Minnesota Asthma Alliance Summit — May 12, 2011

The Minnesota Asthma Alliance Summit was held in St. Paul on May 12, 2011. More than 105 people attended representing nurses, pharmacists, physicians, nurse practitioners, respiratory therapists, dieticians, medical assistants, and public health nurses, administrators and health educators.

The first panel presentation, "Putting the Quality Measure for Optimal Asthma Care into Practice", included an overview of the Optimal Asthma Care Measure, two presentations on how the measure was put into practice, and examples of quality improvement tools and education. Presenters were Erica Fishman, MSW, MPH, LISW, Cherylee Sherry, MPH, CHES, and Susan Ross, RN, AE-C, all from the MDH; Ellen Pinkowski, RN, from Children’s Physician Network; and Sarah Manney, DO, FAAP, from Essentia Health Clinic Duluth. (continued on page 6)

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MDH Launches RETA-Home

MDH launched this free online training on World Asthma Day, May 3, 2011. Reducing Environmental Triggers of Asthma in the Home (RETA-Home) is designed specifically for Public Health Nurses and Certified Asthma Educators. This training will also be helpful for clinic staff and anyone else who wants to learn more or provide additional information on environmental triggers of asthma found in homes. This training is found at: www.retahome.org
Statewide asthma hospitalization rates have been declining since 1998; however, the trends differ for Twin Cities metropolitan area and Greater Minnesota adults and children.

Children in the 7-county Twin Cities metropolitan area (Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, and Washington counties) have consistently had the highest rates of asthma hospitalizations in the state, although their rates have decreased dramatically over the past 10 years (purple line).

Asthma hospitalization rates for adults in the Twin Cities have also been declining over the same time period (light green line), while rates for adults in Greater Minnesota (dark green line) have remained relatively stable. Asthma hospitalization rates for children in Greater Minnesota (turquoise line) rose through the mid-2000’s but have since declined and remain lower than rates for children in the metro area.

**Source:** Minnesota Hospital Association

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**New Portal Available to Access MN Health and Environment Data**

The Minnesota Department of Health (MDH) has launched a new website, Minnesota Public Health Data Access, an electronic gateway to Minnesota health and environment data. Local health professionals and others may use this portal to gather information about health and environment trends over time, and to conduct queries of state and county-level data in Minnesota.

Data are available for 10 topics: air quality, asthma, chronic obstructive pulmonary disease (COPD), heart attacks, childhood lead poisoning, carbon monoxide poisoning, reproductive outcomes, cancer, birth defects, and drinking water quality. Additional data and tools, including interactive web maps, will be added to the portal by August 2011.

Currently, asthma hospitalizations data for 2000-2008 are available at the state and county level. COPD hospitalizations data also are available over the same time frame at the state level. These data may be downloaded in a standard format that is easily imported into Excel or other software for analysis and reporting.

Minnesota Public Health Data Access is updated and maintained by the Minnesota Environmental Public Health Tracking Program (MN EPHT) through a cooperative agreement between MDH and the US Centers for Disease Control and Prevention. Data available through the portal are gathered with the support of several MDH programs and the Minnesota Pollution Control Agency.

The data can be accessed at: [https://apps.health.state.mn.us/mndata](https://apps.health.state.mn.us/mndata). To sign up to receive data portal email updates, click on the link at the upper right column of the page.
MDH AE-C Survey Results Now Available

In March 2011, the MDH Asthma Program surveyed current and former Certified Asthma Educators (AE-C) in Minnesota. Similar to results from a 2010 Wisconsin Asthma Coalition (WAC) AE-C survey, the Minnesota survey results indicate that a large percentage of Minnesota’s AE-Cs who participated in the MDH survey do not plan to pursue recertification, in part due to barriers involving the recertification process. A summary of survey results was emailed to the National Asthma Education Certification Board (NAECB) for consideration during their April meeting. According to an email from the NAECB to Kristen Grimes with the WAC, the NAECB is appointing an exploratory committee to gather more information about Continuing Education Units (CEUs) for potential recertification. This group will bring recommendations to their next face-to-face meeting in August. The NAECB also plans to create and disseminate their own survey of AE-C’s nationwide regarding their opinions about recertification. The NAECB will send a formal response once a decision has been made.

Complete survey results from the Minnesota survey can be viewed on the MDH Asthma website at http://www.health.state.mn.us/asthma/factsheets.html

FDA Requires Post-Market Safety Trials for Long-Acting Beta-Agonists (LABAs)

To further evaluate the safety of Long-Acting Beta-Agonists (LABAs) when used in combination with inhaled corticosteroids for the treatment of asthma, the U.S. Food and Drug Administration (FDA) is requiring the manufacturers of LABAs to conduct five randomized, double-blind, controlled clinical trials comparing the addition of LABAs to inhaled corticosteroids versus inhaled corticosteroids alone.

Each trial will evaluate one of the following LABA-containing drugs: 1) Symbicort, 2) Advair Diskus, 3) Dulera and 4) Foradil. The clinical trials will begin in 2011 and FDA expects to receive results in 2017.

For more information on this study go to the FDA website at http://www.fda.gov/Drugs/DrugSafety/ucm251512.htm

Primatene Mist No Longer Available after Dec. 31, 2011

The only over-the-counter asthma inhaler sold in the United States will no longer be available after December 31, 2011, as part of an international agreement to stop the use of substances that damage the environment. Primatene Mist (epinephrine) is approved by the Food and Drug Administration (FDA) for the temporary relief of occasional symptoms of asthma. The FDA urges those who use Primatene Mist to see a health care professional as soon as possible to have their asthma assessed and switch to a different asthma medication. Primatene Mist inhalers are being discontinued because they use chlorofluorocarbons (CFCs) as a propellant (spray) which moves the medicine out of the inhaler.

Most manufacturers have changed their inhalers to replace CFCs with an environmentally friendly propellant called hydrofluoralkane (HFA). There is currently no HFA version of the Primatene Mist inhaler. For more information go to the FDA website: http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm247196.htm
**NIH Study Finds Omalizumab Relieves Seasonal Asthma Attacks in Youth**

Research supported by the National Institute of Allergy and Infectious Diseases (NIAID), part of NIH, found that Omalizumab, a drug that targets the antibody immunoglobulin E (IgE), a key player in asthma, nearly eliminated seasonal increases in asthma attacks and decreased asthma symptoms among young people living in inner city environments. Omalizumab is sold under the brand name Xolair. NIAID Director Anthony S. Fauci, MD, stated that the results show “that the addition of omalizumab to NIH guidelines-based therapy for asthma offers improved asthma control and the potential to decrease the burden . . . in children and adolescents.” The article concludes that, “for inner-city children, adolescents, and young adults, Omalizumab further improved asthma control, nearly eliminated seasonal peaks in exacerbations, and reduced the need for other medications to control asthma”.


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**Study Finds Only 1 in 10 Children with Asthma Use Traditional Inhalers Correctly**

Less than one in 10 children with asthma use traditional inhalers correctly, according to a new study from the University of North Carolina (UNC) at Chapel Hill. While children have more success with newer inhaler designs, at best only one child in four gets it completely right, according to an article “Provider Demonstration and Assessment of Child Device Technique during Pediatric Asthma Visits” published in the March 28, 2011 issue in the journal *Pediatrics*. The abstract of the study article is available at [http://pediatrics.aappublications.org/content/early/2011/03/28/peds.2010-1206.abstract](http://pediatrics.aappublications.org/content/early/2011/03/28/peds.2010-1206.abstract)

Researchers led by Betsy Sleath, Ph.D., at the UNC Eshelman School of Pharmacy studied 296 North Carolina patients aged 8 to 16 years old who used four different devices to manage their asthma. Only 8.1 percent of children in the study performed all of the metered-dose inhaler steps correctly. The researchers also found that the majority of health-care providers who participated in the study (41 providers at five clinics) did not demonstrate or assess children’s use of the four devices during pediatric asthma visits.


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**Warning about Hair Smoothing Products That Contain Formaldehyde**

On April 20, 2011, MDH issued a warning about potential health risks associated with the use of hair smoothing products that contain formaldehyde. These hair treatments are sometimes known as “Keratin Treatments” or “Brazilian Blowouts”.

People who have asthma may more likely experience adverse reactions to the chemicals in these products. Risks associated with formaldehyde include eye, nose and throat irritation; breathing difficulties including coughing, wheezing and asthma; headache; fatigue; skin rash; and severe allergic reactions. Formaldehyde may also increase the risk of cancer, particularly nasal cancer.

The Occupational Safety and Health Administration in Oregon and Health Canada found that some of the products they tested contained high levels of formaldehyde but formaldehyde was not listed on the label or in the Material Safety Data Sheet (MSDS) as required by law. Although Federal OSHA issued a “hazard alert” in April, these products continue to be used. Last month the National Institute for Occupational Safety & Health (NIOSH) completed a Health Hazard Evaluation of Brazilian Blowout Acai Professional Smoothing Solution - Formaldehyde Free Smoothing Formula. NIOSH found that the formaldehyde free smoothing formula contained 11% formaldehyde by weight, and air concentrations greater than 0.1 ppm. Details of this report can be found at: [http://www.cdc.gov/niosh/hhe/pdfs/HETA_11-0014_Interim_Letter_for_web.pdf](http://www.cdc.gov/niosh/hhe/pdfs/HETA_11-0014_Interim_Letter_for_web.pdf)

In addition, several congressmen/women have written to the Commissioner of the Food and Drug Administration requesting immediate action on the matter of formaldehyde in hair smoothing products.


For a copy of the MDH fact sheet, *Hair-smoothing Products that Contain Formaldehyde*, including a list of the products that contained the highest percentage of formaldehyde, go to: [http://www.health.state.mn.us/asthma/workplace.html](http://www.health.state.mn.us/asthma/workplace.html)
Everyone Breathe™ – an educational program geared toward raising awareness of asthma – launched a new initiative on April 28 in partnership with the Asthma and Allergy Foundation of America (AAFA). It is aimed at improving the quality of asthma care and asthma education in schools across America.

Parents or guardians of children with asthma are invited to nominate their child and child’s school for the Everyone Breathe Asthma Education savings bond and grant. Ten winning applications will be selected. Selected students with winning applications will receive $2,500 savings bonds for their continued education and the schools nominated in the winning applications will receive $5,000 grants to implement the proposal outlined in the application to help improve asthma care and education at the school.

Everyone Breathe™ encourages interested parents or guardians to work closely with school administrators or parent-teacher organizations to apply for the savings bond and grant. They will have the opportunity to share their child’s experience with asthma, explain why their child is deserving of a savings bond and propose ways to make their child’s school more asthma-friendly. Applications will be reviewed by a judging panel, which includes Mary Joe Fernandez and a representative from AAFA. Awards will be based on creativity, overall need for the grant and student savings bond, and level to which students with asthma will be positively impacted.

Application forms are available at www.EveryoneBreathe.com and will be accepted until July 29, 2011. Winners will be announced in September 2011.

More information can also be found at http://www.businesswire.com/news/home/20110428005049/en/Breathe-Launches-Asthma-Education-Grant-Program-Raise
Beacon Program Releases Asthma ‘Toolkit’ to Schools in 11 Counties

The Southeast Minnesota Beacon Program, a federally funded health information technology research effort, has released an asthma "toolkit" to help nurses and other staff members in the public schools of 11 southeastern Minnesota counties effectively deal with children’s chronic asthma symptoms in school. The kit contains educational materials and offers opportunities with the Beacon program. The ultimate goal is to collaboratively develop what Beacon leaders call a "cocoon of care" for children with asthma, by coordinating efforts and information about student needs among their homes, health providers and schools. According to Erin Knoebel, M.D., Mayo Clinic pediatrician and coordinator of the toolkit project, “This is one of the first tangible advancements of the Beacon effort. It means that all participating schools will have the information and resources to develop their own asthma action plans to help their students.” The Asthma Management Plan Toolkit is available on the schools page of the Southeast Minnesota Beacon website at http://semnbeacon.wordpress.com/schools/.

A number of documents provided on the Beacon site were developed by the MDH and can also be found on the MDH Asthma website: www.health.state.mn.us/asthma

(continued from page 1)

Asthma Alliance

The second panel presentation, “Patient Empowerment and Patient Engagement: Opportunities to Improve Asthma Outcomes”, included an overview of patient empowerment/patient engagement followed by examples from the clinical setting and the home setting. Tools to assess and reduce environmental triggers in the home were highlighted. Presenters included Molly Ekstrand, RPh, AE-C, CDE, from Fairview Pharmacy Services; Gail Brottman, MD, from Hennepin County Medical Center; Kay Kufahl, LRT, AE-C, from Pediatric Home Service; and Kathy Norlien, MS, CPH, from MDH.

Participants provided information on their accomplishments and ideas for future asthma activities related to the Strategic Plan for Addressing Asthma in Minnesota – Updated 2007 by writing on post-it notes that were then shared. A small table activity gave participants the opportunity to “discuss powerful questions and think about possibilities” related to issues that arise in their practice.

Networking occurred during the breaks and at the table discussions. An overwhelming number of participants said they would be willing to attend another Asthma Alliance Summit and to recommend attendance to colleagues.

Slide sets and other information from the Asthma Alliance Summit can be found at: http://www.health.state.mn.us/asthma/aasummitproceedings051211.html

Dr. Sarah Manney, Essentia Health Clinic, Duluth

Dr. Gail Brottman, Hennepin County Medical Center

Cheryl Smoot, MDH
Asthma Educator Institute
September 20-21, 2011
The American Lung Association in Minnesota (ALAMN) Asthma Educator Institute is a two-day workshop for individuals wanting to improve their ability to provide asthma education for patients and families with asthma.

It is expected that many of these individuals will go on to take the certified asthma educator exam offered by NAECB and become certified asthma educators.

Where: ALAMN, 490 Concordia Ave, St Paul, MN
Cost: $250.00 before September 8, 2011
To register: http://www.mrsnv.com/evt/home.jsp?id=3203

For additional information or questions contact Cheryl Sasse at 651-223-9565 or cheryl.sasse@lungmn.org.

Camp SuperKids
June 26—July 1, 2011
Camp SuperKids is an educational and fun summer camp where children with moderate to severe asthma learn to better manage and control their disease while participating in exciting camp activities. Highly skilled medical staff provides 24-hour medical supervision and instruction during camp. Camp SuperKids is in its 45th summer and is a project of the American Lung Association in Minnesota. Camp this year will be from Sunday, June 26 – Friday, July 1, at YMCA Camp Ihduhapi in Loretto, MN and is open to ages 7-13. For more information please visit http://www.lungusa.org/associations/states/minnesota/events-programs/asthma-camp-1.html or contact Cynthia Isaacson at 651-268-7587 or Cynthia.isaacson@lungmn.org.

Survey on MDH Asthma Program Resources
Closes Tuesday, June 28, 2011
To ensure the MDH Asthma Program addresses your needs, please consider completing a short survey regarding the program’s resources, such as the newsletter and the website. Your input will be used to improve our communications resources. Neither your name nor any identifying information is requested.

We would greatly appreciate your participation in the survey which can be accessed at https://survey.vovici.com/se.ashx?s=56206EE3146E4EB0 through Tuesday, June 28, 2011.

Spirometry Webinar Trainings
Archived
These 45 minute trainings are available for quick trainings and refreshers on spirometry in the clinic setting. Topics include “Basics of Spirometry,” “Differential Diagnosis of Asthma” and “COPD Masqueraders of Asthma”

BREATHING SPACE, a quarterly respiratory disease newsletter, is produced by the Minnesota Department of Health Asthma Program. The purpose of this newsletter is to provide health professionals, school nurses, and community members with current research, information, and resources on respiratory disease.

This newsletter is supported by Grant/Cooperative Agreement #1U59EH000498-01 from the Centers for Disease Control and Prevention (CDC). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the CDC.

**Questions about lung health?**
Call 1-800-548-8252
American Lung Association Call Center

**MDH Asthma Staff Contact Information:**
Asthma Program Telephone Number: 651-201-5909
Toll Free Number: 1-877-925-4189
Asthma Web Site: [http://www.health.state.mn.us/asthma/](http://www.health.state.mn.us/asthma/)

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