Asthma and Allergy Foundation of America

March 8, 2024

Patrick Woodcock
CEO and President
Maine Chamber of Commerce
128 State Street; Suite 101
Augusta, ME 04330-5630

Dear Mr. Woodcock,

I serve as the President and CEO for the Allergy & Asthma Foundation of America (AAFA). AAFA is dedicated to saving lives and reducing the burden of disease for people with asthma and allergies through support, advocacy, education, and research. It is for that reason that I wanted to write to you to express my concerns.

The Maine legislature is currently considering making improvements to legislation that passed in 2021. The original bill intended to reduce the use of per-and polyfluorinated substances (PFAS) in products sold in Maine. Unfortunately, there are unintended consequence of the law. Specifically, one would be the ban of many inhaled respiratory medicines from being made available in Maine for patients living with asthma and chronic obstructive pulmonary disease (COPD) due to a narrow definition of PFAS.

Many inhaled respiratory medicines are delivered via pressurized metered dose inhalers (pMDIs), a device that uses a propellant to deliver medicine to the lungs. PFAS are utilized as a propellant in some pMDIs, acting as a protective layer within the canister's construction. Although this PFAS used in respiratory medicines is similar in structure to other PFAS, it differs in it being non-persistent, non bio accumulative and non-toxic.

pMDIs are an important therapeutic option for the millions of patients in the US, and specifically the nearly 250K Mainers living with asthma and COPD. These inhaled medicines reduce COPD exacerbations and asthma attacks, which are potentially life-threatening events. They deliver essential, life-saving medicines for millions of people living with respiratory diseases, including vulnerable populations such as children and the older adults. Alternatives like dry

powder inhalers (DPIs) can be challenging to use for children, older adults who may lack dexterity, or those with severe asthma who cannot breathe deeply enough to get the medicine into their lungs.

Restriction of PFAS propellants risks removing certain pMDIs from the market with no suitable replacements. It is vital for patient safety and good management of respiratory conditions that patients have access to their inhalers on both a daily basis and in an emergency. Transitioning to another type of inhaler risks conditions deteriorating and a heightened risk of exacerbations, emergency admissions and mortality rates. It poses an increased burden on healthcare systems, particularly the primary care provider.

AAFA does support the development of effective, PFAS-free inhalers, but until suitable alternatives exist pMDIs must remain available to patients with respiratory illness. I am hopeful that the Maine legislature will take this into consideration when reviewing legislative changes this year.

Sincerely,

Kenneth Mendez
President and Chief Executive Officer
Asthma and Allergy Foundation of America