

# ASTHMA & ALLERGY

## BULLETIN

ASTHMA AND ALLERGY FOUNDATION OF AMERICA • NEW ENGLAND CHAPTER

### ANNOUNCING

#### "You Deserve The Truth About Vaping"

...a new initiative from AAFA New England

The dangers of e-cigarettes and vaping products use are a growing problem. AAFA New England is launching a new program to reach youth and adults through a multi-media approach, as well advocacy for sound public policies that improve current laws governing the sale and distribution of these products. Follow our progress throughout the year!

### THE VAPING EPIDEMIC: WHAT YOU SHOULD KNOW

by Alicia Casey, MD

Over the past few decades, AAFA New England has been committed to educating people about the dangers of smoking and advocating for anti-smoking policies to ensure safer indoor air quality. Such efforts have been very successful. But now, in 2020, there is a new danger that is critical to address: vaping. Vaping poses a serious risk to the wellbeing of young people and adults everywhere and threatens to undo all of the progress we've made. That makes it important to get the facts to keep yourself and your family safe.

*Vaping is currently a public health emergency in the United States.*

#### What is Vaping?

E-cigarettes were initially introduced by the tobacco industry as a smoking cessation aid. Yet we now know that the dangers from vaping can be even worse than those that occur with traditional cigarettes.

Vaping refers to the act of using a battery powered device (called e-cigarettes, JUULs, vapes, vape pens, and dabs, among other names) to heat pods or

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### FOOD ALLERGY DIAGNOSIS AND TREATMENT: THE PAST, PRESENT AND FUTURE

by Lakiea Wright, MD, MPH



#### Past

The rise in food allergies, especially over the past two decades, continues to defy easy explanation. The Centers for Disease Control showed the prevalence of food allergies among children aged 0-17

years rising from 3.4% in 1997-1999 to 5.1% in 2009-2011.<sup>1</sup> Today, eight food groups account for 90% of all allergic reactions: eggs, fish, milk, peanuts, shellfish, soy, tree nuts and wheat.<sup>2</sup> Recent U.S. studies suggest that sesame is emerging as the ninth most common allergen.<sup>3</sup>

It's likely that the higher incidence of food allergy is multifactorial. Theories range from effects of an unhealthy "western" diet on our microbiome and the "hygiene hypothesis," fueled by our obsession with cleanliness, to the assertion that we now wait too long to expose our children to allergenic foods and earlier introduction is a better strategy to prevent food allergies.

For decades allergists would obtain a detailed patient history and perform skin testing to diagnose food allergy.<sup>4</sup> As technology improved, specific IgE blood testing emerged as a reliable, accurate and FDA-cleared diagnostic option.<sup>5</sup>

#### Present

A detailed patient history remains paramount in the diagnosis of food allergy. Diagnosis of food allergy can be complicated, a combination of diagnostics is often used including skin testing, specific IgE blood testing for the whole allergen, allergen component testing and oral

food challenges (OFC). An OFC is done by a clinician in a clinical or hospital setting. A patient is given a small amount of the food being tested in increasing amounts and monitored for an allergic reaction. OFCs are considered the gold standard and highly definitive, but risks of severe allergic reactions exist. Clinicians must take steps, including accurate pretest risk assessment, to mitigate that risk before initiating an oral food challenge.

Allergen component testing can indicate whether a patient is sensitized to a specific storage protein in a food, which, when encountered, is more likely to result in a systemic response (e.g. anaphylaxis). Allergen component testing, along with a patient's medical history, can help assess a person's risk for reaction, which versions of the food a patient may tolerate, and/or the probability of a reaction being mild or severe.<sup>6</sup> Different proteins make up each allergen, and some are more likely to carry higher risk for anaphylaxis than others.<sup>6</sup>

Component testing can help healthcare providers refine their diagnosis and treatment plans. A patient sensitized only to the Ara h 8 protein in peanuts may be a good candidate for an oral food challenge. This would not be the case for a patient sensitized to Ara h 2, however, because the risk of systemic reaction may be too high. In the U.S., allergen component tests are FDA-cleared and available for milk, egg, peanut and certain tree nuts.<sup>7</sup>

With such heightened concern about food allergy, clinicians want to be confident in their diagnosis. The current management for food allergy is avoidance with a prescription for an epinephrine autoinjector to treat a severe reaction in case of accidental exposure. Clinicians don't want to restrict a patient from normal eating without strong evidence, but they certainly don't want to clear the patient to eat any foods that may trigger a reaction.

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## FROM THE EXECUTIVE DIRECTOR

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David Guydan

As the calendar flips over from 2019 to 2020, we are reminded of the many friends of AAFA New England whose financial contributions and volunteer support have made a substantial difference in our ability to serve the asthma and allergy community as, together, we strive “for life without limits.”™

Our Fall Gala 2019 exceeded expectations in all categories: sponsorships, ticket sales and silent auction results. We enjoyed a memorable evening in support of AAFA New England. See our page 4 article on the Fall Gala and re-live with us some of the moments from the event, while being reminded of the wonderful work of our very special honorees.

We were proud to sponsor a “free-to-the-public” Family Concert & Food Allergy Expo featuring singer-song writer Kyle Dine who performed his unique brand of songs and puppet shows, weaving a message of hope and possibilities that was well-received by the kids and adults who attended. This event was made possible by the support of food allergy exhibitors, and through the amazing volunteer support of AAFA New England Board members and other friends, some of whom are thanked in the article on page 4.

Lakiea Wright, MD, MPH offers historical perspectives on the rise in food allergies and chronicles the great strides that have been made in her piece, entitled “Food Allergy Diagnosis and Treatment: The Past, Present and Future.”

Harkening back to the founding of AAFA New England 40 years ago when tobacco use and smoking cessation was an early success, we find ourselves today on the verge of a new public health crisis due to the rise in e-cigarettes and vaping. Alicia Casey, MD, raises the alarm and starts the dialogue with “what you can do” in her timely article, “The Vaping Epidemic: What You Should Know.” See also our important announcement of AAFA New England’s new, multi-year initiative “You Deserve The Truth About Vaping.” We welcome your support; we seek your ideas. We’ll keep you informed!

We want to be known as an organization that supplies “boots on the ground” as we provide support, education and advocacy throughout our six-state region for the benefit of the asthma and allergy community. We look forward to “meet-ups” throughout New England and encourage your participation in the work of the Foundation.

Warm regards,

David Guydan, Executive Director



## ASTHMA TOOLKIT FOR HEALTHY SCHOOLS

**Clearing the Air: An Asthma Toolkit for Healthy Schools** is a valuable new free resource that contains sample policy language, best practices, and a wealth of curated resources and tools to help schools create an asthma-friendly learning and working environment. The toolkit offers a step-by-step approach to identifying, prioritizing and addressing asthma triggers. It offers guidance on topics that range from creating a comprehensive environmental health and safety policy to ideas for starting on more modest projects. For example, simply changing classroom cleaning practices or strengthening an existing policy on cleaning can make a difference to those living with asthma and other breathing problems.

The toolkit is a project of the MA Asthma Action Partnership, Health Resources in Action, and the MA Department of Public Health’s Asthma Prevention and Control Program. The complete toolkit is available online at [www.maasthma.org/schooltoolkit](http://www.maasthma.org/schooltoolkit).



containers that contain nicotine and flavoring to turn them into a mist that can be inhaled. Some of these pods also contain THC (the active ingredient in marijuana). When people vape, they are inhaling substances

into the lungs that are not meant to be there. This puts them at risk for serious harm to their pulmonary system.

Over the past year, hundreds of people of all ages have been hospitalized and dozens have died from vaping associated pulmonary illnesses. And yet the number of young people who use vapes continues to climb, according to the latest Monitoring the Future study.

This crisis recently prompted Massachusetts Gov. Charlie Baker to sign one of the broadest laws in the nation prohibiting the sale of all flavored products, including menthol cigarettes and vape products. The federal government has also raised the legal age to buy tobacco products including e-cigarettes to 21.

This is particularly important, since adolescents, teens, and young adults whose minds and bodies are still developing are particularly vulnerable to the life-threatening effects.

### The deadly health risks of vaping

At Boston Children's Hospital, we are seeing children who have used vapes and are experiencing serious respiratory symptoms. In some cases, the symptoms are severe enough to require admission to the intensive care unit. We have had teens with cough, mucous production, difficulty breathing, shortness of breath, and low oxygen levels, needing oxygen, breathing tubes and ventilators, not responding to antimicrobial therapy, undergoing multiple tests to uncover the cause, and sustaining at minimum temporary, but possibly permanent, lung damage.

Researchers at Boston Children's have also been tracking the vaping-association pulmonary illness epidemic over time in the hopes that deeper insights can help us more effectively address the problem.

### Facts about vaping

Here are a few facts about vaping that you should know:

1. One e-cigarette can contain as much nicotine (or more in some cases) as an entire pack of traditional cigarettes, which can cause people to become addicted quickly. Teens who use vapes are particularly vulnerable to the effects. People who are addicted may experience dramatic changes in behavior or functioning, such as dropping grades or reduced performance, trouble getting through the day at school or work, or less interest in sport, activities, and hobbies.

2. E-cigarette pods come in a variety of flavors that make vaping a lot more palatable for kids because it masks the taste of all of the chemicals in the liquid. Flavors include bubble gum, cotton candy, banana split, and gummy bears, among others. This allows children (and adults, too) to use more vape liquids faster, and exposes them

to high quantities of nicotine more quickly. This higher nicotine amount leads to nicotine poisoning (commonly referred to as being "nic sick"). This is typically experienced as dizziness, lightheadedness, nausea, and vomiting. Seizures have also been reported.

3. In addition to nicotine or marijuana, the flavors contain chemicals that pose many serious health dangers. While some of the chemicals used to make the flavors are approved by the FDA for food, they are dangerous when inhaled into the lungs. Research has revealed that some of the chemicals can turn on the inflammatory system in the lungs, which can lead to lung disease. Other chemicals in vaping liquids are known to cause cancer. Although the FDA requires our medications to go through many levels of clinical trials before they are approved for use, e-cigarettes have never been tested for safety so we are allowing people to be guinea pigs when it comes to vaping — and the consequences can be deadly.

4. Often, the signs of vaping-related pulmonary illnesses can look like the flu or pneumonia, so it can be hard to diagnosis initially.

Symptoms include:

- shortness of breath, coughing, and chest pain
- stomach pain, diarrhea, nausea, and vomiting
- fever and extreme tiredness

The symptoms don't respond to traditional treatment methods and can be life threatening, making it essential that people experiencing symptoms share their vaping use history with their clinicians so they can be properly diagnosed and treated.

5. Despite tougher laws, young people are still getting access to vapes. Research from the National Youth Tobacco Survey (NYTS) shows high school students that use vapes are more likely to smoke tobacco cigarettes. In addition, they are also more likely to use marijuana, alcohol, cocaine, and other drugs. This means vaping is threatening the wellbeing of the latest generation of youth on so many levels.

### What You Can Do

In order to fight back against vaping, it's important to understand the dangers that exist. Parents and other adults must avoid vaping themselves and should serve as a role model for young people. If you or your child is vaping, it's important to quit or seek professional help if you could be addicted or are experiencing any medical effects. Remember that avoiding e-cigarette use in the first place is the best way to stay healthy.

Learn more about vaping and how to get help at the Boston Children's Hospital website.



**Alicia Casey, MD**, is Co-Director of the Interstitial Lung Disease Program through the Division of Pulmonology at Boston Children's Hospital. She is also Co-Director of the Fellowship Training Program there. In addition, she is an Instructor of Pediatrics at Harvard Medical School.



# AAFA New England: NEWS AND NOTES

Fall Gala 2019



## AAFA New England Fall Gala 2019 October 25, 2019, Boston College Club Honoring Champions of the Asthma and Allergy Community



Pictured above are Mark Uzzell, AAFA NE Board Member; Jan Hanson, Board President; Kyle Dine, 2019 Gala Honoree; and David Guydan, Executive Director.

Our second annual Fall Gala was a huge success. Attended by more than 125 guests, the event was made memorable by the vibrant surroundings of the Boston College Club with the sparkling backdrop of the Boston skyline. The tone was set by the sounds of a jazz trio, as guests were welcomed by AAFA New England



Pictured above are Jan Hanson; Mark Elvidge, 2019 Gala Honoree and owner of Vermont Nut Free Chocolates; and David Guydan.

Board members and staff. The support of pharmaceutical companies who attended as information exhibitors provided attendees with thoughtfully-presented, vetted information on matters of interest to our asthma and allergy communities. Adding to the fun was a silent auction that included trips to resorts in the Caribbean, African safari adventures, dining experiences, and tickets to sporting and cultural events, as well as a host of other items.



Pictured above are Jan Hanson; Christopher Fanta, MD, 2019 Gala Honoree; Elizabeth Peas, MD, Board Member; and David Guydan.

Our honorees were recognized in the Gala Program and in person at the Gala for their outstanding work in the field of asthma and

allergies. Heartfelt introductions by their colleagues were followed by the honorees relating their own stories and, each of them, connecting to our guests in special ways. Pictured here are the honorees who received etched crystal commendations memorializing their tributes.

Jan Hanson, AAFA New England Board President, surprised Board members by presenting each of them with a newly designed "AAFA New England Ball Cap" to recognize their contributions to the asthma and allergy community by their service, but also to stress the teamwork that is so important to support the mission of AAFA New England.



### Speaker Series Recap

"Hidden Allergens:  
What You Need  
To Know" was  
presented on

November 21st, at Newton-Wellesley Hospital as a "live" event which was also streamed on Facebook for remote viewing. Dr. C. Giovanni Traverso, MD, BChir, PhD, Division of Gastroenterology at Brigham and Women's Hospital and Assistant Professor in the Department of Mechanical Engineering at MIT was joined by Hannah



Shorty, PharmD, Asthma Lead Pharmacist at CVS Health/pharmacy. Dr. Traverso delivered an informative presentation of his research into the presence and prevalence of inactive ingredients in frequently prescribed medications and other commonly used over-the-counter remedies that may be capable of causing adverse reactions. This was followed by a panel discussion with questions from the audience. The presentation and panel discussion offered our audience informative, vetted information that will help in the management of asthma and allergy conditions. Thank you to our speakers, to CVS Health, and to Thermo Fisher Scientific, our Fall 2019 Speaker Series sponsor.

## Kyle Dine Family Concert & Food Allergy Expo (Teal O'Ween), sponsored by AAFA New England, October 26, 2019 Canton High School Gymnasium



AAFA New England honoree, Kyle Dine, has been a friend of the asthma and allergy community for many years. Kyle Dine, who himself has dealt with food allergies since childhood, is a singer-song writer and food allergy musician who has performed for audiences internationally. Through original songs and a cast of puppets, he empowers and educates children and families with food allergies, helping to keep them safe.

It was a delightful afternoon of fun. Children arrived dressed in their costumes, trick-or-treating at the exhibitors' table (companies that make allergy-free foods and snacks). Our attendees filled their bags (emblazoned with AAFA New England logos) with goodies that they could consume at home.

The highlight of the afternoon was an hour-long concert by Kyle Dine who captivated the young audience with his playful songs, relevant messages and educational puppet skits. Kyle had the children and their parents singing along with him and marching around the gym as they shouted in unison: "Food Allergy Rocks!"

AAFA New England's table at the Concert & Food Allergy Expo was a source of information for parents on asthma and allergy management. We are grateful to Kyle Dine for his life's work which helps all in the



asthma and allergy community to strive "for life without limits™." And a special note of thanks to our own Board member, Mark Uzzell, and his family for their untiring work in organizing the event. In addition, thank you to AAFA New England volunteers who pitched in on the afternoon of the Concert with decorations, games, and help in setting up: Alexandra Yurkovic, Eileen Scafidi, and Laurel and Joe Francoeur.

## AAFA New England: NEWS AND NOTES (continued) AND LEGISLATIVE UPDATE



**Supporting Students with Food Allergy in School: Strategies to Promote Safety and Well-Being** was sponsored by the Medford Special Education Parent Advisory Council and Medford Family Network on November 13th. Jennifer LeBovidge, PhD (AAFA New England board member)

and Michael Pistiner, MD, both members of the AAFA New England Medical Advisory Committee, presented information and insights to a full house at Andrews Middle School. After their presentations, an hour-long question and answer session was conducted with parents and grandparents of children with food allergies, having their questions and concerns addressed by two experts in the field of pediatric food allergy treatment and management. AAFA New England supported the event with asthma and allergy materials for the audience. If your school district is interested in similar programming, please contact AAFA New England at 781-444-7778.

**Food Allergy Awareness Day at Boston's Franklin Park Zoo** was sponsored by Boston Children's Hospital on Sunday, September 8th. Much important information was disseminated to the many parents attending with their children. John J. Lee, MD, Clinical Director, Food Allergy Program and Allergy Director, Eosinophilic Gastrointestinal Disease Program at Boston Children's Hospital, organized what has now become an annual event. AAFA New England was joined at the Food Allergy Awareness Day by a number of exhibitors (including our friends at Vermont Nut Free Chocolates) who all provided useful information for parents and caregivers. Two AAFA New England Board members, Jennifer LeBovidge, PhD, and Tara McCarthy, RD, offered presentations under a tent at the event. Judging from the many questions fielded after each presentation and the interest generated at the AAFA New England exhibit, the day at the Zoo was highly valuable and much appreciated. Thank you to Laurel Francoeur, AAFA New England volunteer, for her support at our exhibit and Dr. Lee for organizing the event.



### Legislative Update

**H.1859/S.1276: An Act Ensuring Safe Patient Access to Emergency Care, September 24, 2019, Massachusetts State House**

*Asthma attacks lead to some 2 million emergency room visits per year. Inspired by the asthma-related death of a young woman on the doorsteps of a Massachusetts hospital, this Act is designed to improve patient access to ERs across the state.*



David Guydan, AAFA New England Executive Director, offered oral and written testimony in support of the bill at a "Patient Safety and Quality" Public Hearing. Pictured with David Guydan are Peter De Marco and Massachusetts State Senator Patricia Jehlen.

**S.255 (An Act to Establish Food Allergy Plans in School), September 24, 2019, Massachusetts State House**



*Effective food management is needed at all times and in all circumstances, and school food allergy management requires sound policies and well trained/knowledgeable administrators, school nurses, school staff and*

*the school community. Jan Hanson, AAFA New England Board President, appeared to testify and submit written testimony in favor of new proposed legislation that requires schools to address food allergies, requires school staff training, addresses epinephrine availability, and requires the reporting of data to guide future policy. She was joined by AAFA New England Medical Advisory Committee Member, Dr. Michael Pistiner, and a host of others who shared their opinions and stories at the hearing. Pictured are Nicole Arpiarian with AAFA New England's Jan Hanson and David Guydan.*

## FOOD ALLERGY DIAGNOSIS AND TREATMENT: THE PAST, PRESENT AND FUTURE (con't)

### Future

As we look to the future, clinicians will have even more tools at their disposal to aid in diagnosing food allergies. They'll still need to focus on a patient's clinical history and physical exam, but they may increasingly incorporate advanced diagnostics including component testing, "epitope mapping"<sup>6</sup> and basophil activation testing (BAT).<sup>8</sup> There have been promising results from new allergen desensitization protocols in clinical trials as well, but nothing has yet to be FDA approved

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Lakiea Wright, MD, MAT, MPH, US Medical Director of Clinical Affairs, Immuno Diagnostics, Thermo Fisher Scientific



# RESEARCH UPDATE: OPPORTUNITIES TO HELP



**The Asthma Research Center** is dedicated to conducting research that advances the treatment and understanding of asthma. Each study varies in duration and compensation is up to \$1,735 for your time and effort. To see if you are eligible for any of our studies, please contact us at 617-732-8201 or via e-mail at [ARC@partners.org](mailto:ARC@partners.org). The following is a list of our current studies at the Asthma Research Center:

**Precision Medicine in Severe Asthma (PRECISE):** The purpose of this study is to find new treatments for severe asthma by using a novel approach in medicine called precision medicine. Precision medicine is a method that tailors medicines to patients based on their biomarkers. Biomarkers are bits of information about you, based on the results of different tests, including blood tests, analyses of your breath, and genetic tests. By using your biomarkers and testing different treatments in the study, we hope to learn more about treatments that are tailored to individuals and their needs.

**MANDALA:** This study targets adults with moderate to severe asthma symptoms despite already being on medication for their asthma. The study medication will replace the patient's rescue inhaler; however, patients will continue to take their other prescribed asthma medication. This study is using a study medicine which combines two medications (Pulmicort and Albuterol) that are already approved by the FDA. Due to the fact asthma is an inflammatory disease of the airway, this medication targets some of the cells believe to cause that inflammation.

**DENALI:** The purpose of this study is to learn how the inhaled study medication, PT027 may reduce risk of adults having a severe asthma attack. PT027 is a combination of budesonide and albuterol. Separately, these two medications are well-established treatments that have been widely used for asthma. This study will compare two doses of PT027 to budesonide, albuterol, or placebo alone to learn about the safety and effectiveness of the study medication based on improvement of asthma symptoms.

**Effectiveness of Iifetroban in Aspirin Exacerbated Respiratory Disease (AERD):** Do you have asthma, nasal polyps, and Samter's Triad or Aspirin-Exacerbated Respiratory Disease (AERD)? If you would like to undergo an aspirin desensitization to help treat your symptoms, you may be eligible for a research study at Brigham and Women's Hospital testing a new medication for the treatment of AERD.

**Severe Asthma Research Program (SARP):** In recent years scientists have learned more about the way mild-to-moderate asthma works and the reasons people get it. However, scientists are still trying to figure out what makes severe asthma different and how they can do better to treat the disease. The Severe Asthma Research Program (SARP) at the BWH in Boston is looking for adults taking inhaled corticosteroids who have been told they have asthma by a doctor. The observational study involves coming to our research center 6 – 8 times over the course of about 3 years.



The Food Allergy Center at Massachusetts General Hospital has several upcoming clinical trials for infants, toddlers, adolescents, and adults.

If interested in receiving information, email: [foodallergy@mg.harvard.edu](mailto:foodallergy@mg.harvard.edu). Studies will be explained in detail to potential participants who contact us.

## **Multiple Food Allergies Toddler to Adult:**

1. Multiple-food oral immunotherapy (OIT) (peanut and 2 other foods) + Omalizumab

Phase III study – Enrolling end of 2019/early 2020.

Ages 2-55 years old.

- Participants must be allergic to peanuts and at least two other foods (milk, egg, wheat, cashew, hazelnut, or walnut).
- NCT# 03881696

## **Peanut Allergy Infant/Toddler:**

2. **Early Peanut introduction Study**

No treatment, enrolling now; Prospective observational study

- Age 4-11 months old infants who have not yet tried peanut and have not yet been tested for peanut but who have any of the following: (1) at least moderate eczema, or (2) a physician diagnosis of milk, egg, or other non-peanut food allergy, or (3) a first degree relative with peanut allergy. Followed to 30 months of age.
- NCT# 03019328

## **3. Peanut OIT for Toddler**

Phase III study – Enrolling in early 2020.

- Age 1 to <4 years old; To determine safety and efficacy of AR101 in younger children;
- Participants must have a peanut allergy and react at an entry food challenge to peanut.
- NCT# 03736447

School-Age to Adolescents:

4. **Peanut OIT + Dupilumab**  
Phase II study – Enrolling now.  
Ages 6-17 years old.

- Participants will receive peanut OIT with or without dupilumab injections, including a pre-treatment phase; Total study duration could be approximately 1 year and six months.
- Participants must have a peanut allergy and react at an entry food challenge to peanut.
- NCT# 03682770

## **Adolescents:**

5. **Peanut Recombinant DNA Vaccine**  
Phase I – Enrolling now.  
Ages 12-17 years old.

- Participants will receive 4 doses over 6 weeks followed by a 6-month follow-up period.
- Participants must have a peanut allergy and react at an entry food challenge to peanut.
- NCT# 03755713

## **Adolescents to Adults:**

6. **Peanut OIT + Probiotic** (live biotherapeutic product)  
Phase Ib/II – Enrolling now

- Ages 12-55 years old.
- To evaluate pretreatment or concurrent treatment with probiotic in comparison to low-dose peanut OIT alone.
- Participants must have a peanut allergy and react at an entry food challenge to peanut.
- NCT# 03936998

## **Young Children; Eosinophilic Esophagitis:**

7. **Efficacy/Safety of dupilumab** in pediatric patients with EoE;  
Enrolling early 2020  
Protocol details to follow.

## **Adolescent and Adult:**

8. **Efficacy/Safety of benralizumab** in EoE  
• A Multi-Center, Randomized, Double-Blind, Parallel-group, Placebo-controlled Study to Investigate the Use of Benralizumab for Eosinophilic Esophagitis (MESSINA)

## THANK YOU TO OUR CORPORATE PARTNERS

AAFA New England is grateful for the support of our Corporate Partners in 2020. Their generous support allows us to provide valuable resources to help our members live life fully with asthma and allergies.

## The Thoracic Foundation

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### ASTHMA & ALLERGY BULLETIN

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The Asthma and Allergy Foundation of America, New England Chapter, is dedicated to helping people with asthma and allergic diseases, and those who care for them, through education, support for research and an array of services.

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## AAFA New England ANNOUNCEMENTS



To register for the Speaker Series, call AAFA New England at 781-444-7778 or email us at [events@aafane.org](mailto:events@aafane.org).

"Supporting Children with Food Allergies at School: Strategies to Promote Safety, Inclusion, and Confidence," Wednesday, February 26, 7:00 – 8:00 p.m., Newton-Wellesley Hospital, Bowles Conference Center, Shipley Auditorium, 2014 Washington St, Newton, MA (Use West Entrance)

Presenters: Jennifer LeBovidge, PhD, psychologist in the Food Allergy Program at Boston Children's Hospital and assistant professor in psychology at Harvard Medical School and

Michael Pistiner, MD, MMSc, Director of Food Allergy Advocacy, Education and Prevention, MassGeneral Hospital for Children, Food Allergy Center

Two experts in the field will present information and strategies to keep children safe, support social inclusion, and promote positive coping with food allergy in the school setting. Q&A will follow.

Speaker Series sponsored by:



*Attention: Dermatologists, Allergists, Nurse Practitioners, Physician Assistants and Nurses* who manage patients of all ages with Atopic Dermatitis; Approved for AMA PRA Category 1 Credits™, and ABD and ABAI MOC Part II points

"Advancements in Atopic Dermatitis: What Do They Mean For Your Practice?" Tuesday, March 31, 2020, 6:00 p.m. to 7:00 p.m., Newton-Wellesley Hospital, Bowles Conference Center, Shipley Auditorium, 2014 Washington Street, Newton, MA (use West entrance) Contact AAFA New England for details: 781-444-7778 Patients concerned about AD are welcome to attend.

In collaboration with AAFA New England, this talk is facilitated by The France Foundation with educational grant support from Sanofi Genzyme and Regeneron Pharmaceuticals.



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