



# NEWSLETTER

## Meet the New NAECB Board Members for 2012-14

March 2012

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### Joann Blessing-Moore, MD

Dr. Blessing-Moore is a board-certified pediatric pulmonologist and allergist/immunologist in private practice in Palo Alto and San Mateo, CA. Dr. Blessing-Moore is a member of local and national organizations and has served on numerous committees and held several elected positions and is a pioneer in the field of Asthma Education. She is a fellow in the American Academy of Allergy, Asthma and Immunology (AAAA!); the American College of Chest Physicians and the American College of Asthma, Allergy and Immunology (ACAAI).

She served on the Board of Directors for the ACAAI, and is on the editorial board for the Joint Task Force for Parameters for Asthma and Allergies. She was a representative to the editorial board for Pediatric Asthma - "Promoting the Best Practice". As a member of the ACAAI, she is part of the Asthma Camps Consortium. She served on the NIAID/NHLBI National Asthma Educational Strategy for Asthma Committee and is a current member of the San Mateo County Asthma Coalition.

### Kammy Brown, MBA, PhD, FNP, AE-C

Kammy Brown is a Clinical Program Consultant for Premera Blue Cross, just outside of Seattle. Focused on Healthcare Reform, Kammy supports contracting innovations that incentivize providers to "bend the cost trend" by adding preventive services. Locally, she leads talks on the potential impact for nursing of Health Care Reform and ACO implementation. A clinician by training, Dr. Brown functioned as administrator and practitioner for one of the nation's largest federally qualified

health clinic systems before joining Premera. During that time, she also served as college faculty, teaching basic sciences and women's health, and an Albert Schweitzer fellow mentor to nursing students at both the undergraduate and graduate levels of nursing. Additionally, she continues to act as a manuscript editor for Nursing Economics.

### Timothy R. Hudd BS, Pharm.D., R.Ph., AE-C

Dr. Hudd earned his Bachelor of Science (BS) in Pharmacy and Doctor of Pharmacy degrees from the Massachusetts College of Pharmacy and Health Sciences (MCPHS) in Boston. He is an Assistant Professor of Pharmacy Practice at MCPHS and has been on the faculty for the past eight years. In 2006, he was named Pharmacy Practice Teacher of the Year for the School of Pharmacy - Boston and was recently awarded the 2011 Pharmacy Practice Faculty Preceptor of the Year.

Tim delivers lectures on pulmonary related topics for several graduate and post-graduate programs including the Doctor of Pharmacy Program, Post-BS Pharm.D. Program, and the Masters of Physician Assistant Studies Program. He is nationally certified as an Asthma Educator (AE-C) and is a member of the Massachusetts Asthma Action Partnership (MAAP).

Tim currently manages an ambulatory care rotation at Greater Lawrence Family Health Care Center in Lawrence, MA, and serves as clinical advisor to advanced pharmacy students and residents.

*Continued on page 4*



## Ask an AE-C

Readers are invited to submit questions related to asthma education to: Dennis Wissing, PhD, FAARC, AE-C at [dwissi@lsuhsc.edu](mailto:dwissi@lsuhsc.edu)

Debbie (AE-C) from Indiana writes:

My department on several occasions has attempted to sponsor asthma education to parents who have children with asthma. We scheduled two sessions: in the Fall 2010 and Spring 2011 and both had poor attendance. These hour-long sessions were scheduled on Wednesday evenings. We are the largest local hospital serving several counties and have a large population of children with asthma. Does the NAECB have any suggestions to help us improve attendance if we were to present this educational offering later this spring?

### *NAECB response:*

Several of our board members have been involved with similar programs and have made a number of suggestions that are listed below. We do not know, from your inquiry, how much advertising you had done or how you located your participants—both are key elements when planning for these events. You may want to consider:

1. Contact your hospital's PR department and seek their guidance on how to market your program.
2. Consider another day of the week because Wednesday evening is often when families attend worship services.
3. Make personal contact with each potential referring physician and supply them with information they can distribute to their patients' parents or guardians. Parents will be more likely to attend if suggested by their child's physician.
4. Create effective posters to distribute throughout the hospital including clinic waiting areas. Be sure they are easy to read and provide a contact number for additional information.
5. Obtain a list of email addresses of parents and send announcements about your program.
6. Consider arranging for an asthma specialist to participate during the program to answer questions or provide education to the parents.
7. Consider offering refreshments and door prizes.
8. Increasing the program to 90-minutes in length, including an ice breaker at the beginning of the program, may help participants feel it is worth their time to attend.
9. Set up a display table about asthma in the hospital lobby and provide handout material about the program.
10. Provide local media with a news release about the program.
11. Consider a strategy to network the program through the local school system.
12. Establish a Facebook account for "Parents with children who suffer with Asthma" and network the program and other related issues about asthma.

# A Child's Perspective of How it Feels to Have Asthma

## A Poem by Amanda Lebovitz

(10 years old)

I have asthma, yes I wheeze  
I'm always coughing, I hardly sneeze  
My teachers say be quiet please.  
I don't like being different

At the pool my team swims a mile  
I go a ways and then must sit for a while  
They laugh at me, say my face is fat  
I don't like being different

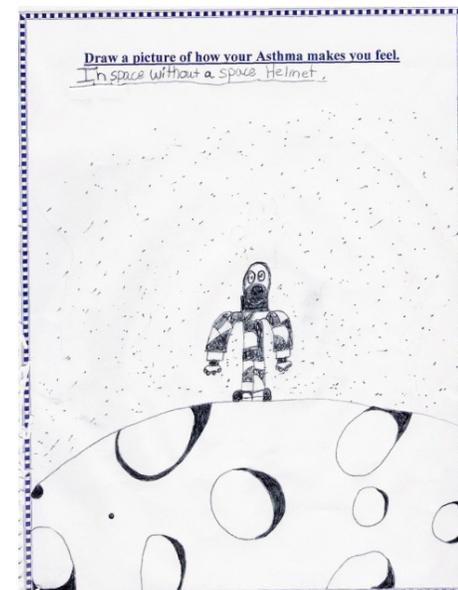
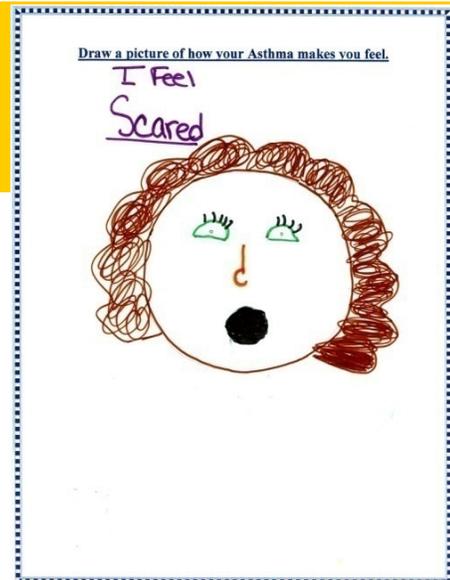
When I do a treatment in public, people stare  
I try to pretend I don't care  
I wish they could see it hurts so bad  
If I could be normal, I wouldn't be sad  
I don't like being different

At asthma camp we are all the same  
We don't call each other names  
When we take medicine, nobody cares  
If you don't have any, you're the odd one there  
I am not different

I get to ride horses and boat and hike  
I get to see what normal feels like  
We sing lots of songs and climb a wall  
There are lots of us kids, some short and some tall  
I am not different

I play with kids that are just like me  
I don't have to explain what is wrong you see  
They understand what the steroids do  
Because most of them have been on them too  
I am not different

If you come to camp and you don't have RAD  
Then you are different but don't feel bad



## Welcome New Board Members (cont. from page 1)

### Kristen Szymonik, BS, RRT, AE-C

Kristen Szymonik holds a Bachelor of Science degree in respiratory therapy and has over 9 years of experience in respiratory care and asthma education. As a registered respiratory therapist and certified asthma educator, she has served her community as the medical center's only asthma educator. Kristen created and implemented one of the few comprehensive asthma education programs in northwest suburban Chicago, and succeeded in billing for inpatient asthma education services. At St. Alexius Medical Center, Kristen served on the High Impact Outpatients Satisfaction Team, the respiratory department's neonatal-pediatric teams, as well as the respiratory leadership team.

Kristen published a bi-monthly asthma newsletter that was distributed to over 500 patients, community members, and healthcare professionals. She also created and implemented an asthma protocol for the emergency department at St. Alexius Medical Center. Kristen is certified in the American Lung Association's Open Airways for Schools, and Asthma 101. She also served as the chairperson of the Respiratory Health Association of Metropolitan Chicago's "Hike for Lung Health" in 2008. Kristen is active in community service and has performed health screenings as part of the American Lung Association's World Asthma Day activities and COPD health initiative. Kristen has a passion for asthma education and believes that early intervention and comprehensive education can save lives.

## Congressional Caucus on Asthma and Allergies

### Mary Cataletto, M.D.

Asthma, alone, accounts for total healthcare expenditures in excess of \$30 billion dollars each year in the United States. Productivity is reduced in both children and adults where it is estimated that approximately 13 million school days and 10.1 million work days are missed due to personal asthma symptoms. Further, activity is limited in up to 75% of adults with asthma. In 2007, the National Asthma Education and Prevention Program published the third edition of the Guidelines for the Diagnosis and Management of Asthma (EPR-3) to assist providers in the delivery of evidenced based care.

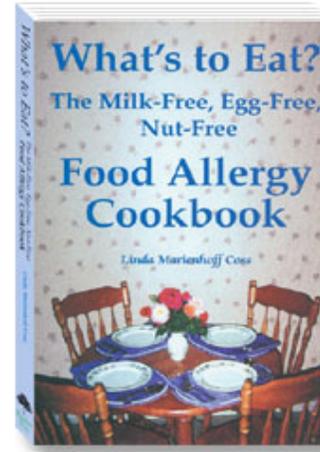
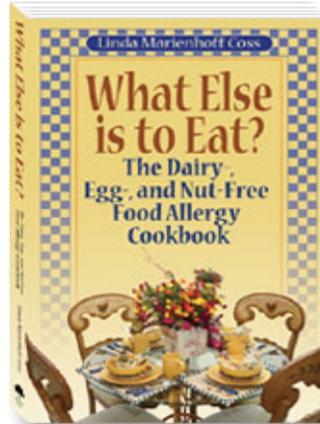
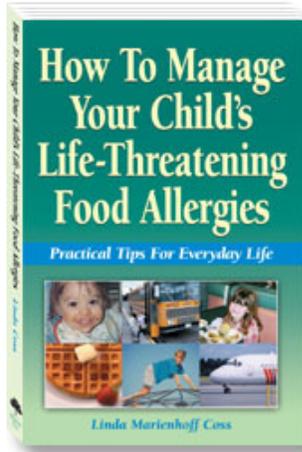


Implementation of the guidelines is far from universal and there has been disparate adoption depending on the particular recommendation. On October 13, 2011, leaders of the Centers for Disease Control (CDC), the National Institutes of Health (NIH), the Asthma and Allergy Network/Mothers of Asthmatics (AANMA), and the Asthma Network of West Michigan (ANWM) met with Congressional leaders Dr. Bill Cassidy (LA) and Nita Lowey (NY). Reps. Cassidy and Lowey are co-chairs of the newly formed *Allergy and Asthma Caucus* to brief legislators about the magnitude of the asthma burden in the United States and to support the use of the EPR-3 guidelines to improve quality, evidenced-based care while providing overall cost savings. The importance of comprehensive proactive care was highlighted by each of the individual speakers and legislators were provided with AANMA's informational resource entitled, *Asthma Impacts America: How Congress can save lives and reduce healthcare costs*.

Karen Meyerson, Manager of the Asthma Network of West Michigan, reported on her group's successful experiences with evidenced-based care resulting in improved outcomes, cost savings and reimbursement for services. Incorporation of certified asthma educators was a key component of the West Michigan program, promoting delivery of standardized key asthma management messages and patient - provider partnerships to optimize asthma care.

We look forward to a cooperative effort and legislative support to improve asthma awareness and healthcare delivery to individuals with asthma.

# Book Reviews



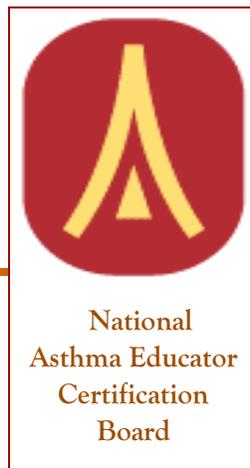
Author: Linda Marienhoff Coss

Linda lives in Southern California with her two sons where she works as a freelance marketing writer. She is the mother of a teenager with potentially fatal food allergies and leads support groups for parents of children with severe food allergies. Her books give easy-to-use information from diagnosis to life style changes at home, school, and in a social environment. Linda is a prize-winning recipe creator. Her cookbook gives 145 recipes from soup to salad to main courses that require only 10-15 minutes to prepare. These books come highly recommended.

## NAECB Board of Directors

### Executive Committee:

Chair: Karen Meyerson  
Chair-Elect: Traci Arney  
Vice-Chair: Gina Spinuzzi  
Treasurer: Stuart Abramson  
Secretary: Sue Bollmeier



### Kris Andrus, Office Administrator

krisandrus@att.net  
Toll-free: 877-408-0072  
Mobile: 616-881-3571

### Exhibits & Presentations:

NAECB successfully exhibited at the AARC Congress 2011. Approximately 500 attendees visited the NAECB booth. If anyone has an annual meeting where you would like to see AE-Cs promoted via a booth or presentation please let us know by contacting Kris Andrus at the Administrative Office.



Stuart Abramson, MD, PhD, AE-C  
Traci Arney, MN, NP-C, AE-C, FAANP  
Joann Blessing-Moore, MD  
Suzanne Bollmeier, Pharm.D., BCPS, AE-C  
Kameka Brown, MBA, PhD, FNP, AE-C  
Dennis Clifton, RRT, AE-C  
Rose Dennis, MS, RN, RRT, CPFT, AE-C  
Linda Ford, MD, FACAAl, FAAAl, AE-C  
Antoinette Gardner, RN, BSN, M.Ed., AE-C  
Andrew Harver, PhD, AE-C  
Debi Holloway, BA, RRT, AE-C  
Timothy Hudd, BS, Pharm.D., R.Ph., AE-C  
Carol Jones, RN, AE-C  
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DNP, APRN, CPNP, FNP-BC, AE-C  
Capt. John Manning, RN, MSN, PNP, AE-C  
Karen Meyerson, MSN, RN, FNP-C, AE-C  
Romelia Rodriguez Walters, AE-C  
Gina Spinuzzi, RRT, AE-C  
Kristen Szymonik, BS, RRT, AE-C

# Asthma in the News

## Researchers Study Biofeedback for Asthma

National Jewish Health researchers are delving into the biology of biofeedback to understand how it helps asthma patients and what role it could play in reducing medication use for the chronic lung disease.

<http://medicalxpress.com/news/2011-11-biofeedback-asthma.html>

## Asthma Control Improved with Inhaler Technique Training by Pharmacists

Inhaler training by pharmacists is feasible and seems to improve inhaler technique, asthma control, and adherence.

<http://www.sciencedirect.com/science/article/pii/S0954611111002186>

## Consistent Medication Use Key to Reducing Severe Asthma Attacks

Researchers at Henry Ford Hospital in Detroit have found that one-quarter of severe asthma attacks could be prevented if only patients consistently took their medication as prescribed. Moreover, the researchers found that an asthma attack was only significantly reduced when patients used at least 75% of their prescribed dose, rather than basing dosage on the onset and degree of symptoms as they often do.

[http://www.jacionline.org/article/S0091-6749\(11\)01481-3/abstract](http://www.jacionline.org/article/S0091-6749(11)01481-3/abstract)

## Asthma and Allergy Foundation of America's (AAFA) Asthma Management and Education Online Program

This interactive web-based course structured around the National Heart, Lung, and Blood Institute's (NHLBI) "Four Components of Asthma Management" includes 12 modules of interactive, self-paced study. Upon completion of the full course Nurses and Respiratory Therapists will be eligible to earn 7 continuing education credits. For more information, please visit:

<http://www.aaafa.org/display.cfm?id=4&sub=79&cont=432>

### *The mission*

*of the National Asthma Educator Certification Board is to promote optimal asthma management and quality of life among individuals with asthma, their families and communities, by advancing excellence in asthma education through the certified asthma educator (AEC®) process.*

## Survey: 49% of Asthma Patients are Not Using Controller Medications

Forty-nine percent of children and adults with persistent asthma are not using controller medications according to results of a first of its kind survey of 1,000 asthma sufferers. Results are published in the March 2012 issue of *Annals of Allergy, Asthma & Immunology*, the scientific journal of the American College of Allergy, Asthma and Immunology (ACAAI).

<http://www.news-medical.net/news/20120227/Survey-4925-of-asthma-patients-are-not-using-controllers.aspx>

## Amish Farm Children Have Lower Asthma, Allergy Risk: Study

Children growing up in the Amish culture in Switzerland have significantly less asthma and allergies than Swiss children who didn't grow up on a farm, according to new research. The study's findings were presented at the American Academy of Allergy, Asthma and Immunology (AAAAI) in Orlando, Florida, in March 2012.



The study's findings would seem to support the hygiene hypothesis, which is the idea that allergy and asthma are on the rise in today's world because the immune system isn't exposed to a variety of germs from a young age. This low level of exposure somehow creates dysfunction in the immune system, causing it to attack harmless substances, such as pet dander or peanut proteins.

Two other studies presented at the AAAAI meeting may also provide support for the hygiene hypothesis. One is a Korean study of about 1,800 children. It found that when antibiotics were given during infancy, children were more likely to develop allergies and allergic skin disease (eczema).

The other was a study from Johns Hopkins Hospital that looked at environmental exposures to chemicals. Researchers found that exposure to triclosan, a commonly used antibacterial agent found in hand sanitizers and mouthwashes, was significantly associated with allergies to food and airborne allergens, such as dust or pollen.