

Dear Readers: This is the free newsletter of the Asthma & Allergy Foundation of America, Texas Chapter. If you do not wish to receive other newsletters from AAFA-TX, please request we remove your address. To subscribe, email your request to info@aafatexas.org. Addresses are never shared. Thank you. Please add new sender's email (joanhart@aafatexas.org) to your address book to ensure delivery. Welcome SAFER Houston, a food allergy, asthma and allergy support group affiliate of AAFA-TX.

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Asthma & Allergy Foundation of America, Texas, 9101 Quarter Horse Lane
Ft. Worth, TX 76123 817-297-3132 info@aafatexas.org www.aafatexas.org

COPING WITH ASTHMA AND ALLERGIES

* The number of children and adults with asthma and allergy is growing. **1 in 4 kids has asthma and according to the CDC, 7% of all adults in the US have asthma and approximately 70% of all asthma patients have allergic asthma.** Asthma and allergy present not only a physical challenge to patients but the **families** of those patients are also **greatly affected by these diseases**. Whether a parent, guardian, sibling, or a spouse of a child or adult with asthma or allergy your family dynamics are changed because of these diseases.

* Asthma and many allergies are chronic illness, meaning it's always there. They **rob the family of free time**. Parents and older siblings of children under age 9 with asthma are the ones who have to train themselves to give the child their medicines on time, to refill prescriptions, to allergy-proof the house, or to loose work when their child is having a flare. These diseases **cause anxiety and stress** when symptoms are present, whether it's a parent listening to their toddler wheezing and gasping for breath or a spouse watching their partner struggle to breathe. Asthma and allergies **create a financial burden** as well. Asthma is considered a pre-existing condition by insurance providers which could mean lack of coverage or expensive coverage. Asthma medications, vital for many patients, are costly and many have high co-pays even if a family has insurance. If there is no insurance, for many families filling a prescription may mean choosing between asthma meds or groceries. Asthma can take a **strong emotional toll on families**, too. It's hard to avoid the asthmatic child or adult becoming the center of all family life for all these reasons. We offer **some tips to help relieve some of the anxiety, stress and emotional drain** and live a more normal family life.

* Don't let the illness define the child or adult with asthma. Instead, **focus on normal childhood or family activities**. When the patient isn't having disease symptoms, don't hover and smother the patient with questions about their illness, instead, talk about everyday events like school, work, friends, or up-coming social activities.

* **Be in control of your child's asthma:** *follow the medication and management plan* developed with your healthcare provider and **attend education programs** to learn about the disease. Become the child's advocate with teachers, coaches and other parents. Learn your child's triggers and early warning symptoms; know how and when to administer medications and how to use and care for asthma devices - peak flow meters, spacers and nebulizers. Remember the new metered dose inhalers (albuterol) require some different care and technique procedures and the most effective way to use MDI's is with a spacer or valved holding chamber. Check with AAFA-TX for the proper care and use of all devices.

* Don't make the patient, child or adult, feel they are a burden – don't **build guilt because they have a chronic disease**. At the same time, even though you may feel anxious about the potential dangers of a severe asthma flare or an anaphylactic allergy reaction, try not to transfer this anxiety to the patient. It's also vital **not to show your fears** to other children in the family who don't have asthma or serious allergy. As we know, **children are like sponges** and will absorb your emotions, good or bad, whether it's the child with asthma or the sibling without asthma.

* Controlling asthma and allergies is easier when it's a family activity. Everyone has a role in preventing flares or symptoms. **Both parents should be involved in caring for the child patient** and should work together to provide consistent care, especially if parents are separated or divorced. Dedicate a specific hour each week to discuss symptoms, action plans and who will renew prescriptions that month. Caregivers should **ask older siblings to help, but not be responsible for**, younger asthmatic kids by reminding them when they need to take their medication, by learning triggers and the signs a flare is starting and what to do to help their sibling or parent during a flare-up.

* **Share your child's trigger and symptom "list" with grandparents, relatives and neighbors;** request they not smoke around the child and eliminate known allergens from their home if the child visits. If you're an adult with asthma and you smoke, **STOP SMOKING**. Don't be ashamed to share your symptoms with co-workers, family and friends. If you or your child has food allergy, share your food allergy list when eating a meal or snacks at someone else's home.

* Don't make an asthmatic or allergic child the focus of everything the family does, even though everyone helps this child when needed. To avoid resentfulness, parents should **make special time for their other children** and allow your children to express their frustrations about these diseases, both patient and siblings. Avoid the tendency to make an older sibling a watchdog for younger kids affected by these diseases. It's a challenge to help a sibling without feeling burdened.

* Probably one of the most important steps to coping with asthma and allergy is to **never forget that parents are people first**. Leave your asthmatic child with caregivers sometimes and make time for each other in order to eliminate frustrations, promote family well-being and open lines of adult communication. Ask us for our babysitter's guide. For more information on asthma and allergy, visit www.aafatexas.org or contact us at info@aafatexas.org

Upcoming AAFA-TX programs: 1) **July 17, 11 am- 2 pm** – SAFER Houston first annual Parent's Conference – Beck's Prime Restaurant, Memorial Loop, Houston. **For more information, see www.SAFERhouston.com** 2) You are invited to take part in a research study seeking to understand how young adults with severe food allergies cope with issues surrounding this condition. This research is being conducted by Susan Cohen, a PhD candidate at Walden University. You are eligible to participate in the study if you are between 18 and 25 years old and have experienced an anaphylactic allergic reaction to food at some point in your life that required treatment with epinephrine (an injection) either by yourself, someone with you, or in the emergency room. If you are interested in participating, click here <http://calsci.org/Faculty/SusanCohen/FoodAllergySurvey/index.html> For more information contact info@aafatexas.org For more information on asthma and allergy, visit www.aafatexas.org

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