

June 2013

## The Challenges of Asthma Education - NAECB Chair Perspective

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I would have never believed that asthma management would have been the core of my career and passion. I sat in the office of Michael McCarthy MD, pediatric pulmonologist, in Spokane WA discussing my first position as world of adult trauma ICU for my first out-patient experience. His largest concern, "I am worried that you will be bored, Traci".

18 years later, now the owner of a Pediatric Pulmonary Practice in Gilbert AZ and the chair of the National Asthma Educator Certification Board, I can honestly say, I have been anything but bored. There is no greater challenge than to diagnose a child with asthma and talk to the parents/caregivers about asthma and what that exactly means. An educator that has the expertise and ability to connect with a family and assist in the process of controlling asthma symptoms, leads to a more productive society.

There are so many benefits to controlling asthma: economical, psychosocial, and medical. The success of asthma management and education is based on delivering consistent and accurate information. The professional Asthma Educator is the true expert in this information delivery. The professional Asthma Educator Exam, is proven to know accurate information within all aspects of asthma educations. The professional AE-C is able to discuss miscommunications and myths that continue to be part of the system.

Families enter into every aspect of health care with asthma: primary care, emergency care, hospital, pharmacy, school systems to name a few. All of these professionals should be able to deliver the same message of control, from the medical assistant bringing the patient to the room, to the pharmacist filling the medications, it message of daily control will lead to the success of the team and more importantly the health and well being of the patient..

The last 7 years of being a board member for the NAECB have been amazing. From working with professional experts across the county, learning and understanding test development, learning item writing, and fulfilling board leadership, it has been a great experience. I am always impressed where the Certified Asthma Educator has chosen to implement programs and expertise. My hope for the future is that the AE-C role expands in all areas of healthcare and the numbers increase so that value is appreciated throughout this wonderful county of ours.

## Being an AE-C at the EPA

**Jack Barnette, AE-C**

Some years ago the Environmental Protection Agency was advertising for conservationists; I misunderstood and thought they were looking for conversationalists. I said to myself, "I can do that," and I have been talking about the environment ever since. I have



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worked for the EPA for many years now and have seen it develop and change over the years. My first office was on the south side of downtown Chicago. We were located in a very old building with lead paint flaking off the walls; asbestos hanging from pipes overhead, mold in the bathrooms, and most of us smoked cigarettes at our desks. Yes, this was EPA in the early days. Ironically, my job was hazardous materials response so, when there was a release or spill of some hazardous, oily, or toxic substance, and I responded, my exposures went down. My exposure to toxic substances was greater in my office than at the scene of most environmental emergencies.

I am happy to say that we have "wised-up" and have come a long way since those days. When I say "we" I mean EPA and all the rest of us. We are all well aware of the dangers of smoking and the significant risks associated with exposure to secondhand tobacco smoke. When I was growing up it was common for kids to be exposed to secondhand smoke (at EPA we call it environmental tobacco smoke[ETS]) in their homes and family cars. The number of children exposed to ETS continues to go down, but we still have much work to do. According to the Centers for Disease Control and Prevention (CDC), approximately 18% of our children ages 3 to 11 live with a smoker.

I work for EPA's air pollution program. The Clean Air Act is a United States federal law designed to control air pollution on a national level. It requires the Environmental Protection Agency (EPA) to develop and enforce regulations to protect the public from airborne contaminants known to be hazardous to human health. The Clean Air Act initially established six mandated criteria pollutants (ozone, particulate matter, carbon monoxide, sulfur dioxide, and lead) but advances in testing and monitoring have led to the discovery of many other significant air pollutants.

With the Clean Air Act in place, the U.S. has seen many pollutant levels and associated cases of health complications drop. EPA has set health goals that are targeted to be achieved by 2020. These environmental health goals include: the prevention of 230,000 adult mortality cases due to particles; the reduction of 75,000 chronic bronchitis cases; and, the elimination of 2,400,000 asthma exacerbations. These are the health benefits of the Clean Air Act that are associated with reducing levels of fine particles and ozone. These goals are ambiguous but achievable.

As EPA became more and more interested in environmental factors that impact respiratory health, the Agency began to look beyond the ambient, outdoor environment for factors that are risks to human health. It became immediately apparent that people in our society, including our children, spend more than 90% of their time indoors. Indoor air can be many times more contaminated than outside air, even the air in big cities. In its investigations into indoor air concerns, the Agency soon realized that an elevated level of radon in buildings was a significant lung cancer risk. Radon is a naturally occurring radioactive gas. In fact, it was soon determined that radon was the second leading cause of lung cancer after active smoking. And speaking of smoking, secondhand smoke was recognized as an important health factor with the regard to lung cancer, asthma exacerbations, and inner ear infections in children. In fact, EPA did a landmark study on the health effects of environmental tobacco smoke and declared that ETS was a Class A carcinogen, that is, a known human carcinogen. EPA's ***Respiratory Health Effects of Passive Smoking*** published in January, 1993, showed that ETS exposure increases the frequency of episodes and severity of symptoms in asthmatic children. The report estimated that 200,000 to 1,000,000 asthmatic children have their condition worsened by exposure to environmental tobacco smoke. The research also showed that ETS exposure is a risk factor for new cases of asthma in children who have not previously displayed symptoms. EPA and its partners are working to build the nation's capacity to manage asthma by providing information about treatment guidelines to individuals and families, health care providers, and in community settings where we live, work and play.

Asthma education is important not only to the person who is diagnosed with asthma, but to everyone who is involved in that person's life. The goals of asthma education are to raise awareness that asthma is a serious chronic disease, to ensure the recognition of the symptoms of asthma, and to ensure effective control of asthma by encouraging partnerships among patients, physicians, and other health professionals through modern treatment and education programs. EPA endorses all of these goals and is committed to working with community groups, local organizations, tribal partners, state programs, and other federal agencies to protect the environment, improve the health and quality of life for people who have asthma, and to



lessen the burden of this chronic disease on our society. We have come a long way since those early days of EPA, but our job is not over yet. We still have a long way to go. I can't tell you how glad I am to have had a small role in this important work. Stay well, and breathe easy.

How to Use Inhalers: [http://r20.rs6.net/tn.jsp?e=001ozBBEYFqa60pRSTU42XSUnPCx8vPgiCJHjYcGfEqX-k7mBft8tEJKEI16zpRbGZFXhs2n4zyys16epy\\_rB84y\\_92g0\\_Wht9TaBLHeNNWcWxSWJ6KRzfb00ENCdcJb8cR](http://r20.rs6.net/tn.jsp?e=001ozBBEYFqa60pRSTU42XSUnPCx8vPgiCJHjYcGfEqX-k7mBft8tEJKEI16zpRbGZFXhs2n4zyys16epy_rB84y_92g0_Wht9TaBLHeNNWcWxSWJ6KRzfb00ENCdcJb8cR)

Putting the Pieces of the Asthma Puzzle Together:

[http://r20.rs6.net/tn.jsp?e=001ozBBEYFqa60pRSTU42XSUnPCx8vPgiCJHjYcGfEqX-k7mBft8tEJKEI16zpRbGZFXhs2n4zyys16epy\\_rB84yyVfo\\_N5oq1q8wr7uEBvMg\\_rqpQmx8WjrHVv8X25w5010IHGS\\_DoPDBdSgjGXvn2xSL7GUm6vFJ95CpH90QGZ3r4oEhO6TS6hAs8ShJYwAAShgzmVV6zgoa3TXueShawDVVnZJ9BzfBPgjRntmDvF4W\\_qbstIatQ==](http://r20.rs6.net/tn.jsp?e=001ozBBEYFqa60pRSTU42XSUnPCx8vPgiCJHjYcGfEqX-k7mBft8tEJKEI16zpRbGZFXhs2n4zyys16epy_rB84yyVfo_N5oq1q8wr7uEBvMg_rqpQmx8WjrHVv8X25w5010IHGS_DoPDBdSgjGXvn2xSL7GUm6vFJ95CpH90QGZ3r4oEhO6TS6hAs8ShJYwAAShgzmVV6zgoa3TXueShawDVVnZJ9BzfBPgjRntmDvF4W_qbstIatQ==)

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## Promoting Excellence in Asthma Education

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