Asthma prevalence is at all-time high in the United States, with an annual cost to society of \$56 billion, yet studies show that the majority of patients receive substandard and needlessly costly care.

Asthma in America

Prevalence is at an all-time high (8.4 percent)

Affects 26 million people, including 7 million children

Costs \$56 billion/year

More than 15.3 million physician office and hospital outpatient department visits

1.75 million emergency department (ED) visits

Almost a half million hospitalizations, including 157,000 for children 17 and under

14.2 million lost work days

10.5 million lost school days

Sources: Centers for Disease Control and Prevention, National Institutes of Health

How Allergists Achieve High-Quality, Cost-Effective Outcomes

As more is learned about asthma, researchers are discovering that the disease is far more complex than previously thought, with new data from genomics, epidemiology, in vitro studies and other research that is leading to new asthma management strategies. Asthma consists of several subtypes, such as allergic asthma, exercise-induced asthma, asthma related to bacterial or fungal infections and asthma in the elderly. Each type can have different symptoms or triggers, and each requires a different approach to diagnosis and treatment. Allergists are qualified to ensure that patients have access to the latest strategies to keep their asthma controlled, and have the training and clinical experience to deal effectively with factors such as the relationship between environmental pollutants and

Allergists:

- Promote asthma self-management skills to assist people in eliminating or decreasing exposure to asthma "triggers."
- Are more likely than generalists to provide authoritative information to health care providers, families and other caregivers.

allergens, as well as the mechanisms of allergic reactions.

- Are specialists at immunotherapy that can reduce sensitivity to the allergens that trigger asthma attacks, and significantly reduce the severity of the disease [or prevent the development of asthma in some children with seasonal allergies.
- Understand that each patient with asthma is unique and requires a treatment plan tailored to individual needs.
- Form a partnership with patients to ensure proper use of long-term controller medications, avoid over-reliance on quick-relief medications and prevent the hospitalizations, emergency room visits, days lost from work or school and other debilitating and expensive outcomes associated with poorly controlled asthma.







Costs Are Highest When Asthma is Uncontrolled



Source: Sullivan, et al. Allergy 2007

Controlled Asthma Means:

No or few asthma symptoms, even at night or after exercise

Prevention of all or most asthma attacks

Participation in all activities, including exercise

No emergency room visits or hospital stays

Less need for quick-relief medicines

No or few side effects from asthma medicines

Allergists Have the Specialty Training, Knowledge and Experience to:

- Accurately diagnose the disease, its types, subtypes and severity
- Identify the role of external factors, including allergens that can trigger an asthma attack, and advise patients on how to avoid their asthma triggers
- Administer immunotherapy to reduce sensitivity to allergy triggers
- Use current best practice standards to develop and implement appropriate treatment plans that focus on asthma control
- Maintain disease control through a multi-faceted approach that includes prevention, appropriate use of medications and other interventions to prevent symptoms, and promote ongoing patient education and self-care strategies
- Prevent serious consequences of asthma



Excerpted from Asthma Management and the Allergist: Better Outcomes at Lower Cost.

©2015 The American College of Allergy, Asthma and Immunology. The complete report with supporting documentation is available at college.acaai.org/betteroutcomeslowercost