



Springtime Allergies and Asthma

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The spring pollen season is upon us! Allergies can be disruptive for children, causing them to miss school and miss out on activities, but they don't have to be life-altering if properly managed. Allergies can also make asthma symptoms worse for people with allergic asthma.

Here's what you need to know about environmental allergies and asthma and how to handle them when they affect your child.



Scan here to see the
pollen count in NYC

Common symptoms of allergies:

- Itchy, watery, red swollen eyes
 - Scratchy throat
 - Sneezing
- Runny, itchy nose
 - Stuffy nose
 - Postnasal drip
- Flare-up of underlying eczema or hives

Common symptoms of asthma:

- Wheezing (whistling sound in chest when breathing in)
- Chest tightness or difficulty breathing
 - Shortness of breath
- Coughing, especially at night

Tips for Managing Springtime Allergies:

- Keep house and car windows closed
 - Run air conditioner
- Shower, wash hair and change clothes if outside for period of time
- Rinse pollen out of itchy eyes with chilled artificial tears prior to medicated drops
 - Consider a nasal rinse
 - Wear a face mask
- If your child has asthma triggered by allergens, be certain to manage allergy symptoms, carry your rescue albuterol inhaler, and if appropriate your child should remain on their daily controller inhaler
- For more moderate-severe cases of allergen triggered asthma, biologic asthma therapy may be indicated and should be discussed with an allergist or lung specialist
- If you suspect that your child might have asthma triggered by allergies, schedule an evaluation with an allergy/immunology specialist for allergy testing, discussion regarding allergy medication options, and/or immunotherapy or allergy shots

Home Energy Assistance Program (HEAP)

See if you qualify
for a free air
conditioner or fan!
Applications open
April 15, 2024-
August 31, 2024



Caring for a child with asthma: A parent perspective

Poopeh P., Komansky Family Advisory Council Member

As a mother of a child with asthma, we've been faced with numerous challenges through the past 6 years. Our son was diagnosed with reactive airway disease and later asthma when he was one year old. We were very surprised by how a simple respiratory virus (common cold) can spiral into wheezing and difficulty breathing in just a few hours and lead to a life threatening situation. Our son has been hospitalized on two separate occasions and one was spent in the ICU. It goes without saying that seeing a little one suffer and gasp for air will imprint in a mother's heart forever and the feeling of helplessness is overwhelming. If I were to select the most difficult aspect of asthma management for my son, I would have to say it is addressing the uncertainty and fear that accompanies such diagnosis.

To conquer such uncertainty and fear, we have learned several coping mechanisms:

1

Assembling the best medical team to address my son's needs. This requires early and often communication with the pulmonologist in devising a diagnostic strategy and treatment plan to keep the asthma under long term control by using long term medicines such as Flovent. Our medical team includes a pulmonologist, nurse practitioner and pediatrician.

2

Creation of an asthma action plan has been helpful for us. This individualized plan will have details that's pertinent to your child's needs and unique circumstances. This plan should be delivered to your child's school team and to the directors of any/ all after school activities. The plan should have the following;

- Emergency contact name and telephone number
- Health care team contact and telephone number
 - Medication names, dosing and frequency
 - Steps to take during an asthma episode
- Outline of when to seek emergency medical care

3

Self education, education of the child, and his immediate circle has been instrumental in keeping ahead of the uncertainty and fear. We are extremely proactive in his respiratory needs to ensure we are preventative and avoid acute situations.

Dupixent: One teen's journey to managing their asthma & allergies

Taylor P., age 16

Upon learning about Dupixent, a medication used in addition to my daily inhaler, that could alleviate my allergy and asthma symptoms, I was incredibly amazed. My hopes for the success of this medication were high, as the results and research I completed contained positive feedback. I was instructed to take Dupixent every two weeks to reduce lung inflammation and prevent allergy-induced flare-ups. Following my initial dose, I could feel the medication taking effect immediately. Within 48 hours, my breathing became significantly easier, and I no longer relied heavily on my rescue inhaler. Over time, my respiratory issues improved, allowing me to resume a normal teenage life. This treatment has significantly improved my daily routine, and I am grateful for the doctors who recommended it. I encourage all young individuals with asthma to consider this medication under professional supervision.



Asthma Champion Spotlight: Pediatric Pharmacy!

Our pediatric pharmacy team is an important part of the asthma team and they collaborate with providers to help teach patients about their medications. In the hospital, they make sure that medications are there for the nurses and doctors so that patients can get the care that they need.

Here are a few members of our pharmacy team (from left to right): Diana has practiced pharmacy in the west coast, midwest, and now east coast here at NYP. She enjoys running, exploring new restaurants, and spending time with family and friends. Laura has been a part of the pediatric pharmacy team for the past five years. Outside of NYP, she enjoys traveling, theater, and taking care of her two rambunctious Westies. Our last member, Jimmy, enjoys traveling the world when he's not home playing video games.

MEDucation Corner

Let's talk about Dupixent!

What is Dupixent?

It's part of a group of drugs known as monoclonal antibodies. A monoclonal antibody is a man-made protein that is able to help stop the body's overactive immune response.

What is it used for?

It can be used to treat asthma as well as other conditions.

How is it given?

Dupixent is given as an injection into the skin once a month or every other week depending on what it is being used for.

Let's talk about nasal sprays!

Why do I need a nasal spray?

It acts directly at the site where you need to help relieve congestion or runny nose.

How do I use a nasal spray?

- Blow your nose before using.
- Shake your spray bottle before using.
- You may need to spray into the air once or twice to make sure the medication is coming out.
- When spraying, make sure to spray away from the center of your nose (septum). It can help to hold the spray with the hand opposite the nostril you are spraying into.
- Make sure not to sniff while spraying as this can cause the drug to go into your throat. Breathe through your mouth, and wipe any excess medication that may drip.

Why do you need to spray away from the septum?

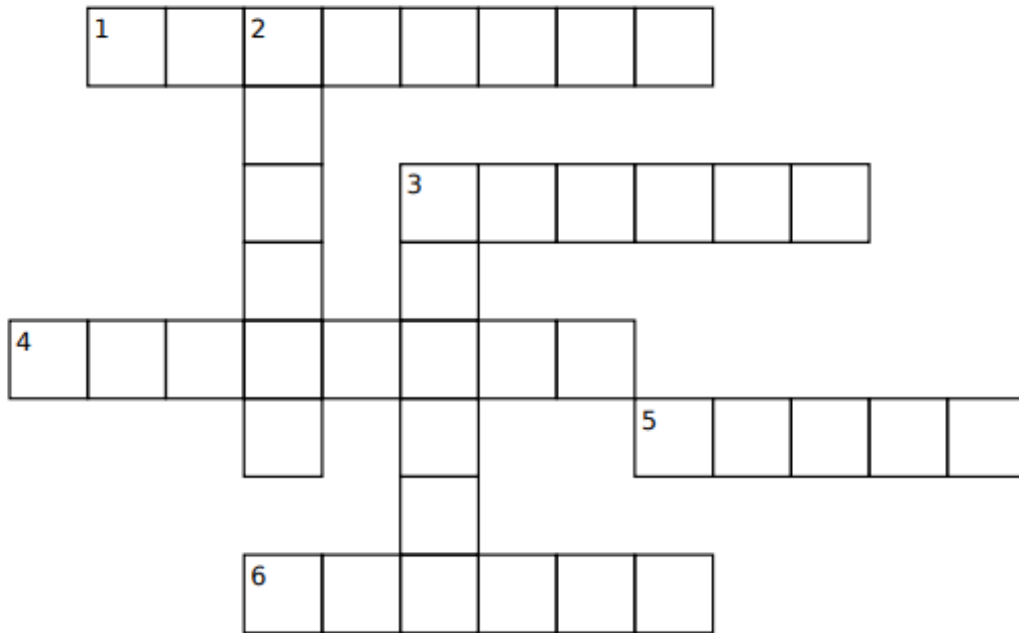
The nasal spray may cause irritation.

How much medication do I need?

The dose can change depending on the medication so always refer to the packaging for any specific dosing or use instructions. If you're unsure, always speak to your pharmacist or healthcare provider for help.



Crossword Puzzle



Down:

2. Made by plants when they bloom. Can be a trigger for asthma
3. A tool that holds the drug so you can breathe it in slowly

Across:

1. A monoclonal antibody used for allergies. Mentioned in this newsletter.
3. Something that happens when your nose is irritated. Involves air exiting the nose and or mouth.
4. Something that helps prevent allergens from entering your body
5. Something that helps clear your lungs
6. The season after winter

Word Bank

Dupixent Cough Face mask
Pollen Sneeze Spacer Spring

