



NYC Vital Signs

Asthma Can Be Controlled

Asthma is a common disease among New York City's children and adults. People with asthma have chronic lung inflammation and episodes of airway tightening that cause symptoms such as wheezing, coughing, and shortness of breath. Asthma is a leading cause of missed school among children and is the most common cause of hospitalization for children 14 years and younger. Among adults, asthma causes missed work, emergency department visits, and limitation of activity. In the past two decades, the number of people with asthma has increased, although some improvements, such as fewer hospitalizations,

have occurred in recent years. Although we do not yet know how to prevent asthma, we do know that asthma can be controlled both by avoiding exposure to triggers and by taking anti-inflammatory medicines. With good control, almost all people with asthma can lead normal, active lives.

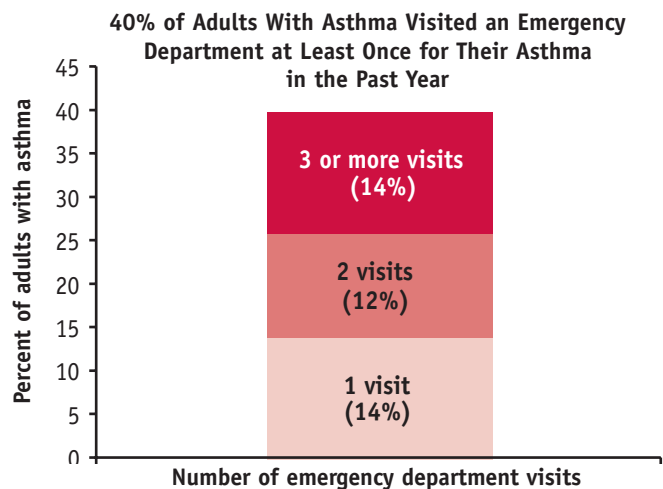
This report is based on the 2002 New York City Community Health Survey, in which approximately 10,000 adult New Yorkers were interviewed by telephone about their health and the health of their families.

About **700,000 adults** and **300,000 children** in New York City have been diagnosed with asthma at some time in their lives.

About **260,000** adult New Yorkers had an asthma episode in the past year.

Many New Yorkers suffer from poor control of their asthma

- Needing to visit the emergency department or being hospitalized for asthma are signs that a person's asthma is not well controlled.
- 40% of adult New Yorkers with asthma sought care for their asthma in an emergency department *at least once* in the past year.
- 14% visited the emergency department *3 or more times* in the past year.

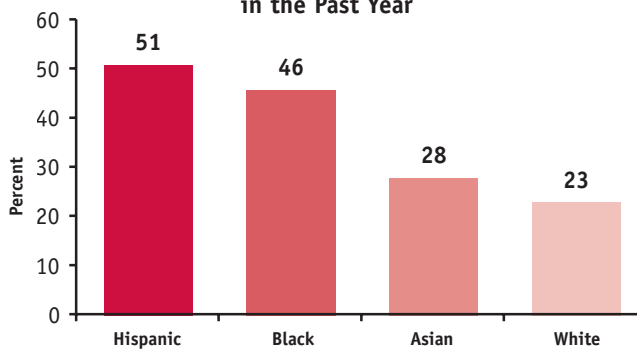


Among adults, asthma and poor asthma control are more likely to occur among Hispanic and African-American New Yorkers and in poorer neighborhoods

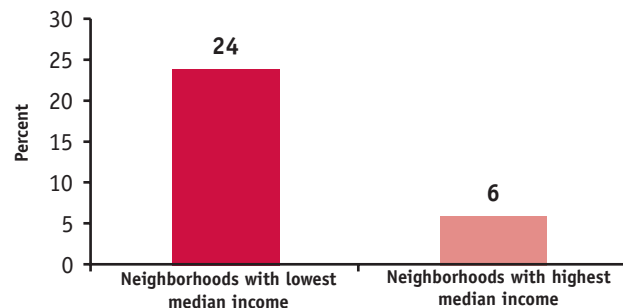
- 260,000 New York City adults (4.4%) currently have asthma, as defined by having had an episode of asthma in the past year.
- Asthma is more common among New York City women than among men, as it is nationally.
- Among adults, Hispanics have the highest asthma rates in New York City.

| | % adults with asthma in NYC | Number of adults with asthma in NYC |
|-----------------------|-----------------------------|-------------------------------------|
| Total | 4.4 | 260,000 |
| Sex | | |
| Men | 2.5 | 71,000 |
| Women | 6.0 | 187,000 |
| Race/Ethnicity | | |
| Hispanic | 6.4 | 84,000 |
| Black, non-Hispanic | 4.6 | 62,000 |
| White, non-Hispanic | 3.5 | 82,000 |
| Asian | 3.9 | 22,000 |

Half of Hispanic and African-American Adults With Asthma Received Emergency Department Treatment in the Past Year



One Quarter of Adults With Asthma in Poor Neighborhoods Received Emergency Care 3 or More Times in the Past Year



Source of income data: U.S. Census 2000 / NYC Dept of City Planning

- Success in controlling asthma varies greatly by race and ethnicity. Hispanic and African-American New Yorkers with asthma have the highest rates of emergency department visits—1 in 2 sought emergency care in the past year.
- Poor control of asthma is also more common in lower-income neighborhoods. The percent of adults with asthma who went to the emergency department 3 or more times in the past year was 4 times higher in poorer neighborhoods.

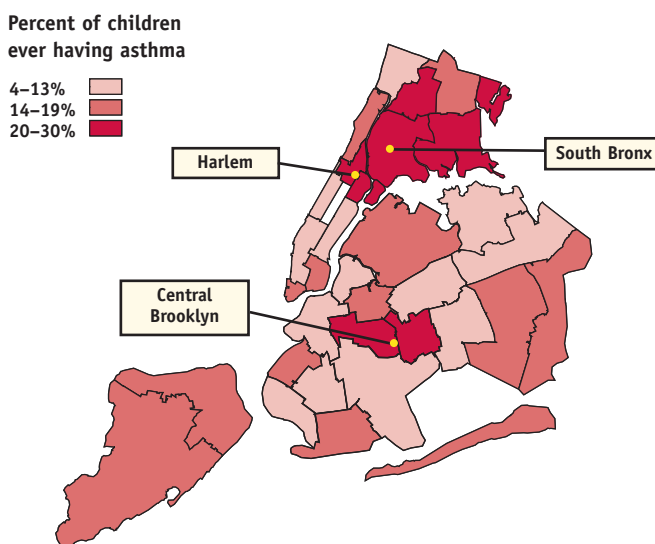
Controlling asthma requires partnerships between patients and providers—fortunately, most New Yorkers with asthma have health insurance and a personal doctor

Successful asthma control requires an ongoing partnership between the patient and his or her health care provider. Fortunately, more than 90% of New Yorkers with asthma have health insurance and more than 80% have a personal doctor. However, more

doctors need to use the most up-to-date treatments, such as anti-inflammatory medicines. In addition, there are still more than 19,000 New Yorkers with asthma who lack health insurance and 45,000 who do not have a personal doctor.

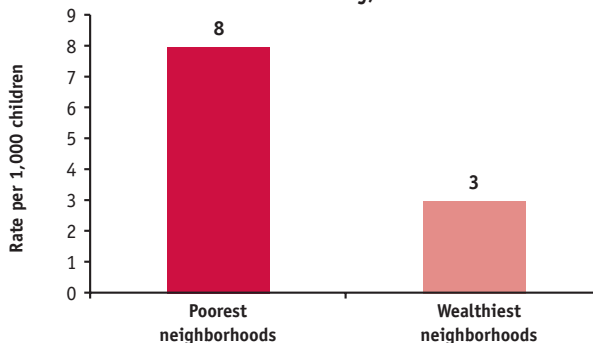
Asthma in children: as with adults, there are differences across New York City in both prevalence and control

- Citywide, 17% of children 17 years and younger—300,000 children—have had asthma at some time in their lives.
- Certain neighborhoods—especially the South Bronx, East and Central Harlem, and Central Brooklyn—have much higher rates of childhood asthma than others.



- Children who live in poor neighborhoods are almost three times as likely to be hospitalized for asthma as those who live in wealthier neighborhoods.
- This difference in hospitalization rates is a result both of asthma being more common among children living in poorer neighborhoods, and of inadequate control among children with asthma in those communities.

Hospitalization for Children 14 Years and Younger, New York City, 2001



Source: New York State Department of Health, Statewide Planning and Research Cooperative System (SPARCS) and U.S. Census 2000/NYC Department of City Planning

Tobacco smoke: a major—and preventable—trigger for asthma

- 1 in 4 adults with asthma smoke cigarettes.
- 7% of non-smoking adults with asthma are exposed to second-hand smoke at work.
- About 1 in 5 children who have been diagnosed with asthma are exposed to second-hand smoke in their homes.

| | Percent | Number |
|--|---------|--------|
| Adults with asthma who smoke | 25 | 72,000 |
| Adults with asthma who do not smoke and who are exposed to second-hand smoke at work | 7 | 18,000 |
| Children diagnosed with asthma who are exposed to second-hand smoke at home | 19 | 64,000 |

Recommendations

All people with asthma and families of children with asthma should have a written set of instructions, called an **Asthma Action Plan, that they develop with their health-care provider. The Asthma Action Plan should help patients to:**

- **Take the right medicines at the right time**

Any patient with asthma symptoms more than 2 days per week should use an anti-inflammatory controller medicine every day, even on days when no symptoms are present. For most patients, inhaled corticosteroids are the most effective controller medicines to prevent asthma symptoms and attacks. Bronchodilator medicines such as albuterol provide quick relief of symptoms but do not control inflammation.

- **Avoid triggers that make asthma worse**

Health-care providers should work with patients to identify triggers that could be making their asthma worse and should help patients avoid them. Common triggers include: tobacco smoke, cockroaches, mice, cats, dust mites, and pollen.

- **Get regular care and know when to seek emergency care**

People with asthma should get **regular checkups at least every 6 months**, even if asthma symptoms are not present. They should also **know when to call the doctor** or seek emergency care.

People with asthma should get a flu shot every year.

People with severe asthma may also benefit from the pneumonia vaccine (“pneumococcal vaccine”) and should discuss this option with their health-care provider.

For more information on asthma and how to manage it, or to obtain an Asthma Action Plan form, see the New York City Asthma Initiative Web site: www.nyc.gov/health/asthma or call the **Asthma Action Line** at **1-877-278-4620** or **1-877-ASTHMA-0**.

A report from the New York City Community Health Survey



nyc.gov/health

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NYC Vital Signs features information on critical aspects of public health in New York City.

To contact NYC Vital Signs, e-mail survey@health.nyc.gov.

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