

Asthma & Allergy Bulletin

ASTHMA AND ALLERGY FOUNDATION OF AMERICA • NEW ENGLAND CHAPTER

May is National Asthma and Allergy Awareness Month



AAFA New England is pleased to raise awareness by “lighting up” in teal

May 1: The Zakim Bridge and the Fore River Bridge

May 2: The Sakonnet River Bridge

Food Allergy Awareness Week: May 8-14

Read: “Navigating Early Introduction of Foods: A Guide for Parents” to learn important information!

Join us: Join our Speaker Series Program “Food Allergy Clinical Trials” presented by Dr. Rima Rachid. See pg. 3 for details.

Visit: Visit our Facebook page each day from May 8 -14 to learn a food allergy fact! www.facebook.com/AAFANewEngland

World Asthma Day is May 3

Read: “A SMART Treatment for Your Asthma” for great management tips to help control your asthma!

For life without limits™

Navigating Early Introduction of Foods: A Guide for Parents

Written by Grace Cushman, PhD



In conversations with your child’s pediatrician or allergist, they may recommend you introduce certain foods into your young child’s diet early on. Research has shown that eating allergenic foods (e.g., peanut, milk) consistently and frequently could help prevent your child from developing certain food allergies. This is known as early introduction. This means that you, the caregiver, are tasked with making sure your child eats the food. Should be easy, as infants always do exactly what we want them to do, exactly when we want them to, right?

Not so much. Anyone with a young child knows that having them eat foods consistently is no easy feat. Here are some common challenges families face and potential solutions to try:

1. **Child refusing food.** It’s common for kids to eat foods one day, then refuse them the next. When this happens, take a break, move onto another food, and return to the allergenic food later. Keep the food on the plate so they get used to being around it, even if you ultimately decide to wait and try again the next day. Try making meal-times into a fun game (e.g., the peanut butter can be an airplane). Try a different method—if they’re refusing peanut butter, offer them Bamba snacks instead. Remember, you can always try again tomorrow.
2. **Someone else at home is allergic to the food.** Think about extended family members or someone at your child’s daycare that can help with feeding them the allergen outside the home. Consider giving your child the food on daily outings (e.g., at the park).

Continued on page 2

Implementing SMART Technology for Asthma

Co-written by Sachin Baxi, MD and Tina Banzon, MD

It is possible that a “smarter” approach to asthma medication could benefit you. In the recently updated asthma management guidelines, the National Institutes of Health (NIH) now recommends considering the use of a Single inhaler containing the combination of an inhaled corticosteroid (ICS) and formoterol, a specific long-acting bronchodilatoragonist (LABA) for both Maintenance and Reliever Therapy (SMART) for select patients with persistent asthma.



Continued on page 2



Asthma and Allergy
Foundation of America®
NEW ENGLAND CHAPTER

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Navigating Early Introduction of Foods (continued from page 1)

- 3. Difficulty tracking how frequently you're introducing foods.** Consider using the already-existing functions on your phone, such as the calendar or reminder apps. Set up family calendars, create events or reminders on days to feed your child certain foods, and postpone events if something gets in the way. At the end of each week, you can easily tally up how many times your child ate the food.
- 4. Feeling overwhelmed.** Early introduction is a marathon, not a sprint. Reach out to friends or family for support, engage in self-care, talk with other parents trying early introduction, and don't forget to reward yourself for the successes instead of focusing on the days that don't go to plan.



There's not one solution that is going to work for all families, but flexibility and patience are key. And remember, you CAN do this!

Note: Defer to your child's allergist/pediatrician about what foods to introduce and when. Make sure to speak with them regarding any concerns about allergic reactions.



Grace Cushman, PhD, is a postdoctoral fellow at the Warren Alpert Medical School of Brown University. She has a special interest in food allergy, specifically finding ways to help families manage early introduction and enhance their family functioning within the context of allergies.

Implementing SMART Technology for Asthma (continued from page 1)

The typical approach to persistent asthma involves two inhalers. One inhaler contains the ICS (maintenance medication) used daily to treat inflammation, and a second inhaler is a bronchodilator (rescue medication), such as albuterol, which is used to treat symptoms like cough, wheeze, chest tightness, or shortness of breath. With an asthma attack, one could be using their albuterol every 4 hours. With SMART, the medicines are combined in one inhaler (maintenance and rescue medication) so the treatment is made simpler, but still safe. This SMART strategy of increasing the use of ICS with formoterol is thought to work by providing additional anti-inflammatory treatment during a period when asthma and airway inflammation are worsening. SMART was endorsed by the NIH in their 2020 update and by the Global Initiative for Asthma (GINA) after multiple studies showed that this approach was effective at reducing oral steroid use, emergency room visits, and hospitalizations. SMART also resulted in a lower overall corticosteroid dose.

The best candidates for SMART are patients 5 years and older with moderate persistent asthma that is not well controlled despite use of a low dose ICS. However, there is no need to change treatment if the current medications are working well and without side effects.

Only formoterol containing medications should be used in SMART, as other LABA formulations have not been studied. Formoterol has a rapid onset effect similar to albuterol but has the added benefit of a longer duration of action. There are two main inhalers with this formulation: budesonide/formoterol (Symbicort) and mometasone/formoterol (Dulera). For the most commonly used formulation (budesonide/formoterol), a maximum of 8 puffs per day are recommended for ages 5-11 years, and 12 puffs per day for age 12 years and older. An example of its daily use would be to take one or two puffs, once or twice a day, and as needed if there is an asthma flare up. Athletes with asthma may need a puff of their SMART inhaler before workouts.

Continued on page 4

AAFA New England: News & Notes

Legislative Advocacy

AAFA New England has had an active spring advocating on behalf of the asthma and allergy community.

AAFANE participated in a Virtual Fly-in to Capitol Hill during the week of April 18-22 to attend meetings and urge our US Senators and Representatives to support two bills: 1. the Elijah E. Cummings Family Asthma Act which would expand federal, state, and local efforts to improve care for people with asthma. The Family Asthma Act was named in honor of the late US Representative Elijah E. Cummings, who was a long-time supporter of the asthma community. 2. the Medical Nutrition Equity Act (H.R.3783) which would provide needed coverage for medically necessary foods, vitamins and amino acids for individuals who require medical nutrition products.

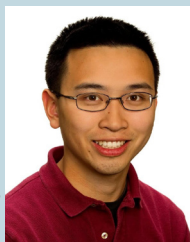
AAFA New England joined the American Lung Association and other like-minded nonprofit patient advocacy organizations in signing a group letter to congressional members in CT, NH and ME in support of a federal funding increase for the CDC's National Asthma Control Program (NACP). Increased funding for the NACP would allow for continued work in our communities directed to asthma education, prevention and research. This letter was sent to Senator Shaheen (NH), Senator Collins (ME), Rep. DeLauro (CT) and Senator Murphy (CT).

S.2614 An Act to Improve Food Allergy Awareness

AAFA New England continues to strongly support the passage of S.2614, which is currently being considered by the Massachusetts Senate Ways and Means Committee. AAFANE President Jan Hanson submitted a letter urging support of S.2614 to Chairman Michael Rodrigues, and a "Call to Action" was sent out to our community with the request to join us in this letter writing campaign. AAFANE applauds Nicole Arpiarian for her persistence in building support for the passage of S. 2614 into law.

AAFA New England Welcomes New Board Member

AAFA New England is pleased to announce that Matthew Chin, CPA, has joined its Board of Directors. Matthew is Accounting Manager - Endowments & Restricted Funds at Boston College. Welcome Matthew!



Food Allergy Clinical Trials

Date: To be Announced

We are thrilled to have Dr. Rachid present a dynamic program to discuss cutting-edge food allergy clinical trials.

Do you or someone you care for have a food allergy?

Join us to learn what is a food allergy clinical trial, how you can participate, are clinical trials available for all food allergies, and much more!



Rima Rachid, MD Director of Allergen Immunotherapy, Allergy and Asthma Program, Co-Director, Food Allergy Program, Attending Physician, Division of Immunology, Boston Children's Hospital, Associate Professor of Pediatrics, Harvard Medical School)

Note: Speaker Series programs are recorded and can be viewed at asthmaandallergies.org

Worcester Red Sox add Peanut-Allergy Friendly Procedures at Polar Park!



AAFA New England met earlier this spring with the Worcester Red Sox (WooSox) to provide information, facts and statistics about the health condition of food allergy. For the 2022 season, the WooSox have made the decision to make the Berm area of Polar Park peanut allergy-friendly for all games. Signage and supervision provided by Polar Park staff will help to keep peanuts and peanut products outside of the Berm. Binders with ingredient labels will be available at the concession stands so that people buying food can make informed decisions and avoid eating their food allergens. In other areas of the ballpark, fans who purchase peanuts will be given a cup for the shells to reduce their spreading and the risk of cross-contact exposure.

Thank you to the members of the AAFA New England Board and Medical Advisory Committee and our community who participated in this meeting and to the WooSox leadership for their initiative in establishing peanut-allergy friendly procedures at Polar Park for the 2022 Season.

Head to their website to find their full schedule!
<https://www.milb.com/worcester/schedule/2022-04/list>

Implementing SMART Technology for Asthma (continued from page 2)

SMART works best when the person has a good sense of when an asthma attack is coming on and is willing to treat it before it gets bad. It may not be a good choice for people who have poor symptom perception because they will not realize that they need extra doses. Also, it is not a good fit for those who overuse their rescue inhaler when they are anxious or perceive being short of breath often, as they may take too high a dose.

SMART has a few caveats. Budesonide/formoterol and mometasone/formoterol are not yet approved by the U.S. Food and Drug Administration for use as a quick relief agent, even though clinical trial evidence strongly supports its use and it is actively endorsed by the NIH. Also, you may need to be prescribed two of these inhalers to ensure an adequate supply to cover the extra doses used during flare ups.

A recent study evaluating a variation on this concept of increasing the ICS and bronchodilator with an asthma attack was recently reported in the New England Journal of Medicine by Elliot Israel et al. In their trial, Black and Latinx patients with asthma received one time instructions to use their ICS inhaler when they used an albuterol inhaler or nebulizer in addition to their asthma maintenance medications. This intervention also helped by decreasing the risk of a severe asthma attack by 15% and reduced asthma symptoms and days of an asthma attack.

Make sure you and your family member with asthma have an Asthma Action Plan that you all understand. An Asthma Action Plan is a plan that clearly communicates the steps to follow to help manage asthma on a daily basis and during an asthma attack. Discuss with your healthcare provider your Asthma Action Plan to aid you and other caregivers in asthma, when to use certain treatments when asthma symptoms worsen, and when to seek the care of a medical professional.

1. Global Initiative for Asthma (GINA). Global Strategy for Asthma Management and Prevention: 2021update. <https://ginasthma.org/gina-reports/> (Accessed on March 17, 2022)
2. Expert Panel Working Group of the NHLBI administered and coordinated NAEPCC, Cloutier MM, Baptist AP, et al. 2020 Focused Updates to the Asthma Management Guidelines. *J Allergy Clin Immunol.* 2021 Apr;147(4):1528-1530.
3. Israel E, et al. Reliever-Triggered Inhaled Glucocorticoid in Black and Latinx Adults with Asthma. *N Engl J Med.* 2022 Feb 26.



Tina M. Banzon, MD is a Fellow in Allergy and Immunology at Boston Children's Hospital.

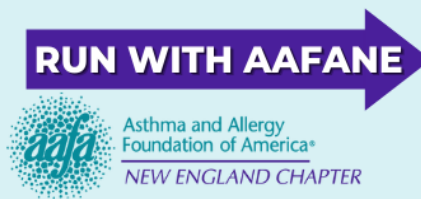


Sachin N. Baxi, MD is the Co-Director of the Severe Asthma Program at Boston Children's Hospital and is an Assistant Professor of Pediatrics at Harvard Medical School.

AAFA New England To Run in ASICS Falmouth Road Race 2022

ASICS Falmouth Road Race 2022

August 21, 2022



Exciting News! AAFA New England has been selected for the first time ever as a Charity Non-Profit to run in the ASICS Falmouth Road Race 2022 scheduled for Sunday, August 21 at 9am!

We are so grateful for our Team AAFANE runners: Pete DeMarco, Team Captain, Sara Helmes, Laurel Barnett, Alicia Burke and Patty Kolias, who will be running this 7-mile seaside course to spread awareness about asthma and allergies and to support AAFA New England's mission and work.

To make a donation to an awesome Team AAFANE runner, go to <https://raceroster.com/events/2022/56070/the-2022-Asics-falmouth-road-race/pledge/team/322>

To learn more about the ASICS Falmouth Road Race visit www.falmouthroadrace.com

Mark your calendars and join us on August 21 in Falmouth, MA to cheer on Pete, Sara, Laurel, Alicia and Patty!!

GO Team AAFANE!

**ASICS Falmouth
Road Race 2022**
August 21, 2022



Two Team AAFANE Runners highlight why they are running for AAFA New England

Team Captain - Peter DeMarco

I've done many things to honor my wife, Laura Levis, since she died from a devastating asthma attack five years ago at age 34. But I've never run a road race in her name, which is surprising because I really love running.

When the Asthma and Allergy Foundation of America, New England Chapter asked me to captain its very first Falmouth team, I quickly said yes.

This disease is so misunderstood, and so potentially deadly, and one day a cure has to be found. For every 13 people you know, statistically, one has asthma - it's that prevalent. I wish Laura and I had known more about asthma beyond just having an inhaler.

If we had, she might still be alive.

Since her death in 2016 I've tried very hard to educate -- did you know that more people have asthma attacks during the third week in September than any other week? It's called "Asthma Peak Week," and it's exactly when Laura had hers. Please spread the word.

I've tried as well to initiate important changes so that no one else will die as tragically as my wife did. "Losing Laura," the Boston Globe story I wrote about how Laura succumbed to an asthma attack just steps from an emergency-room door, will make you feel utterly destroyed. "Laura's Law," which as of June will create first-time hospital standards for emergency room signage, lighting, navigation and the security monitoring of entrances, will give you hope.

As will this road race for me.

Instead of focusing on the tragic, I have a chance to celebrate Laura's love of exercise and her mantra of living life to the fullest by doing something that brings me joy. By feeling the ocean wind in my face, and the pavement on my heels. By cheering on my AAFA New England teammates Alicia, Laurel, Patty and Sara -- whom I'm pretty sure will smoke me. All with Laura's name proudly on my singlet, and with her, as always, in my heart.



Sarah Helmes



My name is Sara Helmes and I'm thrilled to be running on behalf of the New England Chapter of the Asthma and Allergy Foundation of America. I am a mom to two boys (3 years and 7 months) and when my 3 year old was 5 months, we realized he was very allergic to peanuts - breaking out in hives from someone else eating a peanut butter sandwich nearby.

I'm running because I know that the moment someone you love is diagnosed with a life threatening condition, it changes you. It comes with so much unknown, so much fear, so many questions.

While this allergy may always be on my mind, I know that there are so many things to keep us safe and so much research being done. AAFA New England is the place to go to help support families affected with both allergies and asthma - it helps fund research and support. It is just what families, like my own, need to help them navigate through this.

AAFA New England commends Hopkington High School students Hana Duran, Avani Daga, Briana Mallouh, and Vienna Rivard for their excellent work in researching and creating this poster depicting the health effects of pollution and asthma disparities.

Health Effects of Air Pollution

2.5 MILLION DIE ANNUALLY BECAUSE OF AIR POLLUTION.



HEART DISEASE

LUNG CANCER

SKIN DISEASES

WORSENS ASTHMA

ALZHEIMERS

IRRITATION

ENVIRONMENTAL RACISM

Communities of color are more susceptible to health effects of global warming.

AFRICAN AMERICANS ARE 3 TIMES MORE LIKELY TO DIE BECAUSE OF AIR POLLUTION THAN THE GENERAL POPULATION.

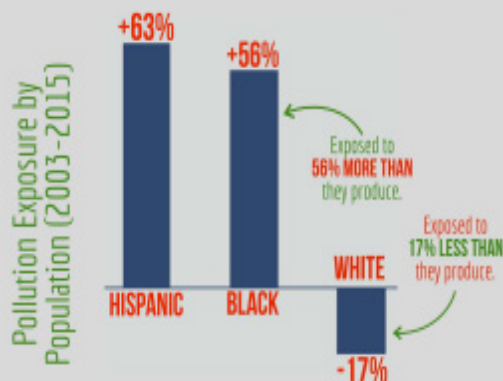


Systemic Racism

ORIGINS

Redlining

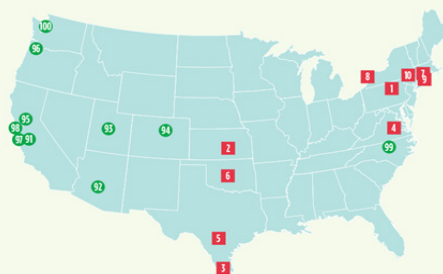
Disinvestment



AAFA Releases the 2022 Allergy Capitals Report™

2022 Allergy Capitals

SEASONAL ALLERGIES
The most and least challenging cities for spring and fall pollen allergies



MOST Challenging Cities

1. Scranton, PA
2. Wichita, KS
3. McAllen, TX
4. Richmond, VA
5. San Antonio, TX
6. Oklahoma City, OK
7. Hartford, CT
8. Buffalo, NY
9. New Haven, CT
10. Albany, NY

LEAST Challenging Cities

91. Fresno, CA
92. Phoenix, AZ
93. Provo, UT
94. Denver, CO
95. Sacramento, CA
96. Portland, OR
97. San Jose, CA
98. San Francisco, CA
99. Durham, NC
100. Seattle, WA

aafa Asthma and Allergy Foundation of America
allergycapitals.com

More than 24 million Americans live with season allergic rhinitis – hay fever

The 2022 Allergy Capitals Report™ ranks the top 100 most challenging cities to live in the continental United States if you have seasonal pollen allergies.

The rankings are based on:

- Spring and fall pollen scores
- Over-the-counter medicine use
- Availability of board-certified allergists/immunologists

Seasonal allergic rhinitis, commonly known as “hay fever” can cause symptoms during the early spring, late summer and early fall when pollen counts are particularly high. Pollen allergies can worsen asthma as well.

The symptoms of allergic rhinitis can include:

- Sneezing
- Stuffy nose
- Runny nose
- Red and watery eyes
- Itchy nose eyes ears or mouth
- Swelling around the eyes

If you experience seasonal allergies, work with your allergist to make sure you have a plan in place to reduce your allergy symptoms. Reducing environmental triggers and utilizing medical treatments will help you to feel better and improve your quality of life.

To read the full report, visit www.allergycapitals.com

Thank You to Our Corporate Partners

AAFA New England is grateful for the support of our Corporate Partners in 2022. 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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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.

Information contained in this newsletter should not be used as a substitute for responsible professional care to diagnose and treat specific symptoms and illness. Any reference to available products and procedures should not be construed as an endorsement. AAFA New England, including all parties to or associated with this newsletter, will not be held responsible for any action taken by readers as a result of the newsletter.

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Research Opportunities to Get Involved

Massachusetts General Hospital



Cow's Milk Allergy Children

- A phase 2 study to evaluate the sensitivity, specificity and safety of DBV1605, a ready to use atopy patch test for the diagnosis of non-immunoglobulin E mediated cow's milk allergy in children
- Ages 1 month to 5 Years
- Subjects with a history of symptoms that are consistent with non-IgE mediated CMA as per Investigator's assessment, by either:
 - Two or more gastrointestinal symptoms (vomiting, diarrhea, persistent distress/colic, regurgitation, constipation), that lasted at least 1 week within 1 month prior to Screening Visit
 - Blood in stool
- Subjects with any type of diet containing regular cow's milk protein (e.g. cow's milk consumption, cow's milk partial elimination, partially hydrolyzed milk) within 1 month prior to Screening Visit
- Subjects with a negative cow's milk SPT: mean wheal diameter
- <https://clinicaltrials.gov/ct2/show/NCT04492683>

If you are interested in receiving information regarding MGH studies, please email:
foodallergy@mg.harvard.edu



Boston Children's Hospital

Until every child is well™

Asthma/Allergy Clinical Research Center is an National Institutes of Health (NIH) funded Center, currently recruiting for a number of studies for patients with asthma and/or allergies! All visits are compensated and all travel to and from the hospital is covered by the research group. The studies also provide free medications. Call or email to see if you or your child is eligible for any of these exciting studies!

- **PARK (Preventing Asthma in High Risk Kids):** Park is a prevention study aimed at identifying whether 2 years of treatment with Xolair® (AntiIgE) injections can prevent lasting asthma or reduce asthma severity in children ages 2-4 years with a history of wheezing, allergies, and family history of wheezing, allergies. We will also evaluate whether this treatment stops or modifies the allergic march, which includes eczema, food allergies and other allergic conditions. <https://parkstudy.org/> <https://answers.childrenshospital.org/asthma-prevention-xolair/>

Boston Children's Hospital studies provide free treatments, compensation for time and travel. For more information about any BCH studies and/or to refer potential interested families, please email asthma@childrens.harvard.edu or call 857-218-5336. <https://www.childrenshospital.org/research/centers-departmental-programs/asthma-clinical-research-center>

Fall Gala 2022



AAFA New England is busy planning our *for life without limits*™ Fall Gala 2022! We will honor **Champions of the Asthma and Allergy Community** and celebrate our **Team AAFANE** runners who will be running to support AAFA New England in the ASICS Falmouth Road Race 2022 this coming August 21. We'll be sharing more information with the date and location of our special event soon!

Join Us and Get Involved!

- Attend our Speaker Series Programs and learn from the experts!
- Advocate with with us for changes in public policy that will benefit the asthma and allergy community!
- Spread Awareness by participating in our social media!
- Volunteer for fun and meaningful work!
- Support AAFA New England: your donations help us all help us all “for life without limits”!
- Sponsor a Team AAFANE Runner in the ASICS Falmouth Road Race!



Asthma and Allergy
Foundation of America®
NEW ENGLAND CHAPTER



DEDICATED TO THE
CONTROL AND CURE OF
ASTHMA AND ALLERGIES
TO HELP PEOPLE LIVE ACTIVE, HEALTHIER LIVES

Education
& Training

Support
Services

Advocacy

Research
Support

All of our programs and services are funded
through grants and charitable donations

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asthmaandallergies.org

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