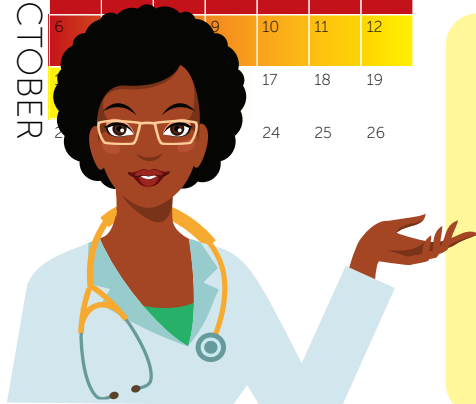


# How to AVOID the September Asthma Peak



Asthma flares requiring a hospital or ER visit start to spike in early-to-mid September and decline in mid-October.

3rd week of September = Peak week for asthma flares, hospitalizations and ER visits



## WHY DOES IT HAPPEN?

### A Perfect Storm of Triggers

- Return to school = exposure to multiple allergens (indoor mold, animal dander) and respiratory irritants (air pollutants from idling school buses)
- High levels of ragweed and mold allergens in outside air
- Easy to catch cold germs and viruses, including the flu
- Irregular medication use from summer months – when children don't follow their asthma medication schedule in summer, they're more at risk for asthma flares in September when they're exposed to more allergens and triggers
- Anxiety and stress associated with the new school year

## ASTHMA STATS

**25%**

of all children's asthma  
**HOSPITALIZATIONS**  
occur in September



**10.5**  
**MILLION**

school days missed  
annually due to asthma



**14.2**  
**MILLION**

work days missed  
annually due to asthma



## BE PROACTIVE AND PREVENTIVE

### 10 Steps

1. Schedule an asthma checkup with your child's doctor before the school year begins.
2. Make sure all asthma medications are refilled prior to start of school year.
3. Take long-acting asthma medications as prescribed by your child's doctor.
4. Keep or carry medications at school, particularly a quick-relief inhaler.
5. Keep a peak flow meter, a device that signals brewing lung problems.
6. Encourage frequent handwashing to reduce risk of catching a cold or a virus.
7. Identify and avoid environmental triggers; if pollen is a problem, talk with teachers about staying inside from outdoor activities.
8. Get the flu vaccine.
9. Follow the Asthma Action Plan and provide one to the school nurse.
10. Maintain good asthma control throughout the entire year, even if symptoms are well controlled during summer.



Sources: American College of Allergy, Asthma & Immunology; The Journal of Allergy and Clinical Immunology; National Jewish Health