

fresh AAFA™



Asthma and Allergy Information Resource • Summer 2017



Purpose is front of mind for us at AAFA: we are here to make a difference in the lives of people with asthma and allergies. Our education,

advocacy and research work is tied to what will improve the lives of those we serve. Please join us as we work to save lives and improve lives. Visit our websites aafa.org and kidswithfoodallergies.org to find ways to stay connected with us, to get involved, or to support our work. We can't do it without you!

Best wishes for good health,

Heidi J. Bayer

Heidi J. Bayer
AAFA Board Chair

Preparing for A HEALTHY SCHOOL YEAR



Start communication early. Talk to your school's or district's administration as early as possible. Find out about school medicine policies, staff training, dietary accommodations and emergency action plans in advance. Schedule meetings with teachers, school nurse, principal and dietary manager before the first day of school. Get copies of all of the forms you will need to fill out.

Visit your child's doctor before school starts. Get all the prescriptions your child will need well before the first day of school. Have your doctor sign all the school's forms. This process can take several days or even weeks, so it's best to take care of it during the summer. Keep in mind that September is the peak month for asthma attacks, especially for school-aged children. As kids return to school, illnesses start to spread. Get the flu shot at least two weeks before school starts. The pneumococcal vaccine provides protection against pneumonia. It is recommended for kids and adults with asthma.

Turn everything in before the first day of school. The first day is hectic. You'll want to send your child to school knowing everyone is prepared in case of an emergency. The school needs to have your child's emergency action plan, medication forms and medicines.

Encourage your child. Teach your child age-appropriate skills to help them manage their asthma or allergies. It is important that they feel comfortable telling an adult if they are having symptoms of an asthma attack or allergic reaction.

Planning for the school year can take a lot of stress off your child, your child's school administration and you. Visit aafa.org/school and kidswithfoodallergies.org/school for more ways to manage your child's asthma and allergies at school.



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A WORD FROM AAFA's CEO



Fall is coming: kids are going back to school, the days will grow cooler and Halloween is right around the corner. It also means it's time to manage our asthma and allergies. We encourage you to

join our online support communities for tips on managing asthma and allergies; avoiding your allergens; and finding safe recipes your whole family can enjoy. By registering for our free communities, you will stay up-to-date with our e-newsletters and blogs to find out the latest news, food and medicine recalls and research. Sign up at community.aafa.org or community.kidswithfoodallergies.org.

Warmly,

Lynda Mitchell

Lynda Mitchell
Acting AAFA CEO

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POLLEN GOT YOU DOWN? Here's How to Fight Back

Pollen is one of the most common triggers of seasonal allergies. "Hay fever" or "seasonal allergic rhinitis" affects millions of people every spring, summer and fall season. During these times, plants release tiny pollen grains to fertilize other plants of the same species. Most of the pollens that cause allergic reactions come from grasses, trees and weeds.

Symptoms of a pollen allergy include runny nose, sneezing, itchy or stuffy nose, red and watery eyes. If you show any of these symptoms, it is important to visit your doctor. Once diagnosed with a pollen allergy, here are actions you can take to reduce allergic reactions to pollen:

- **Limit your outdoor activities when pollen counts are high.** This will lessen the amount of pollen allergen you inhale and reduce your symptoms.
- **Keep windows closed during pollen season and use central air conditioning.** This applies to your home and to any vehicle (car, bus, train, etc.).
- **Start taking allergy medicine before pollen season begins.** Most allergy medicines work best when taken this way. This allows the medicine to prevent your body from releasing histamine and other chemicals that cause your symptoms.
- **Bathe and shampoo your hair daily before going to bed.** This will remove pollen from your hair and skin and keep it off your bedding.
- **Wash bedding** in hot, soapy water once a week.
- **Wear sunglasses and a hat.** This will help keep pollen out of your eyes and off your hair.
- **Limit close contact with pets** that spend a lot of time outdoors.
- **Change and wash clothes** worn during outdoor activities.
- **Dry your clothes in a clothes dryer,** not on an outdoor line.

Certain over-the-counter and prescription medicines may help reduce pollen allergy symptoms as well. Effective options include antihistamines, decongestants, nasal sprays, and in some cases, allergy shots. Be sure to discuss your allergy symptoms and your allergy treatment plan with your health care provider.

Experts Address Common Questions About Treating **ASTHMA IN CHILDREN**



Nearly 10% of children in the United States have asthma, and approximately 60% of these children experienced an asthma attack in the last year. Is your child one of them? How can you help get their asthma under control?

The Asthma and Allergy Foundation of America (AAFA) and Med-IQ, an award-winning, ACCME-accredited provider of continuing medical education (CME), have collaborated to create an audio-enhanced educational tool, *Managing Your Child's Asthma: Ask the Experts*, to help patients with asthma, along with their parents and caregivers, better understand their condition and how to manage it.

In this tool, audio clips of a discussion among faculty experts provide answers to commonly asked questions, including:



What is asthma, and what causes it?



How do I identify and avoid my child's asthma triggers?



What is an asthma action plan?



Will vaccinations or allergy shots help with my child's asthma?

Parents and caregivers are essential in supporting and aiding the patient in understanding and following their management plan, so it is important that they stay up-to-date with continued education on asthma, medications and proper inhaler techniques. *Managing Your Child's Asthma: Ask the Experts* addresses the daily challenges of living with and managing asthma. It strives to translate recent clinical evidence and science into understandable, usable information to allow more effective communication among patients, caregivers and clinicians. Visit aafa.org/asthma-audio to listen to the clips.



SMART ALLERGY SHOPPING FROM THE PALM OF YOUR HAND

AAFA's **asthma & allergy friendly**[®] Certification Program App is available for download on iOS and Android devices. The app helps you make healthier choices when buying allergen-avoidance products.

AAFA awards the **asthma & allergy friendly**[®] Certification Mark to products and services that are scientifically proven to be more suitable for people with asthma and allergies. Visit aafa.org/certified to learn more!



WHIP UP THIS GREAT DESSERT

Free of the Top 8 Allergens

Kids With Food Allergies (KFA) offers a collection of over 1,300 allergy-friendly recipes. Safe Eats® is a free resource for families managing food allergies.



Mini Raspberry Cookie Shooters

Ingredients

For Cookie Crumb Crust:

- ½ C safe vanilla cookie crumbs
- 1 Tbsp sugar
- 2 Tbsp milk-free margarine, melted

For Raspberry Filling:

- ⅓ C sugar
- 1 Tbsp cornstarch
- 3 C frozen raspberries plus more for garnish
- 2 tsp lemon juice
- ½ Tbsp milk-free margarine
- 1 9-oz container So Delicious® Dairy Free CocoWhip Original Coconut Milk Frozen Dessert Topping, thawed
- 6 mini shooter containers or small glass cups

Directions

Combine cookie crumbs, sugar and melted margarine for the crumb crust. Spoon a layer of the crumb crust on the bottom of each 2 oz shooter container.

Next, combine raspberries, sugar, cornstarch, lemon juice over medium heat and continue stirring for about three minutes until berries have popped. Turn to low heat, add margarine and stir for another minute. Let mixture cool and then add a spoonful on top of the crumb crust. Refrigerate until cooled.

Next, add a spoonful of thawed dessert topping on top of the berry mixture. Top with a fresh raspberry. Enjoy!

You can download a free cookbook filled with delicious allergy-friendly desserts at kidswithfoodallergies.org/cookbook

AAFA – A Place for Families to Find Support

AAFA's support center is open to the general public, and targeted towards the 25 million people (plus their caregivers) with mild, moderate and severe allergic asthma or non-allergic asthma, as well as the 50 million people with allergies, including food allergies.

To better serve patients, AAFA offers several support programs.

We host free online support communities and provide educational resources. Through our online communities, you can connect with others and stay up to date on news and research. For asthma and allergy support, join us at community.aafa.org. For food allergy support, join us at community.kidswithfoodallergies.org.

Ask the Allergist™ is another free service we provide. Our allergist will answer your questions and provide general advice about asthma and allergies.

For local support, we have five regional AAFA chapters that provide services, programs and support.

There are also AAFA-affiliated support groups across the country. These groups offer support and events.

For more information:

Visit www.aafa.org

Email info@aafa.org

Call 800-7-ASTHMA



A BREAKTHROUGH in Peanut Allergy Prevention



New guidelines recommend giving peanut-containing foods to babies as young as four months old. This reverses decades-old research recommending that high-risk children avoid peanut until they were three years old.

In 2015, a study called LEAP (Learning Early About Peanut Allergy) suggested that early introduction of peanuts could prevent peanut allergy. It was the first study of its kind to show how giving peanuts early to high-risk infants can help prevent the development of the allergy.

As a result, the National Institutes of Health formed a panel of doctors, scientists and public health experts (including the Asthma and Allergy Foundation of America). The panel created new guidelines for the early introduction of peanut to infants:

1

Infants at high risk of developing peanut allergy due to severe eczema, egg allergy, or both should have peanut-containing foods introduced into their diets as early as 4 to 6 months of age. All infants in this group should have peanut-specific IgE blood testing or skin prick testing performed prior to introduction.

2

Infants with mild or moderate eczema should have peanut-containing foods introduced into their diets around 6 months of age. No testing is necessary in this group prior to introduction.

3

Infants without eczema or any food allergy should have peanut-containing foods freely introduced into their diets, without any testing beforehand.

The guidelines for introducing peanuts to infants will depend on their risk of peanut allergy. It is important to note that your child should be introduced to other solid foods before peanut-containing foods. Giving whole peanuts to infants can present a choking hazard. Be sure to consult your doctor if you have any questions. To learn more, please visit kidswithfoodallergies.org.

AAFA AROUND AMERICA

The Asthma and Allergy Foundation of America has five regional chapters. Regional chapters work with volunteers, health care providers, government agencies and local leaders in their community. They also provide a variety of services, educational programs and support.

AAFA Alaska Chapter
toll-free 800.651.4914
aafaalaska.com

**AAFA Maryland-
Greater DC Chapter**
410.484.2054
aafa-md.org

AAFA Michigan Chapter
toll-free 888.444.0333
aafamich.org

**AAFA New England
Chapter**
781.444.7778
asthmaandallergies.org

AAFA St. Louis Chapter
314.645.2422
aafastl.org



Looking for help near you?

There are 57 AAFA-affiliated educational support groups around the U.S. To find a group near you, visit aafa.org/groups.



DR. DOUGLAS JOHNSTON is our Ask the Allergist columnist.

Dr. Johnston is a Board-Certified Allergist/Immunologist with Asthma & Allergy Specialists, PA, in Charlotte, North

Carolina. He obtained his DO from New York Institute of Technology College of Osteopathic Medicine. He completed his residency at Winthrop University Hospital in Mineola, New York.

Dr. Johnston grew up with both allergies and asthma. He decided it would be exciting to help people with these conditions. His passion about food allergies also comes from having a child with a peanut allergy.

Information from Ask the Allergist is not a substitute for a consultation with a health care professional. Always talk with your own doctor before making changes to your asthma or allergy management plan.

ASK THE ALLERGIST

Your Questions, AAFA's Answers

Question Are the sulfites in wine the same as sulfa drugs?

Answer No, these are quite different. Sulfa antibiotic allergy is the development of an IgE antibody against parts of "sulfonamide antibiotics." One common antibiotic of this type is sold under brand names like Bactrim or Septra. Sulfa antibiotic allergy may result in a severe allergic reaction called anaphylaxis. Anaphylaxis symptoms may include hives, swelling, respiratory distress, or a drop in blood pressure. Sulfites are chemicals used to preserve food and wine. Some people can develop intolerance to sulfites. This is not a true allergy, since an IgE antibody against sulfites never develops. This makes testing very difficult, because most allergy tests are specifically trying to detect specific IgE. Sulfite intolerance can cause breathing difficulty for people with asthma. Sulfites in foods and drinks can worsen symptoms of asthma such as wheezing, coughing, chest tightness or shortness of breath. Sulfite sensitivity is very unusual in people that do not have asthma. An evaluation by a board-certified allergist may be helpful if there is confusion in the type of reaction you may be having.



Question Are allergy shots custom made? I live in Alaska. Since environmental allergens are specific, I wondered how a doctor would know if the shots would work for my area. If I live in a remote area, can allergy shots be done at home? Are allergy shots widely accepted as medically necessary by insurance companies?

Answer Allergy shots are customized based on allergic sensitivities found on skin prick testing or allergy blood tests. Skin prick testing may vary based on the geographic region. Blood tests have panels based on geographic regions as well. Allergy shots have two phases. The "build up" and the maintenance phase. During the build up phase, shots are given at least once a week. During this phase, each shot is stronger than the previous one. Once the top dose or maintenance dose is reached, your allergist will spread out the shots with a goal of receiving the maintenance dose once a month. There is a risk of allergic reaction to the allergy shot. It is recommended that doctors give the shots in a supervised setting, such as their office. Allergy shots are widely accepted as a standard of care for treatment of asthma and nasal allergies (allergic rhinitis). However, not all insurance covers them.



POLLEN ALLERGY TIP:

Reduce pollen build up in your bedroom: no shoes, no pets, no open windows, no "dirty" clothes allowed in your sleeping area. Shower at night to remove pollen from your hair and face so it doesn't end up in your bed.

Allergic Living is a magazine for families with asthma and allergies. Each issue offers news, stories, recipes and more! Subscribe today at allergicliving.com.



Question We recently found out my son is allergic to peanuts, soybeans, cow milk and whole egg. Is there any way you can send me a breakfast, lunch and dinner plan on what he can eat? My son is 16 months old. I would greatly appreciate it.

Answer I recommend discussing a referral to a registered dietitian. A registered dietitian can help make recommendations about which foods to avoid while creating a nutritious diet plan. It is not unusual to seek the help of a registered dietitian for children who have multiple food allergies.

Also, please check out kidswithfoodallergies.org. The KFA website has a recipe database, searchable by the allergens you need to avoid, and there are label reading resources, nutritional information and more. Log into our online community, community.kidswithfoodallergies.org and post your requests for recipe and meal planning help. Volunteers and staff are available to offer you personalized answers to your questions and recipe requests.



On July 13, 2017, advocates big and small joined us at the U.S. Capitol for a day of action at a Play-In for Climate Action. AAFA partnered with Moms Clean Air Force to raise awareness about climate change, air pollution, public health and asthma.



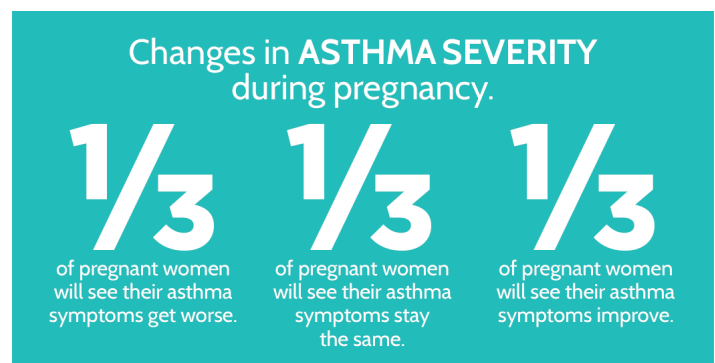
MANAGING ASTHMA WHILE PREGNANT - It Can be Done!

Asthma complicates up to 7% of all pregnancies, and is one of the most common medical problems that can occur during those nine months. Pregnant women with asthma may be at greater risk for delivering early, or the infant may have low birth weight. As a result, optimal control of asthma during pregnancy is the best way to cut the risk of complications.

About one-third of pregnant women with asthma will see their asthma symptoms worsen. Another third will stay the same. The last third will see their asthma symptoms improve. Pregnant women should follow their asthma symptoms closely. Uncontrolled asthma cuts the oxygen content of the mother's blood, leading to decreased oxygen in the fetal blood. Since the fetus requires a constant supply of oxygen for normal

growth and development, asthma symptoms must be managed.

Maintaining asthma control is very important. Continuing to take approved asthma medicines while pregnant will help keep both mother and baby healthy.





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Leave a lasting legacy of support by including AAFA in your will. Contact Jen Sweeney at 202-466-7643 ext 256 for more information.

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