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RESEARCH NEWS

* There's no season for colds. A year-round malady, **most adults will get 2-4 colds a year** and young children can get 10 a year. We feel miserable with a stuffy head, drippy nose, cough, sneeze, sore throat, headache, perhaps a slight fever or chills. Colds are viral: **antibiotics won't help** unless a secondary bacterial infection appears. **Can we prevent colds?** For a long time, many believed **Echinacea**, an herbal remedy, helped prevent the flu and latest research shows that perhaps they're right and it **may even help with colds**. 58% of those studied prevented a full-blown cold when they took Echinacea at the first sign of symptoms and if they did get a cold their symptoms were cut short by 1.4 days. If you know you're going to be in a situation that exposes you (around someone with a cold, traveling, working with young children, etc.) then **taking Echinacea might help prevent one**, but be aware that the supplement isn't regulated and not all offerings are equal. Look for the U.S. Pharmacopeia seal on the package to ensure quality. For decades, people believed Vitamin C could prevent colds but latest studies don't support this. Taking **zinc won't help** prevent a cold either. What is the **best way to prevent a cold?** Get plenty of rest so your body has the resistance to fight a cold and if you do get one, give in to it for a while: stay home from work or school, eat chicken soup, nap, drink lots of fluids including hot tea and use an NSAID like ibuprofen or naproxen for sore throat, headache, body aches or fever.

* **Tobacco smoke = a toxic soup for our lungs**, according to Dr. Glantz, director of the Center for Tobacco Control Research at UC at San Francisco. **Cigarettes produce** not only the **same chemicals found in diesel exhaust** but also produce **benzene**, a known cancer-causing agent. **Second-hand smoke** (exhaled smoke) **is even more toxic** because it contains fine particles that cause immediate and extensive damage to our body, especially our lungs. In 2004, Ireland banned all smoking in all workplaces and after 1 year, workers in pubs and restaurants showed increased lung capacity and over-all health. If you have asthma or allergies and smoke – don't! If your children have asthma or allergies, don't smoke, not even away from them since the second-hand particles cling to hair and fabrics so are still a danger. There is enough proof now that **second-hand smoke does trigger asthma flares** and is also shown to **induce asthma in both children and adults**. If you have allergies your symptoms will be more severe when around tobacco smoke, too.

* For decades, people believed introducing infants and toddlers to a swimming pool helped protect them from drowning by teaching them to swim and be safe around pools. Between 5 and 10 million infants and toddlers in the U.S. are enrolled in these indoor pool swim programs, but is it really safe? According to recent research, **infants and toddlers who spend regular time in chlorinated pools are more likely to develop asthma or recurrent bronchitis** and to have an absence of the key proteins in their lungs which protect the airway membranes. The cause may be exposure to the chlorine used to disinfect pool water. The American Academy of Pediatrics doesn't feel this water exposure prevents pool dangers for babies or toddlers anyway since children don't really learn to swim until they're about 4 yrs old. If you have a young child its suggested romps in a pool be limited until the child is old enough (4-5 years) to take swim lessons.

* Approximately 3 million Americans have nut allergy, including allergy to peanuts, actually a legume. **90% of the 150 people who die from food allergy annually die from nut allergy**. The number of people with nut allergy in the U.S. has doubled in the past few years. **Why** are these statistics much **greater in the USA** than for anywhere else in the world? Dr. Marc McMorris, MD, of the University of Michigan Health System's Food Allergy Clinic suggests **one reason** may be **the way we process peanuts**. In the U.S. peanuts are dry-roasted at a very high temperature which seems to release a greater amount of allergen protein from the peanut. **Processing by boiling** at much lower temperatures **doesn't produce the same amount of allergen protein** so the immune system isn't as irritated. Most of the world, other than the U.S. process peanuts through boiling. **Another reason** for the increase in peanut allergy may be the **Hygiene Hypothesis**. In the U.S., we've conquered so many diseases and have literally sanitized our world with antibacterial solutions so our bodies aren't exposed to normal diseases. Our immune systems don't have to fight as hard as those people in third world countries who are overwhelmed with fighting off diseases, thus **our immune system reacts more actively to common allergens**. The best way to avoid an allergic food reaction is to avoid the food, in this case nuts or peanuts, which causes the reaction. Approximately 20% of kids will out-grow their nut allergy and almost 10% will outgrow their peanut allergy but this might not happen until the children have passed adolescence and are into their early 20's. Because nut allergy is so severe and prevalent, the good news is that more research dollars are being spent learning how to treat this food allergy. Perhaps in ten years there may be a vaccine or other new treatment for nut allergy. For now, the only treatment is avoidance at all costs. For more information on asthma and allergy, visit www.aafatexas.org

Upcoming AAFA-TX programs: **1) March 27** "Park Day" for food allergic kids and parents, Northshore Park, The Woodlands, Houston. Contact dorin@saferhouston.com **2) April 9** "Asthma Management & Education" a continuing education program for nurses, respiratory therapists and educators worth 3 CEU. Chicago, IL. Don Cui, PA-C, AE-C, instructor **3) May 12** "Tools To Manage Your Asthma & Allergies" Citi Group, Irving, TX, Andrew D. Beaty, MD, instructor **4) May 15** "Manage Adolescent and Adult Asthma with a Team Approach: Apply NHLBI Guideline to Your Practice" a CME symposium worth 4.5 category 1 credits (4.5 AOA category 1-B credits and 4.5 ACPE contact hours) for physicians, nurse practitioners, physician assistants, pharmacists, nurses and respiratory therapists. Arlington, TX. To register see <http://aafatexas.org/registration.htm> **5) June 14** "Asthma Management & Education" a continuing education program for nurses, respiratory therapists and educators worth 3 CEU. Dallas. Pre-registration required with Dallas ISD. Questions? Visit www.aafatexas.org for complete symposium details or contact info@aafatexas.org

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