



National Conference of State Legislatures

LEGISBRIEF

BRIEFING PAPERS ON THE IMPORTANT ISSUES OF THE DAY

OCTOBER 2003

VOL. 11, No. 38

Asthma

By Doug Farquhar

Asthma affects more than 5 percent of the American population.

Asthma, a chronic disease that inflames the airways and lungs, causing shortness of breath, wheezing and—in extreme cases—death, affects more than 5 percent of the American population. Asthma cases have increased 74 percent since 1980.

An asthma attack can be terrifying. Airways constrict, making breathing similar to getting air through a tight straw. Cells in the lungs start producing more mucus, clogging up air tubes. The air tubes swell, making the muscles tighten. These changes then cause the air tubes to narrow even more, making breathing more difficult. In severe cases, asthmatics are unable to breathe at all. But in most cases, the attack causes shortness of breath and tightening of the chest, accompanied by coughing and spitting up mucus. Asthma is a chronic condition, and can be life-threatening. At this time it cannot be cured. With proper medical treatment, however, it can be controlled.

Asthma is a body's reaction to specific irritants and allergens.

Causes of Asthma. Asthma is a body's reaction to specific irritants and allergens, such as cigarette smoke, cockroach feces, dust mites and air pollution. Even very small amounts of these substances can spur an attack. Exercise, colds, food additives and stress can also precipitate an episode.

Medical science has not yet figured out why some people develop asthma and others do not. Although genetics increase the likelihood of developing asthma, most researchers believe that the interaction of environment with a genetic predisposition is important in its development. Genetics, it is said, loads the gun, but the environment pulls the trigger.

Societal changes could offer some explanation for the increase in cases. People spend more time indoors, increasing their exposure to certain allergens and indoor air pollutants, plus they exercise less. Certain pollutants in the air also exacerbate asthma. But more research is needed to determine its cause and cure.

Asthma attacks are the primary cause of emergency room visits.

Illness, Hospitalizations and Mortality. Hospital visits for asthma have increased to nearly 2 million per year, making it the primary cause of emergency room visits. A half million of these visits lead to hospitalization. More than 5,000 people die from the disease each year. A significant increase in asthma cases has occurred in poor areas—where medical care and follow-up are lacking—meaning that asthmatic symptoms are more likely to result in full-blown attacks that lead to costly trips to the emergency room.

State Actions

Thirty-four states have statutes relating to asthma, and California has the most comprehensive program. Many states address asthma administratively through their departments of health or as a health insurance concern. Permitting school children to carry asthma medications has been a

recent concern because it violates many states' drug-free school laws, causing 12 states to amend their laws to permit students to carry asthma medication to school.

Legislation in 2002:

Connecticut SB 162 requires managed care organizations to cover treatment and devices needed by asthmatics.

California SB 859 establishes a task force to develop a list of diseases eligible for management programs and services. The task force will pay specific attention to asthma.

Indiana Senate Bills 229 and 137 require the state health department to implement a disease management program for Medicaid recipients with asthma.

Illinois SB 552 requires the health department to develop a comprehensive statewide asthma management plan to reduce the rate of hospitalizations and help residents effectively manage the disease.

Hawaii Senate CR 79 requests the University of Hawaii School of Medicine to teach its students chelation therapy, which can help people reduce the risk of developing many chronic degenerative diseases such as asthma.

Kansas SB 29 requires children's insurance coverage for annual physical exams for asthma. Kansas HB 2661 allows an emergency medical technician to assist the patient with inhaler treatment for asthma.

Maryland HB 420 creates an asthma control program in the Department of Health and Mental Hygiene. This program includes a plan for prevention and control.

Maine HB 1495 establishes a program in the Bureau of Health to coordinate asthma prevention and intervention activities, including monitoring prevalence; training health professionals on the current methods of diagnosing and treating asthma; educating patients and families; providing information on programs shown to reduce hospitalizations, ER visits and absenteeism due to asthma; and supporting community prevention. In addition, the program staff will consult with statewide organizations formed for treatment and prevention of asthma.

Maine SB 471 allows Medicaid reimbursement for certain drugs, including asthma medications, without requiring prior authorizations.

Missouri Senate Bill 82 Addresses plans including clinical criteria for effective and cost-effective disease management programs for asthma.

Contacts for More Information

Doug Farquhar, Glen Andersen, Carla Curran
NCSL—Denver
(303) 364-7700 ext. 1397, 1341, 1373
doug.farquhar@ncsl.org
glen.andersen@ncsl.org
carla.curran@ncsl.org

Dr. Leslie Boss
National Center for Environmental Health, CDC
(404) 498-1002

Thirty-four states have statutes relating to asthma.