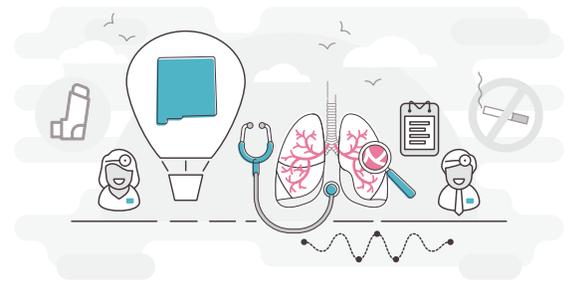


# Clearing the Air

## A Quarterly New Mexico Asthma Data Report



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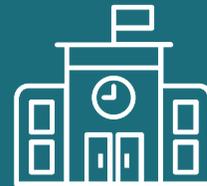
### ASTHMA SELF-MANAGEMENT IN NEW MEXICO

Asthma is a common chronic lung condition affecting people of all ages. It causes repeated episodes of wheezing, breathlessness, chest tightness, and nighttime or early morning coughing. About 1 in 12 New Mexicans suffer from asthma (8.4% of adults and 5.4% of children<sup>1</sup>), and many of whom struggle to manage their condition. Asthma self-management refers to the things someone can do for themselves to keep their asthma in control, have fewer asthma symptoms, and enjoy life. Asthma self-management includes:

- knowing asthma symptoms and keeping track of them;
- improving communication with healthcare providers;
- learning about asthma medicines and taking them correctly;
- following good health habits like quitting smoking, managing stress, and exercising to stay active; and
- knowing what to do when symptoms do occur by following an asthma action plan<sup>2</sup>.

This report summarizes reported asthma self-management among individuals with asthma in New Mexico (NM) and the United States (US).

### ISSUE HIGHLIGHTS



Over half of children with asthma report missing at least one day of school because of their asthma.



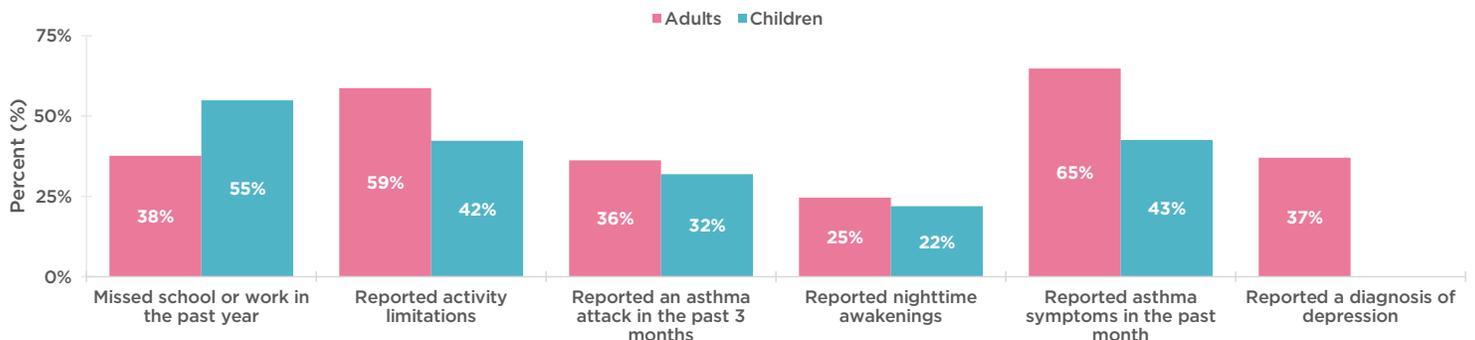
Compared to the US, NM healthcare providers are less likely to talk with their patients about modifying their environment to improve asthma control.



1 in 10 children and 1 in 6 adults say that cost is a barrier to buying asthma medication.

### ASTHMA SEVERITY IN NM

Among those with current asthma, many report various interruptions in their daily lives. High proportions report missing work or school, having activity limitations, and being diagnosed with depression. About 1 in 3 people with asthma report having an asthma attack in the past 3 months and about 1 in 4 have trouble sleeping.

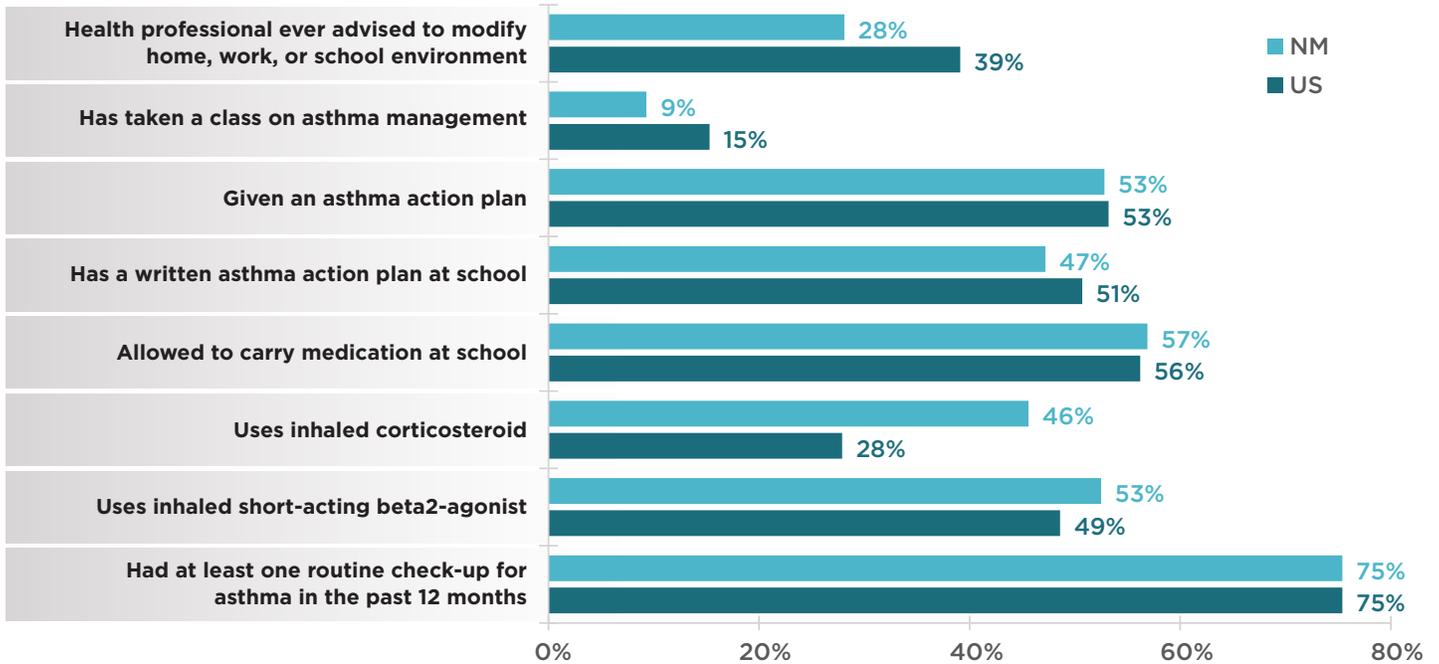


Among those with current asthma. Children data: 2015-2017 combined; Adult data: 2017.

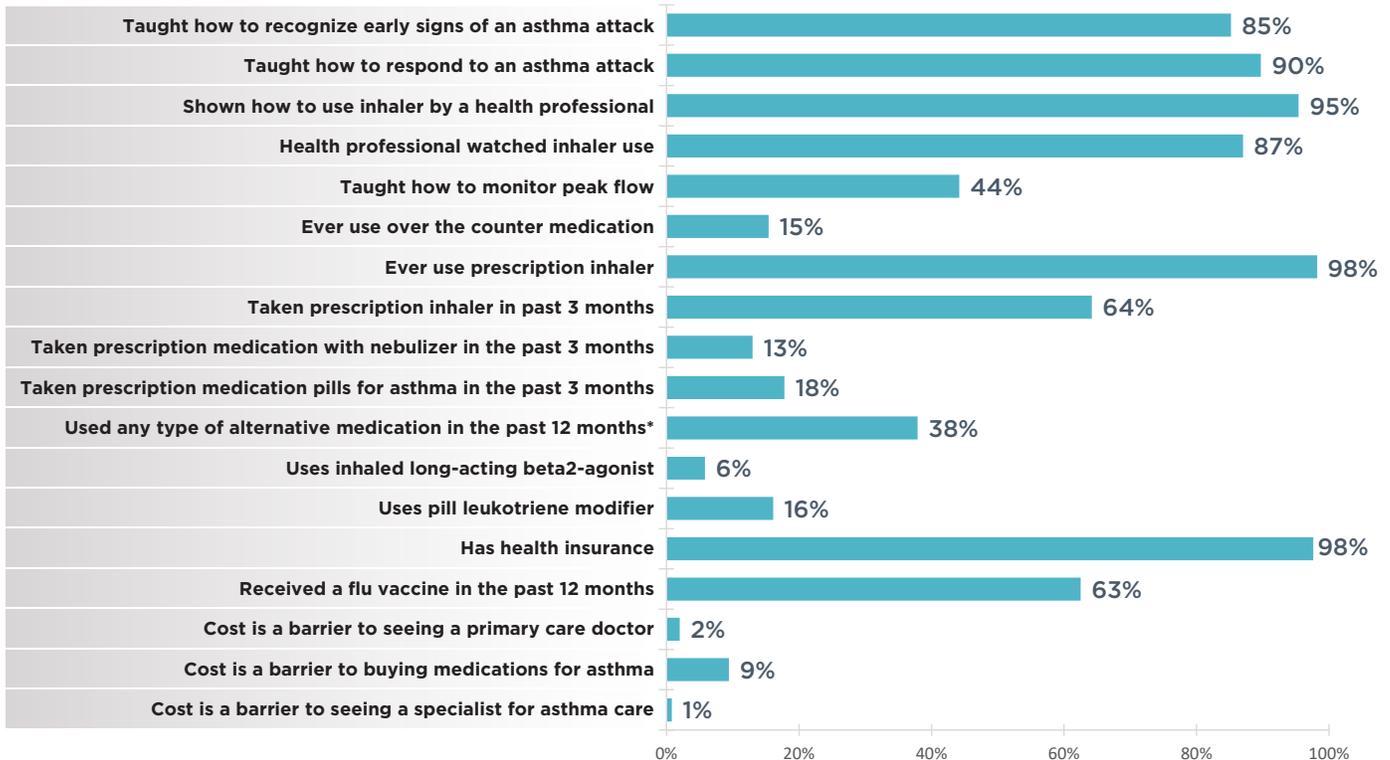
# ASTHMA SELF-MANAGEMENT AMONG NM CHILDREN

Reported asthma self-management is similar among NM children compared to the US. Children in NM are more likely to use inhaled corticosteroids and less likely to have talked with a health professional about modifying their home or school environment or to have taken a class on asthma self-management. Many NM children report talking with their healthcare provider about self-management skills, such as using an inhaler.

## NM CHILDREN COMPARED TO US CHILDREN



## NM CHILDREN ONLY



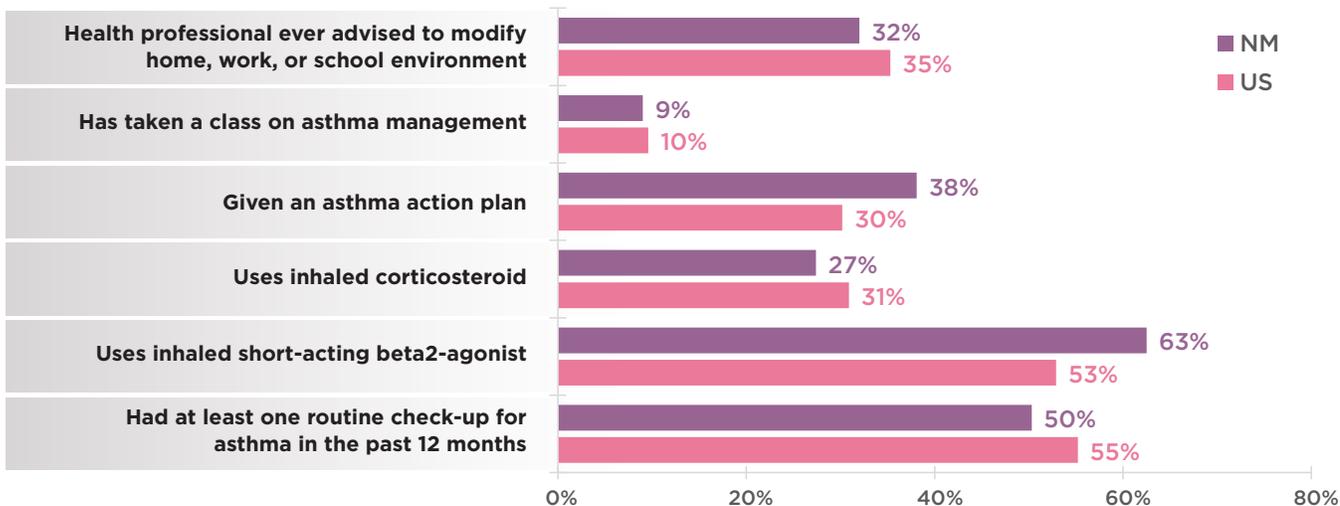
Among children with current asthma. NM data: 2015-2017 combined; US data: 2012-2014 combined (represents 26 states).

\*Alternative medications include: herbs, vitamins, acupuncture, acupressure, aromatherapy, homeopathy, reflexology, yoga, breathing, naturopathy.

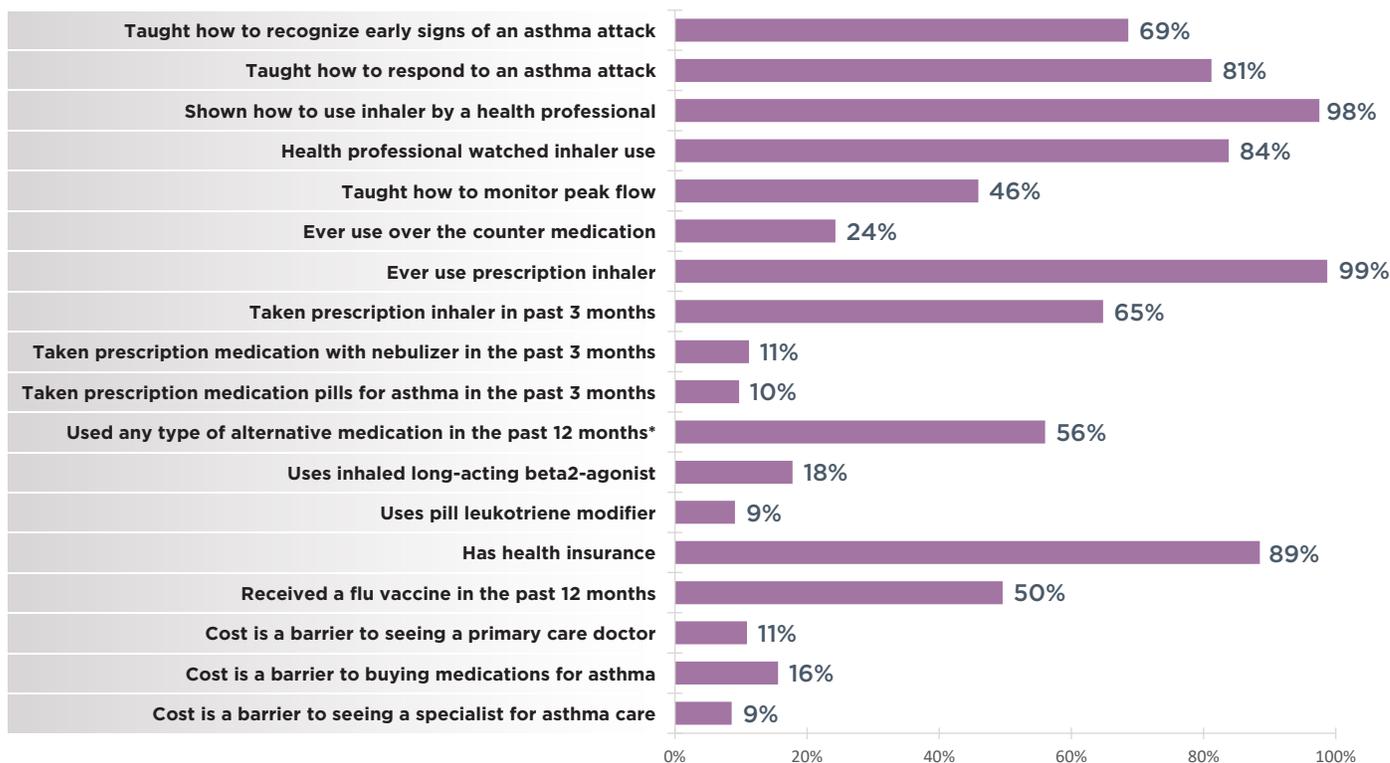
## ASTHMA SELF-MANAGEMENT AMONG NM ADULTS

Compared to the US, NM adults are more likely to be given an asthma action plan and use short-acting beta2-agonists, but are less likely to have a routine check-up for asthma in the past year. About 1 in 6 NM adults with asthma report that cost is a barrier to buying asthma medications.

### NM ADULTS COMPARED TO US ADULTS



### NM ADULTS ONLY



Among adults with current asthma. NM data: 2017; US data: 2017 (represents 32 states).

\*Alternative medications include: herbs, vitamins, acupuncture, acupressure, aromatherapy, homeopathy, reflexology, yoga, breathing, naturopathy.

# ASTHMA SELF-MANAGEMENT AMONG NM ADULTS AND CHILDREN

	Adults % (95% CI)	Children % (95% CI)
<b>Self-Management Skills &amp; Care</b>		
Taught how to recognize early signs of an asthma attack	68.6 (57.4-78.0)	85.2 (72.7-92.6)
Taught how to respond to an asthma attack	81.2 (72.7-87.5)	89.7 (77.7-95.6)
Shown how to use inhaler by a health professional	97.5 (94.7-98.9)	95.4 (83.5-98.9)
Health professional watched inhaler use	83.8 (75.0-89.9)	87.0 (74.8-93.8)
Taught how to monitor peak flow	45.9 (35.2-57.0)	44.2 (30.7-58.7)
Health professional ever advised to modify home, work, or school environment	32.0 (23-42.6)	28.1 (16.7-43.3)
Has taken a class on asthma management	9.0 (5.4-14.6)	9.3 (4.3-19.1)
Given an asthma action plan	38.1 (27.9-49.5)	52.8 (39.6-65.6)
Allowed to carry medication at school	n/a	56.9 (42.2-70.5)
Has a written asthma action plan at school	n/a	47.2 (34.7-60.1)
Had at least one routine check-up for asthma in the past 12 months	50.3 (39.5-61.0)	75.4 (64.2-84.0)
Received a flu vaccine in the past 12 months	49.6 (38.9-60.6)	62.5 (49.0-74.2)
Has health insurance	88.5 (77.7-94.4)	97.6 (92.4-99.3)
Cost is a barrier to seeing a primary care doctor	10.9 (5.3-21.0)	2.0 (0.3-13.1)
Cost is a barrier to seeing a specialist for asthma care	8.6 (4.2-16.7)	0.8 (0.1-6.0)
<b>Medication Use</b>		
Ever use prescription inhaler	98.7 (96.3-99.5)	98.2 (92.9-99.6)
Ever use over the counter medication	24.3 (15.9-35.4)	15.4 (6.9-31.2)
Uses inhaled short-acting beta2-agonist	62.5 (52.2-71.8)	52.5 (39.2-65.5)
Uses inhaled corticosteroid	27.4 (19.7-36.8)	45.6 (32.0-59.9)
Taken prescription inhaler in past 3 months	64.8 (54.4-74.0)	64.2 (50.0-76.2)
Uses pill leukotriene modifier	9.1 (4.7-16.9)	16.1 (7.3-31.8)
Uses inhaled long-acting beta2-agonist	17.8 (12.2-15.2)	5.8 (2.1-15.2)
Used any type of alternative medication in the past 12 months*	56.0 (45.0-66.5)	37.9 (25.1-52.8)
Taken prescription medication pills for asthma in the past 3 months	9.7 (5.2-17.4)	17.8 (8.7-33.2)
Taken prescription medication with nebulizer in the past 3 months	11.2 (6.3-19.1)	13.0 (7.9-20.6)
Cost is a barrier to buying medications for asthma	15.6 (9.9-23.8)	9.4 (2.6-28.6)

Among those with current asthma. Adult data: 2017; Children data: 2015-2017 combined.

95% CI: 95% confidence interval.

\*Alternative medications include: herbs, vitamins, acupuncture, acupressure, aromatherapy, homeopathy, reflexology, yoga, breathing, naturopathy.

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## DATA SOURCES & REFERENCES

*The New Mexico Department of Health Asthma Call-Back Survey:* This survey is an in-depth asthma survey conducted with Behavioral Risk Factor Surveillance System Survey respondents who report an asthma diagnosis.

Data and more information available from: <https://www.cdc.gov/brfss/acbs/>

1. New Mexico Department of Health. Behavioral Risk Factor Surveillance System. Available from: <https://ibis.health.state.nm.us/>

2. National Asthma Education Program. Expert Panel Report 3: Guidelines for the Diagnosis and Management of Asthma. Bethesda, MD: National Institutes of Health, National Heart, Lung, and Blood Institute; 2007. Available from: <http://www.nhlbi.nih.gov/guidelines/asthma/asthgdln.pdf>

## RESOURCES

Learn more about asthma self-management: Centers for Disease Control and Prevention: <https://www.cdc.gov/asthma>

National Heart, Lung, and Blood Institute: <https://www.nhlbi.nih.gov/health-topics/asthma>

American Lung Association Asthma Basics course: <https://www.lung.org/asthma-basics>

Explore more data: New Mexico Indicator-Based Information System: <https://ibis.health.state.nm.us/>

New Mexico Environmental Public Health Tracking Program: <https://www.nmtracking.org/>

