



Champion E-Correspondence

February 2015

This is an e-mail communication related to the American Academy of Pediatrics (AAP) "Medical Home Chapter Champions Program on Asthma, Allergy and Anaphylaxis." It is designed to provide AAP Medical Home Chapter Champions with resources, as well as current clinical and other information. The Champion E-Correspondence is sent on a monthly basis. Feel free to share the Champion E-Correspondence with colleagues. Distribution information appears at the end of this newsletter.

Project Updates

Medical Home Chapter Champions Program on Asthma, Allergy and Anaphylaxis

Greetings from Elk Grove Village, Illinois! We are pleased to introduce the "buddy-up" program with colleagues in the AAP Section on Allergy and Immunology (SOAI). See the letter below from Todd A. Mahr, MD, FAAP, SOAI Chair, for more details.

LET'S BUDDY-UP!

Congratulations on taking the initiative to become AAP Medical Home Asthma, Allergy and Anaphylaxis Chapter Champions! I am pleased to serve as a champion in the Wisconsin Chapter and, like you, continue to strive toward better communication, quality, and continuity of care for kids with allergies and asthma within my region.

By way of introduction, I have been a member of the AAP for over 30 years, taking active roles in the Section on Allergy and Immunology, the National Conference & Exhibition (NCE) Planning Group, Practical Pediatrics Course (PPC) Planning Group, PREP: Self-Assessment Question & Critique Writers Committee, and my local Chapter. I have found working with the AAP to be extremely rewarding and I encourage all of you to find different ways to remain involved with the Academy.

The Section on Allergy and Immunology (SOAI), comprised of 200 board-certified pediatric allergists-immunologists, is highly committed to ensure that pediatric-aged patients receive the highest quality of care in allergy, asthma, and immunology. Ongoing section initiatives include clinical reports, educational sessions for the NCE, awards to residents, fellows-in-training, and junior faculty for outstanding abstracts and presentation of interesting cases, and a Visiting Professor Program for underserved areas.

The SOAI Executive Committee continuously seeks new opportunities to bridge the gap between general pediatricians and the pediatric allergist-immunologist. Referral resources have recently been developed by section members and can be accessed via our section website: <http://www2.aap.org/sections/allergy/SOAIConsultResources.pdf>

In addition, we should explore ways in which chapter champions can "buddy-up" with allergists in their respective states. We currently have 54 chapter champions serving in 51 AAP Chapters, only 8 of whom are allergists. The SOAI would be delighted to partner with chapters and districts to develop relationships and projects on a local and regional basis. Chapter champions should know that there are SOAI members with expertise in allergy and anaphylaxis who are willing and can be called upon at the local level to work with them if needed. We could partner together to write short articles for inclusion in chapter newsletters or webpages, present grand rounds, participate in allergy awareness seminars in schools (targeting both staff and students) or community fairs, or co-submit op-eds in local publications. We may also be able to help facilitate relationships with state and local allergy societies. The SOAI is committed to providing chapter champions with the support they might need.

If you would like to "buddy-up" with a pediatric allergist in your chapter, please contact Nkem Chineme at nchineme@aap.org.

MEDICAL HOME

**CHAPTER
CHAMPIONS**

**PROGRAM ON
ASTHMA
ALLERGY
AND
ANAPHYLAXIS**



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Upcoming Events

- ◆ [Asthma Grand Rounds Series: The Search for Biomarkers in Severe Asthma: Perspective from Pharma](#), March 6, Boston, MA
- ◆ Webinar: [Keeping the Patient and Family in a Patient-Centered Medical Home Transformation](#), March 11, 10am PT/11am MT/12pm CT/1pm ET
- ◆ Webinar: [Your Passport to Safe Travel: Traveling the Globe with Food Allergies](#), March 11, 10am PT/11am MT/12pm CT/1pm ET
- ◆ [Asthma Educator Institute](#), March 12-13, Oakland, CA
- ◆ [7th National Medical Home Summit](#), March 23-25, Philadelphia, PA
- ◆ [Moving Forward with Patient- and Family-Centered Care: Partnerships for Quality and Safety](#), March 30-April 1, Memphis, TN
- ◆ [AAP Legislative Conference](#), April 12-15, Washington, DC
- ◆ [6th Annual Pediatric Asthma Conference: The Future of Asthma](#), April 30-May 1, Columbus, OH

Reports

Randomized Trial of Peanut Consumption in Infants at Risk for Peanut Allergy

A new [study](#) published in the *New England Journal of Medicine* (February 2015) found that introducing peanut-containing foods into the diets of babies – including those prone to allergies – is a safe practice and could drastically reduce their risk of developing peanut allergies in the future.

Allergy in Children in Hand Versus Machine Dishwashing

This [study](#) conducted by Swedish researchers and published in the February 2015 issue of *Pediatrics*, found children whose parents hand-washed dishes had lower rates of eczema and asthma than those whose parents used a dishwasher machine. According to the researchers, the data indicate hand-washed dishes may be a good source of harmless microbial exposure, but additional studies are needed to confirm the findings.

Dishing It Out to Allergies

This [commentary](#) published in the February 2015 issue of *Pediatrics*, analyzes and discusses the recent study “Allergy in Children in Hand Versus Machine Dishwashing.”

Early Treatment of Food-Induced Anaphylaxis with Epinephrine Is Associated with a Lower Risk of Hospitalization

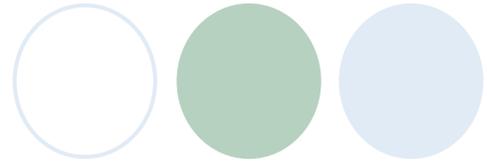
This September 2014 [article](#) published in *The Journal of Allergy and Clinical Immunology: In Practice*, highlights the impact early epinephrine administration can have on hospitalization. Children with food-induced anaphylaxis who were treated with epinephrine before arriving at the emergency department were at significantly lower risk of hospitalization than those whose epinephrine treatment was delayed until after arrival to the emergency department.

Patient-Centered Medical Home Reduces Cost, Raises Quality

This February 2015 [report](#) from the Patient-Centered Primary Care Collaborative -- *The Patient-Centered Medical Home's Impact on Cost and Quality, Annual Review of Evidence, 2013-2014* -- reviewed evidence from 28 studies and reports and found that patient-centered medical home models help regulate costs and improve health care access, patient satisfaction and care utilization. The report serves to inform policymakers, providers, payers, and patients on the most recent evidence regarding the Patient-Centered Medical Home and its impact on the health care marketplace.

Moisture Damage and Asthma: A Birth Cohort Study

This February 2015 [article](#) published in *Pediatrics* discusses the association of excess and visible mold to the increased risk of asthma. The study concluded that exposure to moisture damage and mold in early infancy were associated with asthma development. Children were most susceptible to developing asthma with mold exposure during their first two years of life, or if they already had allergies.



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Reports (continued)

Allergic diseases and asthma in the family predict the persistence and onset-age of asthma: A prospective cohort study

Family history of asthma and other allergic diseases have been linked to the risk of childhood asthma previously, but little is known about their effect on the age-of-onset and persistency of asthma until young adulthood. This [study](#) assesses the effect of the family history of asthma and allergic diseases on persistent vs. transient, and early- vs. late-onset persistent asthma. Family history of asthma and allergic diseases are strong determinants of asthma, but the magnitude of effect varies according to the hereditary group so that some subtypes have a stronger hereditary component, and others may be more strongly related to environmental exposures.

Resources

What to Do If Patients Can't Afford Epinephrine Auto-Injectors

Epinephrine is the only treatment for anaphylaxis. Epinephrine comes in the form of easy-to-use auto-injectors. It is only available through a prescription by your doctor. Each prescription comes with two auto-injectors in a set. Unfortunately, many people cannot afford to buy this potentially life-saving medication. If this is the case for your patients, consider sharing one or more of the [following options](#).



Building Your Medical Home: An Introduction to Pediatric Primary Care Transformation

The National Center for Medical Home Implementation presents a [new and innovative resource](#) that provides direction, resources, and tools to pediatric medical home clinicians and practices seeking to advance their knowledge and understanding of the medical home concept as it relates to practice transformation. The resource provides resources and strategies for starting medical home transformation, integrating key functions of a medical home into practice, and sustaining changes. Visit www.pediatricmedhome.org to view this new and innovative resource.

Patient Engagement Toolkit



Looking for Asthma, Allergy and Anaphylaxis materials to use in your practice, as well as share with your patients and their families? The Asthma and Allergy Network (AAN) has several resources that could be helpful. To find out more, please visit the [AAN website](#). PDF versions of some of these resources are also available in the Resources section of our [program website](#). Please contact [Tonya Winders](#) at AAN if you have any questions about their resources.



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Resources (continued)

Family Engagement Guide: The Role of Family Health Partners in Quality Improvement Within a Pediatric Medical Home

Created by the National Institute for Children's Health Quality, this [guide](#) assists practices working with families as improvement partners as they transform into a pediatric medical home. Information related to recruitment of family members, evaluation of activities, and sustainability of changes made throughout the practice is included.

Preventing Food Allergies: Recommendations for Pregnancy and Infancy

Which infants are at-risk for developing food allergies? Should pregnant women avoid certain foods? Should solid food for infants be introduced early or delayed? Which formulas are recommended? These questions and more are addressed by Dr Todd Green, medical advisor to Kids With Food Allergies and president of the Pennsylvania Allergy and Asthma Association in this [webinar](#).

New Guidelines for People with Nasal Allergies

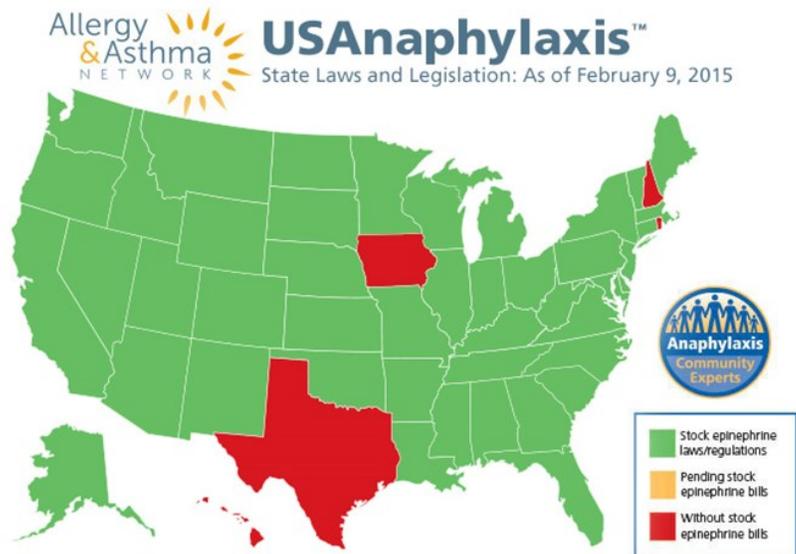
For the one in six Americans bothered by nasal allergies, [new clinical practice guidelines](#) were published in February 2015 to help doctors diagnose and treat their sniffles and sneezes. The recommendations from the American Academy of Otolaryngology-Head and Neck Surgery Foundation spell out the do's and don'ts for treating what's formally known as "allergic rhinitis," and often called hay fever.

Department of Health and Human Services Grant Opportunity
Health Resources and Services Administration Maternal and Child Health (MCH) Interdisciplinary Education in Pediatric Pulmonary Centers (PPCs) Modification 1. Visit the [website](#) for more details on the grant.

Policy and Advocacy

State Epinephrine Laws

[Stock epinephrine laws](#) across the country help save the lives of students who experience anaphylaxis at school and do not have a prescribed epinephrine auto-injector. Access at school is critical because 25 percent of anaphylaxis reactions at school occur in students previously undiagnosed with a severe allergy to food, insect venom, latex or medication. Green states have passed stock epinephrine laws or regulations, and red states have no stock epinephrine bills. No matter what color your state is, there is still work to be done in statehouses, legislatures and schools as lawmakers and policymakers develop law and implement policies. **Contact Allergy & Asthma Network to get involved:** ace@aanma.org





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Ways to Engage

Commenting on AAP Annual Leadership Forum (ALF) Resolutions

All AAP members are invited to [comment on resolutions](#) in advance of the ALF meeting. All comments will be compiled and shared with reference committee members. They will be posted online by March 11 so ALF attendees can view the report. No comments will be accepted after March 4.

Of the 116 resolutions, four focused on asthma, allergy and anaphylaxis. The resolutions include:

Resolution #6 - Children Carrying Inhalers in Schools

Resolution #25 - Advocating for the Need for Autoinjectable Epinephrine in Airplane Medical Kits

Resolution #45 - Asthma Action Plan

Resolution #46 - Support for Asthma Educators Within the Medical Home

In the News...

- ◆ [Gut Microflora in Cutting-Edge Allergy and Asthma Care](#)
- ◆ [Allergic Diseases and Asthma in the Family Predict the Persistence and Onset-age of Asthma](#)
- ◆ [Latest Mobile Tech Devices Look to Improve Food Allergy, Asthma Safety](#)
- ◆ [Researchers Claim Breakthrough in Treating Peanut Allergies](#)
- ◆ [58 Million Americans Exposed to Secondhand Smoke: CDC](#)
- ◆ [Premies More Likely to Have Asthma, Study Finds](#)
- ◆ [Actavis introduces generic version of AstraZeneca's Pulmicort Respules](#)
- ◆ [Portable Antihistamine That Fits in Your Bag](#)

Chapter Champions Call to Action

The AAP, for the first time, invites all members to comment on resolutions in advance of the Annual Leadership forum. There are four resolutions related to asthma, allergy or anaphylaxis.

Consider [logging on](#) and providing comment by **Wednesday, March 4!**



As always, we regularly update the [program website](#) with resources that might be useful to champions. Be sure to check out our website!

The AAP [Medical Home Chapter Champions Program on Asthma, Allergy and Anaphylaxis](#) staff provides this e-mail update to the Academy's Medical Home Chapter Champions, other interested AAP members, and staff. Unless explicitly stated, information included in this newsletter does not imply AAP endorsement. For additional information on medical home, visit the [AAP Medical Home Web site](#) and the [National Center for Medical Home Implementation Web site](#). All comments and inquiries can be sent to Nkem Chineme at nchineme@aap.org or 800/433-9016, ext 4342. If you would like to unsubscribe to the Champions E-Correspondence, contact Nkem Chineme.