ST. LOUIS ASTHMA RANKINGS 2011

Asthma rankings are released every Spring by the national offices of the Asthma and Allergy Foundation. St. Louis consistently ranks in the top ten, moving from first in 2009, second in 2010, to sixth in 2011. What do they mean and what can we do about it?

Rankings are based on the impact that key environmental and medical factors have on patients in each area. Risk factors include the Annual Pollen Score, air quality, public smoking laws, poverty and uninsured rates. Medical factors includes the use of rescue and controller medication and number of asthma specialists in the area.

AAFA, St. Louis helps by working to ensure children have access to their medications and necessary medical equipment to take their prescriptions. As important, AAFA, St. Louis helps ensure medication compliance, teaching proper inhalation techniques as well as the importance of taking controller medications to keeping children breathing easily. We work with community organizations to teach how to avoid asthma triggers such as dust, pollen, smoke, and mold, and to create healthy home, day care, and school environments. While we may not be able to control our pollen count or the number of high ozone days, we can empower our community to live lives without limits.

St. Louis was given a score of 95.45, with worse than average pollen and air quality.

Proper inhaler techniques are essential in treating asthma.

FROM THE BOARD PRESIDENT

I welcome all our readers—and hope that you are experiencing the same sense of renewal that AAFA’s board and staff are bringing to its mission! In the past year AAFA has restructured its offices, re-launched our signature medical assistance program, Project Concern, and revived Board membership. These changes have reshaped us into an agency that is pointed toward a sustainable and promising future. AAFA was founded 30 years ago by a small group of committed volunteers, some of whom remain active in shaping the agency today. With everyone’s engagement we know AAFA will continue to grow, helping children across our area breathe more easily for years to come.

Please drop a note, let us know your email and home addresses, and we’ll help keep you informed and involved in AAFA’s mission — through means print and electronic. I am very excited to serve at the Board’s helm during AAFA’s revival, and thank you for helping in our hard work.
“though there were many aspects of her life she could not control – from unemployment to late checks –, her daughter’s asthma could now be controlled”

PROJECT CONCERN RELAUNCHES

After a year of restructuring, Project Concern was re-opened on February 1, 2011, with new requirements allowing AAFA to serve more clients within the confines of our budget. With the financial limit in place, a client is enrolled for six months or until financial limit is reached.

Another new feature is our exclusive partnership with a local pharmacy, Beverly Hills Pharmacy. This partnership makes life a little easier for clients as well as for the programs department. Beverly Hills Pharmacy provides AAFA a liaison to handle client questions and concerns. Invoicing is also simplified because all full-pay clients are billed by Beverly Hill Pharmacy and any problems can be resolved by the liaison in a timely manner. Clients that have been enrolled as co-pay clients before the restructure are still able to use their home pharmacy. Healthy Kids Express and school nurses have continued to serve as integral community partners for encasings and durables distribution. Program staff are working diligently to extend community contacts and reach the most individuals we can with encasings and durables. We continue to be the only organization in the St. Louis area that provides the medical assistance we do, so it is a great thing to team up with community partners that may not have access to AAFA’s resources.

HELPING CLIENTS, HELPING LIVES

On behalf of our clients, I can safely say that every service AAFA provides is life changing. I was speaking to a woman on the phone in February who was experience a bad series of events. She receives unemployment and her electricity bill was due. She used her unemployment check to pay her electricity. Her daughter had recently been released from the hospital but did not have a nebulizer for her medication. The hospital had given her a sample to take home, so I delivered a nebulizer and enrolled her in Project Concern. The mother was so gracious: though there were many aspects of her life she could not control – from unemployment to late checks –, her daughter’s asthma could now be controlled. That is a barrier that is broken because of Project Concern, and our clients are able to live happier and healthier lives.

ALLERGY-FREE RECIPE ~

TEQUILA LIME CHICKEN LETTUCE WRAPS

For Chicken:
1 pound chicken breast, cut into ½ inch strips, 1-1 ½” lengths
1 ½ cup each olive oil lime juice, tequila
1 TBSP snipped fresh cilantro
2 cloves garlic, minced
1 tsp ground cumin
Salt & pepper

For Vegetables:
1 med. Onion & 1 med. sweet pepper, thinly sliced
1/2 cup chopped tomatillos or chopped tomatoes

For Chicken:
In small bowl, stir 1/4 cup oil, lime juice, tequila, 1 TBSP cilantro, garlic, cumin, salt, and pepper. Place chicken strips in a plastic bag. Pour marinade over chicken. Seal and refrigerate 4-24 hours, turning occasionally. The longer you marinate, the better the flavor. Drain chicken; discard marinade. Set chicken aside.

For Chicken:
Heat 1 TPSP oil in large skillet. Cook onion over medium-high heat for 1 1/2 min. Add sweet pepper; cook 1 1/2 min. more, till crisp-tender. Remove from skillet. Add chicken to hot skillet. (+ more oil, if necessary.) Cook 2-3 min., till tender & no pink remains. Return vegetables; add tomatillos or tomatoes. Cook for 1-2 min., till heated through. Stir in remaining cilantro.

Serving:
Allow guests to fill lettuce leaves with chicken-vegetable mixture. If desired, top with guacamole, sour cream, salsa, and/or cheese. The flavor of the chicken mixture is intense and makes the other sides less important. Those with dairy allergies will not feel that they are missing the flavor by skipping the cheese and sour cream!
SPECIAL EVENTS UPDATES

We would like to give a HUGE “thank you” to everyone who was a part of our 2011 Orchid Affair that took place on February 19th at the Chase Park Plaza. We had a great time with guest emcee and auctioneer Charlie Brennan of KMOX trying to outbid one another for some amazing auction items and were fully entertained by Dean Christopher’s Rat Pack Band. Because of your support, we were able to raise over $132,000. Chaired by Drs. Gregg and Sue Berdy, we honored the late philanthropist Whitney Harris, who was instrumental in founding the Asthma & Allergy Foundation’s annual Orchid Affair.

2011 will be an exciting year for AAFA, and we have many events planned for you! We’re hosting a morning of fun and fitness in our very first run/walk on May 14th! Our Annual Golf Classic and Dinner Auction will be held at the Forest Park Golf Course on July 10th & 11th awarding the Ralph Kaufman Memorial Scholarship to local high school students each year.

If you or an organization you are part of, would like to host an event to bring attention to AAFA’s efforts in our community, we’d love to hear your ideas and work with you!

Stay up to date on our upcoming events by visiting our website at www.aafastl.org

Please help us stay in touch: send your preferred phone and email to: pbrooke@aafastl.org

VOLUNTEER WITH AAFA

The Asthma and Allergy Foundation counts on our volunteers to help us achieve our vision of creating a “life without limits.” Whether you can commit an hour a week or more, we hope you will consider joining this very special community.

1) Promote awareness of asthma and AAFA by joining our community educators or by representing the Chapter at health fairs.
2) Provide administrative assistance and support to Chapter staff.
3) Serve on the Board of Directors or an event committee to assist us in our mission.

Volunteers are the people who make our programs possible.

Through the efforts of talented, caring volunteers, every dollar that comes into AAFA is magnified greatly.

CALENDAR

Stay up to date on our upcoming events by visiting our website at www.aafastl.org We would also love to connect with you on facebook at www.facebook.com/aafa.stl.

Upcoming events:

- 4/14: Getting Connected - Regroup and get acquainted with AAFA volunteers at our offices
- 5/3: Allergists Happy Hour - Missouri Beverage
- 5/14: AAFA Run/Walk - Carondelet Park
- 7/10 & 7/11: AAFA Golf Classic & Dinner Auction - Forest Park Golf Course

May is Asthma Awareness Month. Please consider making a donation to AAFA to help fight the affect of this chronic disease in our community. Used the enclosed envelope on click Donate now on our website.
Q: “My toddler wheezes whenever she catches a cold. Does this mean she has asthma? Will she outgrow this?”

A: The short answer is maybe, but a very useful tool called the Asthma Predictive Index (API) helps allergists and asthma specialists better predict whether a wheezy toddler will become a full-blown asthmatic.

Nearly 40% of all young children will have at least one asthma-like episode, typically presenting with wheezing, coughing, or shortness of breath. Most wheezing in this age range is triggered by viral respiratory infections, such as rhinovirus (RV) or respiratory syncytial virus (RSV). This occurs because the airways of infants and toddlers are smaller and produce more mucus in comparison to older children and adults. Add a cold into the mix and you have your wheezy child. But is this asthma or just a cold? Enter the API...

The API, developed about 10 years ago, is a guide to help us predict which young children with recurrent wheezing from colds are at high risk for developing persistent (and life-long) asthma by 6 years of age. If your child is less than 3 years old and has had at least 4 significant episodes of wheezing (i.e. lasting more than 24 hours, affecting sleep) in the span of 1 year, he or she is much more likely to have asthma by school age if the following criteria are met.

ONE of the following
1. A biological parent with asthma (diagnosed by a physician), 2. A personal history of eczema (a.k.a. atopic dermatitis)

OR

TWO of the following
1. A personal history of environmental allergies (confirmed by skin or blood testing), 2. Wheezing not due to a cold, 3. An abnormally high number of eosinophils (white cells seen in many allergic diseases) present in the blood

So, how do you know if your child has any of these criteria? Your local allergist has all the tools to do the necessary tests!

Ross I. Palis, MD
Allergy, Asthma and Immunology Center
325 Tamarack Lane
Shiloh, IL 62269
www.aaicenter.org

Ask an Allergist
Intended for educational, not diagnostic purposes