Bring on Fall, Bring on Fall Allergies

The leaves are changing colors and the AAFA’s Fall Allergy Capitals rankings are in! McAllen, Texas is the most challenging place to live in the U.S. with fall allergies. This is due to its high level of pollen, high usage of allergy medicines and lower availability of board-certified allergists.

See if your city is on our list. The Fall Allergy Capitals 2018 report is now available at allergycapitals.com. The 100 largest metropolitan areas in the U.S. were ranked based on: pollen counts, use of allergy medicines and availability of board-certified allergists.

The top 10 Fall Allergy Capitals for 2018 are:

1. McAllen, Texas
2. Louisville, Kentucky
3. Jackson, Mississippi
4. San Antonio, Texas
5. Dayton, Ohio
6. Providence, Rhode Island
7. Memphis, Tennessee
8. Syracuse, New York
9. Oklahoma City, Oklahoma
10. Toledo, Ohio

The Fall Allergy Capitals report is an annual research and education project of AAFA. It is designed to help people with allergies recognize, prevent and safely treat allergy symptoms.

Nasal allergies affect more than 50 million Americans. About half of those are due to seasonal allergies. To manage your seasonal allergies, see a board-certified allergist to get an accurate diagnosis, control exposure to your allergens and keep up with your treatment plan.

A WORD FROM AAFA’s CEO

Education is a critical part of the support we offer people with asthma and allergies. Knowledge helps people better manage their conditions, which results in better outcomes.

The time of diagnosis is when many people need help the most. They feel scared and overwhelmed when they first hear they have asthma or allergies. We created the ASTHMA Care for Adults program with the newly diagnosed in mind. This training gives a comprehensive look at asthma management, so they can face asthma with confidence. We are proud to add this to our educational resources in 2018, giving newly diagnosed adults a solid foundation for proper management.

Warmly,

Kenneth Mendez
CEO and President

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A WORD FROM
AAFA’s Board Chair

Thank you for being a part of the AAFA Community. Without you, we could not offer life-saving education, groundbreaking research, far-reaching advocacy and much-needed support to people with asthma and allergies. As the landscape of asthma and allergies continues to evolve, we know there will be many more opportunities for us to work as a community; fulfill our mission; and improve the lives of those with asthma and allergies. We look forward to working with you to have an even greater impact in 2019.

Best wishes for good health,

Heidi J. Bayer
AAFA Board Chair

You Can “BE THE BOSS” of Your Asthma

For years, asthma has been thought of as a single disease. But researchers now know asthma is a chronic condition. And it can be different for each person. There is no “one size fits all” approach to managing asthma.

Many people with asthma manage it well, thanks to current treatments. But, some have trouble managing it even on maximum therapy. There are different types, called “subtypes” or “phenotypes.” Figuring out which type of asthma you have may be key to getting the right treatment.

One type, eosinophilic asthma, is now known as an important phenotype. Eosinophils are disease-fighting white blood cells that everyone has in their body. People with eosinophilic asthma have higher levels of eosinophils. Too many can cause inflammation in the airways. Increased eosinophils in the blood have shown to relate to more severe asthma attacks.

The symptoms of eosinophilic asthma – such as coughing and wheezing – are similar to other types of asthma. But they can often be more severe and persistent. Researchers have found new treatments that target specific types of asthma. So it’s important to work with your health care provider to find the right treatment for you.

To learn more about severe eosinophilic asthma (S.E.A.) visit BeTheBossOfYourAsthma.com. On the site, you can download a guide to living with S.E.A.

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AAFA Names 100 Most Challenging Places to Live with Asthma in 2018

Although you do your best to take your medicines and avoid triggers, the area you live in may still make it hard to manage your asthma. AAFA recently released the 2018 Asthma Capitals™ report. We ranked the top 100 cities in the U.S. where it’s challenging to live with asthma. This report shows how community factors can increase asthma rates and how we all should work together to decrease them.

We ranked each city based on these asthma outcomes:
- Asthma prevalence (or occurrence)
- Asthma-related emergency room visits
- Asthma-related deaths

Springfield, Massachusetts, is our #1 Asthma Capital for 2018. It has a high asthma rate overall. It also has the highest number of asthma-related emergency room visits in the U.S.

Here are the top 10 Asthma Capitals for 2018:
1. Springfield, Massachusetts
2. Richmond, Virginia
3. Dayton, Ohio
4. Philadelphia, Pennsylvania
5. Louisville, Kentucky
6. Cincinnati, Ohio
7. Youngstown, Ohio
8. Birmingham, Alabama
9. Greensboro, North Carolina
10. Toledo, Ohio

Each day, 10 people die from asthma. That’s 10 too many. We can all play a role in saving lives by improving our communities. We hope this report will drive the conversation about how local, state and federal leaders can improve their communities to make life better for those with asthma.

Visit asthmacapitals.com to see the full list of 100 cities, methodology and learn more about asthma management.

Reducing the Chance of an Asthma Flare and Finding Support

Six years ago, Lisa Kelly went to see her doctor about a chronic cough. She learned she has severe uncontrolled asthma. With her doctor’s help, she has since tried various treatments to manage her asthma. They have each helped for a little while, but not as much as she would like.

Last fall, she discovered AAFA’s online community. She met other people with severe uncontrolled asthma, and with their support and accountability, her asthma control is getting better.

“I’m doing a lot better since I found the AAFA community,” shared Lisa. “The people on the AAFA forums have definitely helped me better understand my asthma and take steps to reduce the chance of a flare.”

“Everyone is so encouraging and helpful,” she shared. “There have been times I don’t know what I would have done without everyone there.”

Visit aafa.org/community to join for free today!
Problem: 
A recipe calls for buttermilk, but you need your dish to be milk-free or vegan.

Solution: 
Make your own buttermilk within minutes!

For a buttermilk that works well for biscuits, pancakes, cakes and cream of mushroom soup, follow these steps:

1. Pour 1 Tbsp lemon juice or vinegar into a measuring cup
2. Fill the measuring cup with a safe-for-you non-dairy milk (soy, coconut, etc.) until you reach 1 cup
3. Let sit for 10 minutes or until it curdles
4. Use as a 1:1 replacement for buttermilk in your recipes

Check out KFA’s Safe Eats® recipe database at kidswithfoodallergies.org/recipes for more than 1,200 recipes for allergy-friendly cooking.

Remembering Her Son While Educating and Raising Awareness

Austin Dodds was diagnosed with asthma when he was 3. At age 16, on Oct. 1, 2016, he had a massive asthma attack. He lost consciousness, and a few days later he passed away.

Today, Austin’s mom, Meredith, is making an impact in her son’s memory by educating people about asthma. Last year, she started the MyHope4Austin Organization. To help students learn the symptoms and early warning signs of asthma, she presents asthma awareness workshops in schools.

“We don’t want any other parent to have to feel the pain we do.” – Meredith Dodds

For the second anniversary of Austin’s passing, she recently held a Walk for Asthma Awareness in Akron, Ohio. The walk opened with a moment of remembrance for Austin. The event also featured hands-on activities to educate people of all ages about asthma.

“It is very important that we don’t just raise awareness but have people walk away knowing more about asthma,” shared Meredith. “We don’t want any other parent to have to feel the pain we do. This will be a lifelong thing for me and my family. We will always do what we can.”

Thank you, Meredith, and the MyHope4Austin Organization.

With your support for the Asthma and Allergy Foundation of America, you make a difference to millions of Americans living with asthma and allergies.

Visit aafa.org/fundraise to get started with our easy online tools or to request our fundraising kit.
School is back in session. Homework is in full swing. And you need the help of your child’s teacher to manage their asthma or allergies.

It takes planning and persistence to keep kids with food allergies safe at school. That’s why AAFA created the Teal Classroom™ Kit. We encourage you to share this kit with teachers and other school staff. It can help you form a partnership to raise food allergy awareness in your child’s school.

Inside the kit you will find:

- Food allergy awareness lesson plans
- Printable posters and activity sheets
- Ideas for non-food rewards
- List of hidden allergens in school craft and art supplies
- And more!

It is also important to partner with the school nurse and cafeteria staff at your child’s school. By now you have likely filled out lots and lots of school forms. Make sure you have completed and returned the following:

- Medication authorization form to allow the school to store and/or administer emergency medicines, or to allow your child to self-carry

- Special dietary meals accommodation form to help the school prepare safe foods for your child

- Anaphylaxis Emergency Action Plan to tell caregivers what to do in case of an allergic reaction

Together, we can keep children with food allergies safe and be prepared for allergic reactions at school.

Protect Students with Asthma

The School-Based Respiratory Health Management Act, H.R. 2285 is currently in the U.S. House of Representatives. It would require states to have laws that allow schools to keep asthma quick-relief medicines on hand. The bill would also give legal protection to school staff who give the quick-relief medicine without a prescription.

AAFA supports this bill. Stocking emergency albuterol in schools could save lives. Please ask your legislators to support H.R. 2285. Visit aafa.org/2285.
Improve Your Indoor Air Quality to Improve Your Health

Did you know, people spend as much as 90 percent of their time inside their homes, offices, schools and cars? October is Indoor Air Quality Awareness Month. For those with allergies and asthma, air quality is important both indoors and out.

What Impacts Your Indoor Air Quality?

Air quality is a measure of gases and small particles in the air that can be harmful to your lungs. Items in your home release gases and irritants into the air. Allergens (like dust mites and pet dander) also impact your air quality. Outdoor air pollution (traffic exhaust, wildfire smoke, smog, etc.) can make its way inside to worsen your indoor air quality.

Some sources of indoor allergens include:
- Dust mites
- Pets
- Cockroaches and mice
- Mold and damp areas
- Wall-to-wall carpet
- Soft furniture and stuffed toys
- Mattresses
- Pillows and bedding

Some sources of indoor air pollution include:
- Scented household cleaners and air-fresheners
- Fuel-burning heat sources
- Smoke from cooking, candles, fireplaces or cigarettes, cigars, pipes and vapes
- Vehicles or lawnmowers stored inside garages
- Fumes from new furniture and carpet
- Building and paint products
- Pesticides
- Radon
- Cosmetics, perfumes and hair sprays

What Can You Do to Improve Indoor Air Quality?

The best way to improve indoor air quality is to get rid of the sources of allergies and irritants. Here are a few tips:

1. Establish regular cleaning routines.
2. Remove scented candles and throw pillows.
3. Use a dehumidifier to reduce growth of dust mites and mold.
4. Replace carpets with solid surface flooring if possible. Otherwise, vacuum weekly and have professional cleaning done a few times per year.
5. Use a CERTIFIED asthma & allergy friendly® air cleaner and filters.

CERTIFIED asthma & allergy friendly® products and services (like carpet cleaning) pass strict scientific tests to prove they are more suitable for making your home healthier. Visit aafa.org/certified to explore the more than 100 CERTIFIED products.

A healthier home can go a long way to managing asthma and allergies indoors. For more indoor air quality tips, visit aafa.org/iaq.
NOT ALL VACUUMS ARE EQUAL

What Does It Mean for a Vacuum to Be CERTIFIED asthma & allergy friendly®?

All vacuums have the same basic purpose: to remove debris like dust, dirt and pet dander from floors and furniture. But not all vacuums are the same. Some actually fill the air with those same particles and allergens you are trying to remove. If you have asthma and allergies, you need a vacuum that will trap allergens as it removes them to help you keep a healthier indoor environment.

So, what should you look for in a vacuum?

- Can it remove allergen-containing dust from carpets and rugs?
- Does it release particles and allergens back into the air while you vacuum?
- Does it release allergens back into the air when you empty the canister or bag?
- Do the accessories properly remove allergens from carpets, rugs and upholstery?

A CERTIFIED asthma & allergy friendly® vacuum is scientifically tested to ensure it properly removes allergens without releasing them back into the air.

If a vacuum meets our standards by passing all of our tests, it earns our certification. When you shop for a vacuum, look for the CERTIFIED asthma & allergy friendly® Mark on the packaging to know if your vacuum meets these standards.

CERTIFIED Products Are Scientifically Proven to Improve Your Indoor Environment

Many products promise to make your home healthier, but some make false or inflated claims. You can have a healthier home by choosing CERTIFIED asthma & allergy friendly® products. The Certification Program is a 12-year partnership between AAFA and Allergy Standards Limited. The goal is to raise standards for asthma and allergy products. We test products to help ensure they:

- Lower exposure to allergens and irritants
- Provide increased environmental control
- Withstand routine cleaning and care guidelines

To help you make informed decisions, we have CERTIFIED more than 100 products. When you are shopping for products for your home, look for the CERTIFIED asthma & allergy friendly® Mark. It indicates the product has passed our testing standards.

Visit aafa.org/certified to search for CERTIFIED products. There you can also learn more about the asthma & allergy friendly® Certification Program. We also have an app for searching on the go. The asthma & allergy friendly® Certification Program app is available for both iOS and Android devices.
More than 25 products earned the asthma & allergy friendly® CERTIFIED certification so far this year. They each passed scientific tests to ensure the products meet our standards to reduce asthma and allergy triggers. Take a look.

Welcoming New Companies to the Certification Program

This year we welcomed four new companies and their products to the asthma & allergy friendly® Certification Program.

Sanitaire

Sanitaire® EON™ ALLERGEN Upright Vacuum Cleaner can help reduce exposure to allergens and improves indoor air quality. It is the first commercial vacuum cleaner to earn the CERTIFIED mark. And, it is quiet too.

Congoleum CLEO™ Resilient Home Flooring does not contain PVC, plasticizers or phthalates. It is also waterproof and durable.

True Value

True Value EasyCare Ultra Premium Acrylic Latex Paint is a way to add more color to your home with minimal impact on indoor air quality.

Guardsman US LLC Dusting Cloths trap and remove allergens from furniture, blinds, cabinets and more without the need for spray mists and odors. You can even rinse and reuse them.

New CERTIFIED Products Help Make Your Home Healthier

A Commitment to Improving Air Quality and Reducing Exposure to Allergens

We are grateful to companies committed to making more options available for people with asthma and allergies. Check out these new and improved products. They improve air quality, as well as reduce exposure to asthma and allergy triggers.

- Dyson USA Inc. – Pure Cool DP04 Air Cleaner (X520)
- Dyson USA Inc. – Pure Cool TP04 Air Cleaner (X438)
- Fellowes Inc. – AeraMax™ Portable Air Purifiers – AM3 PC, AM35 PC, AM4 PC, AM45 PC
- Fellowes, Inc. – AeraMax™ Portable Air Purifiers now have an added particle counter display
- LG USA – WM3700H*A Washing Machine
- LG USA – WM1399H*A TurboWash™ Washer with Steam Technology
- LG USA – WM3499H*A LG Washer with Steam Technology
- LG USA – WM3700H*A Washing Machine
- LG USA – Baron Styler Steam Clothing Care System
- LG USA – Styler Steam Clothing Care System reduces allergens in clothing and fabric items that are difficult or impossible to wash. It is the first steam clothing care system to be CERTIFIED.
- Hollander USA – 300TC 100% Cotton Memorelle fill pillow
- Hollander USA – 230TC Blue Satin Cord Pillow
- Indo Count Industries Ltd. – AllerCot EverClean Range (select products, new colors available)
- Indo Count Industries Ltd. – AllerCot Pale Aqua 400TC Pillowcase
- LG USA – WML399H1A TurboWash™ Washer with Steam Technology
- LG USA – WM3499H1A LG Washer with Steam Technology
- LG USA – WM3700H1A Washing Machine
- Latex USA – Baron Styler Steam Clothing Care System
- Tarkett Inc. – Performa (5S000 Series) Flooring with Tarkett 925 Adhesive
- Tarkett Inc. – TruTex (27000 Series) Flooring with Adhesive 959

These products are raising the standards for a cleaner and healthier home. To learn more about the 100+ products that have become CERTIFIED, visit aafa.org/certified.
DR. DOUGLAS JOHNSTON is our Ask the Allergist columnist.

Dr. Johnston is a Board-Certified Allergist/Immunologist with Asthma & Allergy Specialists, PA, in Charlotte, North Carolina. He obtained his DO from New York Institute of Technology College of Osteopathic Medicine. He completed his residency at Winthrop University Hospital in Mineola, New York.

Dr. Johnston grew up with both allergies and asthma. He decided it would be exciting to help people with these conditions. His passion about food allergies also comes from having a child with a peanut allergy.

Information from Ask the Allergist is not a substitute for a consultation with a health care professional. Always talk with your own doctor before making changes to your asthma or allergy management plan.

**ASK THE ALLERGIST**

**Your Questions, AAFA's Answers**

**Question** I have eczema and seasonal allergies. My doctor wants to do a skin test to see if I should get allergy shots. Can I get allergy shots if I have eczema? Does eczema affect the accuracy of allergy skin test results?

**Answer** You can get allergy shots if you have atopic dermatitis (eczema). Allergen immunotherapy (allergy shots) may be helpful if your eczema is triggered by allergens. Skin testing is an appropriate test if you have an area of clear skin (typically on the back) to do the testing. Those with eczema may have sensitive skin and even react to the scratch itself. This is one of the reasons why allergists do a skin prick test with a positive and negative control. Often a scratch with saline is done to prevent telling you that you are allergic to something you are not.

**Question** My 3-year-old has been vomiting, gagging or spitting up after consumption of peanut-containing products. The last incidences were with peanut candies, peanut butter cookies and a homemade peanut butter cup. It’s just vomiting and that’s it – quickly after eating. He’s had licks of peanut butter and small amounts of peanut butter crackers at 1-2 years of age. He’s just recently started vomiting. He has everyday contact with peanuts and peanut butter as my husband and I eat it every day, and we have touched him and fed him with our fingers and kissed him after eating peanut butter. I ate peanut butter regularly during pregnancy. He’s most likely had lifelong exposure to foods that may contain nuts as warned by manufacturers. I’m worried he’s developed a peanut allergy now and have questions.

**Answer** If your son is vomiting within an hour of eating peanut, he may be developing food allergy to peanut. While this may seem like a mild reaction, this can change based on how much he ingests. And it may change overtime as it is very likely his sensitization will increase. It would be best for him to avoid peanut and see a board-certified allergist. I would also tell your pediatrician about this reaction. I would recommend that he have a form of self-injectable epinephrine because there may be potential for a more severe reaction.

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**ECZEMA TIP:**
Since eczema causes defects in your skin’s barrier, how you bathe can make a big difference in your symptoms. Using water that is too hot, staying in the water too long and using harsh soaps can irritate your skin. Instead, use lukewarm water. Limit your time in the bath or shower. Don’t scrub your skin. And moisturize within 3 minutes of bathing.
ATOPIC DERMATITIS IN AMERICA: Find Relief for This Painful Itchy Rash

If you have atopic dermatitis (AD), you know a dry, itchy, red rash on your hands, arms, legs or other parts of the body is a part of daily life. AD is an allergic condition and the most common type of eczema. October is National Eczema Awareness Month. It’s a great time to educate your patients, family, friends, co-workers and others about eczema.

More than 18 million Americans of all ages have AD. The severity of AD can be different for each person and does not depend on when you developed the disease. However, AAFA’s recent study titled Atopic Dermatitis in America found that people with adult- and late childhood-onset AD reported the disease has a greater burden on their quality of life than those with early childhood-onset AD. People with late-onset AD also said they experienced more symptoms of depression than those with early-onset AD.

No matter your age, moisturizing and knowing what triggers your eczema is important to managing the condition and finding relief. Common triggers include:

- allergens
- soaps
- household cleaners
- metals
- rubber products
- perfumes
- dyes and formaldehyde
- stress

Flare-ups can be frustrating and painful. While AD is an allergic condition, antihistamines generally do not help. AD can be treated with over-the-counter or prescription topical treatments (such as corticosteroid ointment) to reduce inflammation. There are also some oral medicines or biologics your doctor can prescribe.

The goal of treating AD is to relieve pain and itching and prevent infections. If your AD becomes warm to the touch or develops blisters, talk to your doctor.

To learn more about AD, visit aafa.org.

What Is a BIOLOGIC?

Biologics are targeted therapies made from living organisms or natural sources. Biologic therapy involves injections every few weeks or so that are tailored to the individual. Biologics help normalize your immune system by controlling immune responses that lead to inflammation. There are biologic treatments available for people with moderate to severe asthma or atopic dermatitis.

If you’ve tried treatments without success, consider asking your doctor about biologics and whether one of these therapies are right for you.
There are many factors that go into proper asthma management. But a new asthma diagnosis can leave you with a lot of questions.

AAFA has created the ASTHMA (Asthma Symptoms, Treatment, Health Management and Activities™) Care for Adults program. This training offers a comprehensive look at asthma management.

For asthma educators and health care providers, we offer the program as a facilitated class to teach the lessons one on one or in a group setting. Visit aafa.org/ac-kit for more information.

For individuals with asthma, we offer this program as a free online course. It’s interactive - using videos, handouts and quizzes to walk you through the lessons. You can take the course at your own pace. Register at afa.org/asthmacare.

“This program will put people in control of their asthma from the moment of diagnosis.”

– Melanie Carver, Vice President of Community Health and Services

“There is a lot of information on asthma, but not a lot in a complete format to help someone understand all aspects of managing their asthma,” said Melanie Carver, Vice President of Community Health and Services. “Understanding asthma is so important to properly managing it, feeling better and living a full, healthy life. This program will put people in control of their asthma from the moment of diagnosis. People who have already been managing asthma will find it to be a great refresher. It’s also a great tool health care providers can use so they don’t have to develop their own materials.”
It’s Time to Label Sesame A Major Allergen

For people with food allergies, accurate food labels are important. Ingredient labels became clearer when the Food Allergen Labeling and Consumer Protection Act went into effect in 2006 – at least for those allergic to one of the top eight major food allergens. The Food and Drug Administration (FDA) considers milk, eggs, fish, crustacean shellfish, tree nuts, wheat, peanuts and soybeans as major food allergens.

Sesame is not on that list. In the U.S., it is not disclosed on all food ingredient labels. But sesame is proving to be a prevalent food allergen across the world.

Sesame can be hidden on food ingredient labels as “spices” or “natural foods.” It can also be listed under an unusual name such as “tahini” or “benne.” This creates challenges for those with sesame allergies.

We want sesame to be clearly listed on all food ingredient labels.

In 2014, we began petitioning the FDA to consider sesame as a major food allergen in the U.S. In 2016, the National Academy of Medicine reported that sesame allergy appears to be as prevalent as the eight major food allergens. Food labels in the European Union, Australia and Canada now clearly list sesame.

Nothing has changed in the U.S.

We need your help so we can advocate for clearer ingredient labels for sesame. If you or someone you love has had issues with undeclared or hidden sesame, please email advocacy@aafa.org. We are organizing communications with the FDA to prove the need for allergen labeling for sesame in the U.S.

It’s time the top eight become the top nine; for FDA to include sesame as a major food allergen; and for sesame to be clearly disclosed on food labels. We will continue advocating for those with sesame allergies until this happens.
Studies show that an egg allergy is no longer a reason to avoid the flu vaccine. These studies looked at people with different types of reactions to egg and found a low chance of severe allergic reaction. It is safe for ALL people with an egg allergy to receive a flu vaccine. This is true no matter how severe your egg allergy was in the past. This includes anaphylaxis (a severe allergic reaction) to egg.

THE FLU VACCINE is safe for those with an egg allergy.

Have you ever heard, “It’s just the flu”? The flu is a contagious respiratory illness caused by a virus. It’s more than “just” a minor illness, especially if you have asthma.

The flu affects your lungs. For a person with asthma, the flu can irritate airways that are already inflamed. This can worsen your asthma. It can lead to serious complications like pneumonia and can be fatal.

**Get the flu vaccine every year.** It still helps even if you get the flu or if the shot doesn’t cover the current common strains. Studies show it can make flu symptoms subside if you get the flu anyway.1

**Avoid habits that can expose you to the flu.** Wash your hands well and often. Avoid sick people. Don’t touch your eyes, nose and mouth.

**Call your doctor as soon as you have symptoms.** The flu usually starts suddenly and may include:

- Fever (often very high, 101 or above)
- Headache
- Extreme fatigue, tiredness, chills
- Constant cough
- Sore throat
- Runny or stuffy nose
- Body aches in bones and/or muscles

**Take care of yourself and get treatment.** Talk to your doctor about antiviral drugs approved to treat flu and start them within two days of illness. Get plenty of rest, drink lots of liquids, and avoid alcohol and tobacco. Also, you can take over-the-counter medicines to relieve symptoms.

**Watch for emergency symptoms.** Get help right way if you notice any of these signs or have Red Zone symptoms according to your Asthma Action Plan. Here are some common emergency symptoms in adults:

- Rapid breathing or difficulty breathing
- Pain in the chest or abdomen
- Sudden dizziness
- Confusion
- Severe or persistent vomiting

**Practice good asthma management all year round.** Take your long-term control medicines as prescribed. Carry your quick-relief medicines everywhere. Control your triggers. Follow your Asthma Action Plan. Get your asthma under control as soon as you move into the Yellow Zone. If you manage your asthma well, you can reduce your risk of complications from the flu if you do get sick.

1. [https://www.cdc.gov/flu/about/qa/vaccineeffect.htm](https://www.cdc.gov/flu/about/qa/vaccineeffect.htm)
You Are an Important Part of Asthma and Allergy 
RESEARCH AND TREATMENT

Earlier this year, AAFA surveyed members of our community about clinical trials for asthma and allergies. Most people said they would be willing to consider clinical trials. But only 9% of the people said they had been invited to participate in one!

Research, including clinical trials, plays a huge role in advancing asthma treatment and management. Clinical trials are research studies that use people to test new treatments, procedures or devices. These are called “interventions.” During the trials, researchers work to measure safety and efficacy of the intervention. Trials are carefully designed and involve several phases.

AAFA is building a program to better connect people with asthma and allergies to research opportunities. The first step will be to highlight some available trials and match you with potential opportunities. By joining our online community, we’ll update you when we hear of trials you may qualify for. Join at community.aafa.org.

Of the Survey Respondents ... 

70% have allergies
57% have asthma
42% have a child with allergies
29% have a child with asthma

Are People Willing to Participate?

87% of respondents are more likely to participate in a clinical trial if they are invited by a respected nonprofit patient organization like AAFA.

80% of respondents are willing to travel at least 10 miles to participate. And 16% are willing to travel more than 50 miles!

What Stops People From Participating?

Only 15% had discussed a clinical trial with a doctor
Only 16% had searched for a clinical trial on their own
Only 9% had been invited to participate in a clinical trial

To learn more about how clinical trials work, visit aafa.org/clinicaltrials.
INSIDE THIS ISSUE:
FALL ALLERGY CAPITALS • Be the Boss of Your Asthma
ASTHMA CAPITALS • Teal Classroom Kit™ • IMPROVE YOUR
INDOOR AIR QUALITY • Vacuum Tips • NEW CERTIFIED
asthma & allergy friendly® PRODUCTS • Atopic Dermatitis
in America • ASTHMA CARE FOR ADULTS • Sesame Allergy
FLU SEASON • Clinical Trials • AND MORE!

In 1953, we formed with a mission to improve the quality of life for people with asthma and allergies through education, advocacy and research. Today, our mission remains the same but our outreach has grown, thanks to you. We are grateful for your support during the past 65 years and in the years to come.