional Allied Health Conference Current Perspectives in Asthma, Allergy & Pulmonary Practice Friday, September 14, 2018

This full-day program (7:55 a.m-3:30 pm) provides an update for Registered Nurses, Advanced Practice Nurses, Physician Assistants, Respiratory Therapists and Allied Professionals who work with patients who have chronic diseases and conditions.

Location: Molly Blank Conference Center at National Jewish Health Main Campus, 1400 Jackson St. Denver, CO. 80206.

Register Now Early bird rate is \$120 through August 20, 2018!

Sessions and Workshop Topics:

- Airway Clearance: Improving Quality of Life
- All Things Immunology: Atopy, Food Allergies and Asthma in Kids
- Biologics and Biosimilars: It's a MAb, mAb, mAb World
- Cystic Fibrosis: Transition to Adult Care
- Does This Inhaler Make Me Look Awesome? Inhaled Medication Delivery; Tools & Techniques
- Eating for Energy
- Idiopathic Pulmonary Fibrosis in Review
- Infection Prevention Through Ages
- Rheumatology in Practice: An overview of RA, SLE and Sjogren's Syndrome
- Spirometry Tools & Techniques: Putting in all Together
- Take a Deep Breath: We're Going to Talk About Asthma
- Type 2 Diabetes: The Latest in Medication and Lifestyle Management
- What's New in COPD: A Nursing Perspective

* Topics are subject to change

Registration Information:

Registration Fee is \$135 / Early bird rate is \$120 through August 20, 2018!

Please visit njhealth.org/AlliedHealthCare. Please contact Mandy Comeau in the Office of Professional Education at 303-398-1000 or 800-844-2305 or comeauM@njhealth.org with questions.

New FREE Continuing Education From MMWR and Medscape

Asthma In Children

CDC's *MMWR* and Medscape are proud to introduce a new [FREE continuing education \(CE\) activity](#) that describe trends and demographic differences in health outcomes and healthcare use for childhood asthma, based on a Centers for Disease Control and Prevention (CDC) analysis of asthma data from the 2001-2016 National Health Interview Survey for children 17 years and younger.

This activity is intended for pediatricians, pulmonologists, public health officials, nurses, and other clinicians caring for patients with childhood asthma.

Upon completion of this activity, participants will

1. Distinguish demographic differences in prevalence, health outcomes, and healthcare use for childhood asthma, based on a Centers for Disease Control and Prevention (CDC) analysis of asthma data from the 2001-2016 National Health Interview Survey for children 17 years and younger
2. Describe temporal trends in health outcomes and healthcare use for childhood asthma, based on the CDC analysis of asthma data
3. Determine the clinical implications of trends and demographic differences in health outcomes and healthcare use for childhood asthma

To access this FREE *MMWR* / Medscape CE activity

visit https://www.cdc.gov/mmwr/cme/medscape_cme.html. If you are not a registered user on Medscape, you may [register for free or login without a password](#) and get unlimited access to all continuing education activities and other Medscape features.

Tell Us Your Story!

If you are a Certified Asthma Educator with an innovative approach to asthma education or a unique program, we want to hear about it!

Send an e-mail to info@naecb.org and we may feature your story in an upcoming newsletter!

Fresh Off the Press - New Asthma Publications

COMPLETION OF ASTHMA EDUCATION/JIU JITZU PROGRAM FOR INNER CITY CHILDREN IMPROVES SELF CONFIDENCE THOUGH FURTHER WORK IS NEEDED

Traci Arney RN, MN, FNP-C Crazy About Kids Pulmonary Services Phoenix AZ, Kimberly Byrne DNP, CPNP, AE-C, Phoenix Children's Hospital Phoenix AZ, Kelvin Panesar MD Crazy About Kids Pulmonary Services, Phoenix AZ, Joe Yusin MD VA Greater Los Angeles Healthcare System/David Geffen School of Medicine at UCLA, Los Angeles CA.

Introduction:

The Chronic Care Model serves as a framework for chronic conditions and emphasizes partnerships with community resources to improve patient self-management in chronic medical conditions. Using such a model, we held a 6-month athletic program that incorporated asthma education into weekly Jiu Jitsu classes. 5 Out of 9 children from inner city enrolled completed the program. Our goal was to determine the effectiveness of the program and which participants were more likely to complete the program.

Methods:

We analyzed asthma control measure data obtained during the first 15 weeks of the program for any differences between children who completed vs. children who failed to complete the entire program. Participants who completed the 6-month program and their family members were interviewed. Evaluation instruments included peak flow meters and symptom frequency.

Results:

No statistically significant differences in asthma control markers were identified between participants who completed vs. failed to complete the program, including the average peak flows (256 vs 281 $p=.365$), and average weekly wheezing (.14 vs. 0, $p=.278$), ER visits (.2 vs. 0, $p=.556$), and nocturnal awakenings (.17 vs. .03, $p=.119$). Parents of children completing the program reported improved confidence in managing asthma.

Conclusion:

Participation in an entire 6-month asthma education/Jiu Jitsu sports program leads to improved confidence in managing asthma. There appears to be no statistically significant differences in various asthma control markers between participants who completed vs. participants who failed to complete a 6 months asthma education/Jiu Jitsu program. Given the significant morbidity among inner city children diagnosed with asthma, further work and expansion of such programs into low income areas is needed to determine which children are more likely to complete and benefit from combined asthma education/fitness programs.

DOES CROSS-CULTURAL COMMUNICATION TRAINING FOR PHYSICIANS IMPROVE PEDIATRIC ASTHMA OUTCOMES? A RANDOMIZED TRIAL

Minal R. Patel, Peter X. K. Song, Jean-Marie Bruzzese, Wei Hao, David Evans, Lara J. Thomas, Marcia Pinkett-Heller, Karen Meyerson & Randall W. Brown

Objective: Adverse cross-cultural interactions are a persistent problem within medicine impacting minority patients' use of services and health outcomes. To test whether 1) enhancing the evidence based Physician Asthma Care Education (PACE), a continuing medical education program, with cross cultural communication training (PACE Plus) would improve the asthma outcomes of African American and Latino/Hispanic children; and 2) whether PACE is effective in diverse groups of children.

Methods: A three-arm randomized control trial was used to compare PACE Plus, PACE, and usual care. Participants were primary care physicians (n = 112) and their African American or Latino/Hispanic pediatric patients with persistent asthma (n = 867). The primary outcome of interest included changes in emergency department visits for asthma overtime, measured at baseline, and 9 and 21 months following the intervention. Other outcomes included hospitalizations, asthma symptom experience, caregiver asthma-related quality of life, and patient-provider communication measures.

Results: Over the long term, PACE Plus physicians reported significant improvements in confidence and use of patient-centered communication and counseling techniques ($p < 0.01$) compared to PACE physicians. No other significant benefit in primary and secondary outcomes was observed in this trial.

Conclusion: PACE Plus did not show significant benefit in asthma-specific clinical outcomes. More trials and multi-component strategies continue to be needed to address complex risk factors and reduce disparities in asthma care.

Trial registration: ClinicalTrials.gov: NCT01251523 December 1, 2010.

MATCH White Paper Now Available!

Managing Asthma Through Case-management in Homes (MATCH) is the model of self-management education used in 5 Michigan communities. A white paper, with detailed information on outcomes and sustainability, [is now available here](#).

The Patient Perspective: Bronchial Thermoplasty

Melody Papazis, RN, shares her personal experience with bronchial thermoplasty in Chicago. Read Melody's story here. [Read Melody's story here](#)

***Please send potential article submissions or upcoming related events via e-mail to info@naecb.org.
The editors reserve the right to decline submissions for any reason.***

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