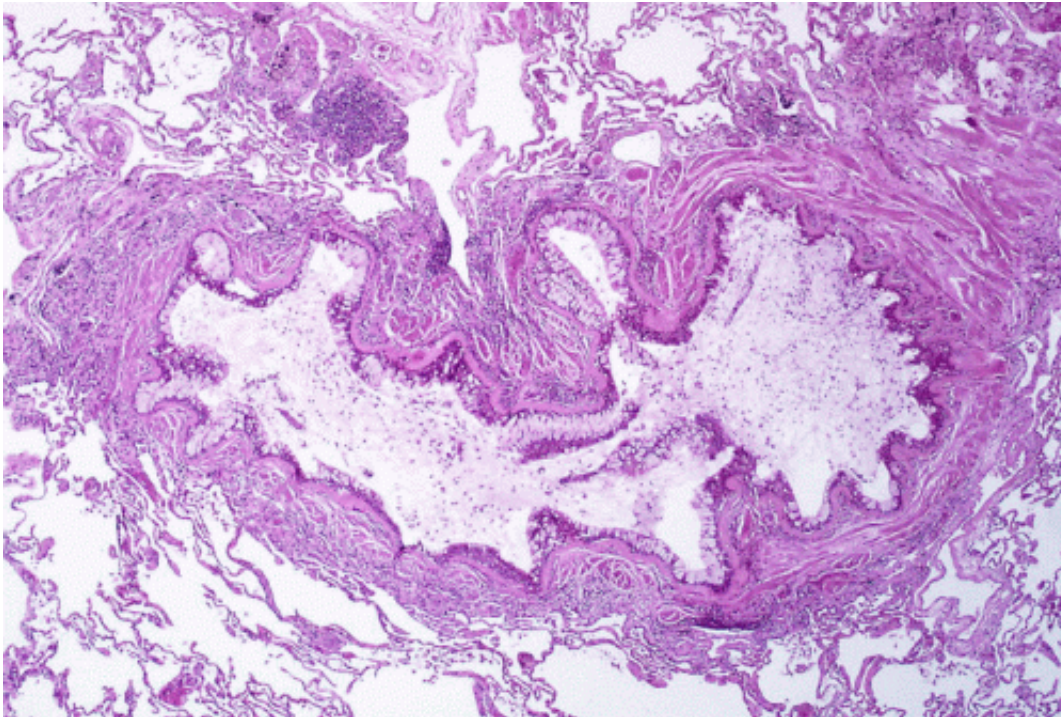


Detroit's longtime problem with asthma is getting much worse

April 8 2022, by Carol Thompson



Obstruction of the lumen of a bronchiole by mucoid exudate, goblet cell metaplasia, and epithelial basement membrane thickening in a person with asthma. Credit: Yale Rosen/Wikipedia/CC BY-SA 2.0

Shelia Bernard remembers the way asthma made her daughter wheeze, how a cold would turn so bad she'd have to take her to the hospital for breathing treatments.

Bernard has worked in [child care](#) for a decade and has learned that lots of children experience the same symptoms.

"A lot of kids now, they do have asthma," said Bernard of Detroit. "They have respiratory problems. And a lot of people think it's not that serious, but asthma can get real serious. People, kids and adults, are dying from it."

Asthma is far more common in Detroit than the rest of the state. For decades, city residents have been more likely to be diagnosed with, hospitalized or killed by the disease.

While health officials have chipped away at the problem for decades, the latest state report on asthma in Detroit shows the disparities have grown in the last five years.

In 2016, asthma was more prevalent among Detroit adults at 15.5% compared with Michigan's 11%. Last year, 16.2% of Detroit adults had asthma, while the proportion statewide remained almost the same at 11.1%, making the disease 46% higher in the city than the rest of the state.

For the first time, a Michigan Department of Health and Human Services report released in February uncovered a significant difference in the prevalence of asthma among Detroit children—14.6% of whom have been diagnosed with the disease—than the rest of the state, where 8.4% of children have been diagnosed.

Those changes were driven by increasing rates in Detroit, not decreasing rates statewide, said Beth Anderson, the state health department's chronic disease and epidemiology manager.

Hamtramck and Highland Park asthma patients are included in the state's

figures about Detroit's asthma hospitalizations, but not mortality, state health department spokeswoman Lynn Sutfin said.

The state health department first received a federal grant to tackle asthma through the public health system in 1998 and has used it to launch education campaigns for [health care providers](#), monitor asthma in the city and create a program for groups to collaborate on projects to help families cope with the disease.

State [health officials](#) said they don't know why asthma remains as much a problem decades later, Sutfin said. A lot of factors contribute to asthma diagnoses and attacks, including poor disease management, smoking and secondhand smoke, poor indoor and outdoor air quality, lack of medical care access and doctors who don't follow national asthma guidelines, Sutfin said.

Rhonda Anderson, a southwest Detroit resident and the Sierra Club's Michigan environmental justice organizer, sees the stalled progress firsthand.

When Anderson took her 3-year-old grandson to the [emergency room](#) for his first asthma episode, she saw the same scene she witnessed decades ago when she took her daughter, now 30, in for the same issue: an emergency department jammed with children struggling to breathe.

Health officials know what contributes to asthma and have laid out strategies to help prevent it. They also keep close track of Detroit's disproportionate share of asthma cases, hospitalizations and deaths.

"What frustrates me, irritates me and can make me angry, is that it seems as if nobody is doing anything about it," Anderson said.

Though it's a relatively common disease, asthma can be dangerous, said

Dr. Edward Zoratti, Detroit-based Henry Ford Health System's head of the allergy and immunology division.

Symptoms of asthma range from mild wheezing, chest tightness or coughing to severe or even deadly attacks. Sometimes severe asthma attacks develop quickly.

"Within a period of hours, they go from doing fine until they pass out and then they have an arrest because their oxygen level got so low," Zoratti said. "The risk is always there, which causes a lot of fear."

Detroit is the 15th worst metropolitan area for asthma in the United States, according to the Asthma and Allergy Foundation of America's 2021 report.

Asthma killed 71 Detroit residents from 2017-19, about one person out of every 31,847, according to the state's recent report. That's three times worse than Michigan, where one out of every 104,167 died of asthma in those years.

The asthma hospitalization rate for the city's Black residents was more than three times higher than its White residents.

The state health department could not compare 2016 asthma hospitalization rates and Medicaid data with information collected in 2021 because the World Health Organization changed the way hospitals track the disease.

The Michigan health department uses information from death files, the Michigan Health and Hospital Association's database of hospitalizations, the census and other state health data. It did not include visits to urgent care.

Many of the things experts say cause someone to develop asthma and worsen asthma attacks—such as the inability to get to regular doctor appointments, exposure to air pollution, exposure to allergens like mold, dust and pests in old houses and genetics—are largely outside a person's control.

And Detroiters routinely encounter them.

A 2019 University of Michigan report found that while a majority of city residents have insurance, nearly 10% said they are unable to afford co-payments and a third said they can't access some form of desired health care. Many of them relied on emergency departments for care, the report said.

As of 2020, about 57% of Detroit's housing units were built before 1950, according to another UM report issued that year. The report specifically links old homes to asthma.

And parts of Wayne County, including southwest Detroit and south to Brownstown Township, have dangerous levels of sulfur dioxide, a pollutant that comes from aging diesel engines and manufacturing and industrial facilities that burn fossil fuels. Sulfur dioxide can cause respiratory issues and asthma flareups, according to the U.S. Environmental Protection Agency.

Southeast Michigan also has historically had unsafe levels of ozone, an air pollutant that also triggers asthma attacks. The EPA and state of Michigan say ozone levels have declined in recent years and plan to move the area out of federal noncompliance.

Although her daughter is 31 and doesn't experience asthma the way she did as a child, Bernard wanted to learn the latest about asthma prevention. She participated in an asthma education program called

Little Lungs taught by Angela Piccirilli, an asthma educator for Kids Health Connections, a Detroit-based nonprofit that helps connect Medicaid families with health care.

Piccirilli works with child care providers through the Little Lungs program and with families through the Managing Asthma Through Case-management in Homes, or MATCH program.

She teaches strategies they could use to prevent asthma flare-ups, like avoiding strongly scented cleaning products, and teaches them to recognize asthma attacks. She also brings them items like furnace filters or vacuums that can trap asthma triggers like dust and joins families during doctor visits and helps coordinate with schools.

Bernard knew things like dog hair and dust could worsen asthma symptoms but said she was surprised to learn strongly scented cleaning products could, too.

"Different cleaning products will trigger asthma attacks," she said, "like bleach, aerosol sprays, incense."

But other things that cause asthma, such as air pollution, aren't something a parent or child care provider can fix. That's where groups like Southwest Detroit Environmental Vision come in.

Since 2008, SDEV has been helping diesel fleet operators upgrade their engines to more efficient models or retrofit their exhaust systems to reduce pollution. In the program's first nine years, it reduced those vehicles' emissions by almost 5,000 tons per year, limiting the nitric oxide, particulate matter, hydrocarbons, carbon monoxide and carbon dioxide that releases into the nearby air.

The group also pushes regulators to take stronger action to protect

communities from air pollution. It runs outreach campaigns and plants trees to catch particulate matter in the air before it reaches people's lungs.

"It's not appropriate that certain members of society have shorter lifespans, experience pre-term birth rates that are higher than other areas, (where) asthma rates are higher," said Maggie Striz Calnin, SDEV Healthy Air Program manager. "That's not something I can say personally I am comfortable with in our society. We need to be addressing environmental injustices."

Quality and accessible primary health care is key to preventing severe asthma, said Henry Ford Health System's Zoratti. But for patients with inadequate health insurance, budget-breaking medicine, long work schedules and no vehicle, primary care can be hard to get.

Many primary care doctors, as well as asthma clinics, are clustered in downtown Detroit or the surrounding suburbs, not Detroit neighborhoods, said Kathleen Felice Slonager, executive director of the Asthma and Allergy Foundation of America Michigan chapter.

"Not having access to an asthma doctor is a big problem in Detroit," she said. "It's very different in the suburbs. There's an asthma doctor on every corner in the suburbs."

Detroit children with persistent asthma who are covered by Medicaid insurance plans were more than 50% more likely to rely on the [emergency department](#) for asthma care, the state's recent asthma report states.

But asthma treatments given in an emergency room are different than those given by family doctors, who could give patients medicine they can take regularly to prevent attacks.

"It's usually your long-term doctor, whether that's a primary care doctor or maybe an asthma specialist, to (help you) prevent these attacks," Zoratti said. "The main thrust in the emergency room is 'Let's get these people well so they can leave the emergency room.' They take care of the emergency part but there's less emphasis on the long-term care of the patient."

Dolores Perales, Southwest Detroit Environmental Vision's environment and community sustainability specialist, understands why asthma patients might avoid the doctor. She still avoids the doctor because it is expensive, just as she did when she was a child without insurance coverage.

Perales said the state's Detroit report likely is missing some people with asthma who go to urgent cares for medical treatment or avoid the health care system because they are undocumented.

Perales, 24, realized she had developed [asthma](#) when she was 8. She had always had trouble breathing, but the attacks started when she started to play sports. They gave her the medication she still relies on.

But she made a discovery about that medication when she moved to East Lansing, where she attended Michigan State University—she didn't need it as often as she did at home in Detroit.

"It really made me sit down with myself and realize the environment I live in is directly linked to my quality of life and [health](#)," said Perales, who is pursuing a master's degree at the University of Michigan. "In the natural environment that I was put in, the campus at Michigan State, which is very green and very natural, I didn't have to rely on that inhaler as much as when I would come home."

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