

**HEALTHWIRE**

**MANAGING AND PREVENTING CHILDHOOD ASTHMA**

**PART 1**

By Monica Sanchez

The number of Americans with active asthma has grown by more than 60% in the last decade, but the disease is fast becoming an epidemic among Puerto Rican and African American children. Puerto Rican children are four times more likely to die of asthma than white children; and African American children are three times more likely to lose their lives to a severe asthma attack than white children (American Lung Association, 1990). Data on other minor-

ity children is currently unavailable. For parents to help their children live normal lives despite asthma, they must first understand and learn how to manage the disease.

"The first issue is diagnosis," asserts Dr. Richard Evans III, Head of the Division of Allergy of the department of Pediatrics at Children's Memorial Hospital in Chicago. "Sometimes a child has asthma but no diagnosis has been made. So, when the child becomes ill, he is not taken to the hospital as promptly as he should be."

"It is very common to have children hospitalized for severe attacks [of asthma] and have the parents tell you that the child has been coughing and coughing for weeks," says Dr. Dora Alvarez, Director of the Pediatric Pulmonary and Critical Care Clinic at St. Luke's-Roosevelt Hospital in New York. She advises parents to watch for early asthma symptoms and begin managing the child's condition to prevent a

severe attack.

Signs that a child may have asthma include a persistent dry cough, nighttime coughing that disturbs sleep, coughing or shortness of breath with physical activity and wheezing. If not dealt with promptly, an asthma attack can lead to hospitalization and even death.

Diagnosis is still only the beginning. According to Jean A. Hanson, R.N., M.N., Asthma

Educator at the University of New Mexico School of Medicine, many families tend to deal with asthma episodically, treating individual attacks symptomatically with over-the-counter medications and herbs.

Asthma is a chronic inflammatory disease that is characterized by a blockage of the bronchial airways. The blockage is usually caused by inflammation and mucus in the airways,

contracting of the muscles that surround the airways, or airway swelling. It's the blockage that makes breathing difficult at times for asthmatics.

"When I talk to parents, I tell them the management of these kids is not only coming to the emergency room every time they get an attack, but taking care of them to prevent attacks," says Dr. Alvarez.

TO BE CONTINUED

**HEALTH**

**TEN COMMUNITY LEADERS MAKE HEALTH SYSTEM WORK, RECEIVE \$100,000 AWARD TO FURTHER THEIR EFFORTS**

BOSTON, MA- Ten individuals who are reshaping the health care system at the community level by creating programs that work were recently honored by a new philanthropy program and were awarded \$100,000 to further their efforts.

The individuals, identified through a nationwide search, are the first to be recognized by the new Robert Wood Johnson Community Health Leadership Program. Established in 1992, the program will annually honor people who make health care more available to those who need it.

They are bringing primary care to the inner city, creating health centers for Indian reservations and minority communities, finding ways to meet the needs of the disabled, and extending new health care resources to persons with AIDS, substance abusers and older African-American women who are raising their grandchildren.

"These remarkable leaders are breaking ground to find creative ways to bring desperately needed health services to their communities," said Anna Faith Jones, president of the Boston Foundation and chairperson of the program's National Advisory Committee. "They don't talk about problems; they inspire action and empower others, and together they create solutions. They are a different type of power broker — who rechannel re-

sources and marshal support." She said the honorees display a rare combination of ingenuity, hard work, and personal commitment that has driven them to work for and with the people they serve to create health care programs that work.

From these examples, Jones said, we can see that effective community leaders are motivated and inspired by many different life experiences. "Some have post-graduate degrees and others have a high-school education. A few first experienced the gaps in our health system while battling personal illness or disabilities. Some have created new programs from scratch, while others have rechanneled or revitalized existing available resources.

"But one characteristic they have in common," Jones added, "is their ability to achieve success against odds that often seemed insurmountable."

Those honored include:

**Neil Calman, M.D.**, who is changing the face of medical care in some of New York City's toughest neighborhoods with a system of family practice training programs and health care delivery sites;

**Michael Cronim, M.S.**, who marshals every resource available to create for special groups of people with AIDS in Boston;

**Lorell DeCora, R.N.**, who built from scratch the country's (See *Com. Leaders*, Page 21)

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