

# Allergy & Asthma Adventures

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## ASTHMA and LIFESTYLE

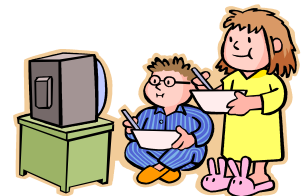
Asthma rates have increased worldwide, especially in industrialized countries. Researchers believe that our lifestyle may play a role in the increase in asthma and allergies. Recent asthma research is looking at how some lifestyle choices may affect the development or control of asthma. Here are some interesting facts from the latest research.

### DID YOU KNOW?

**Stress and Asthma:** Long term stress such as poverty, racism, violence, worry or severe depression in a family or a community can increase the risk of developing asthma in children and can increase the severity and frequency of asthma attacks.

These factors also affect a person's ability to purchase and use medications as prescribed and avoid triggers which further worsens the risk of asthma attacks. Short term stress does not seem to cause the same increased risk of asthma. It's important to find ways to minimize and manage stress in our lives as it affects both our emotional health and our physical health.

**Screen Time and Asthma:** Research has shown an association with the amount of time spent in front of a screen and asthma. Children with higher rates of screen time - be it television, computers, video games or cell phones - were nearly twice as likely to have asthma at 8 to 10 years of age or to have asthma between 12 to 13 years of age. Parents are encouraged to put a limit on their children's "screen play" starting at a very young age.



**Exercise:** Is winter time a good time to hibernate? The answer is NO! Researchers suspect that a lack of exercise is contributing to the development and severity of asthma. Low physical activity plays a big role in excess weight and may increase airway inflammation as well as airway reactivity (how easily the muscles tighten around the airways). Increased exercise may be as important as decreasing exposure to triggers and regular use of medication. Regular physical activity does not have to involve visits to the gym. Activities such as walking to school, shoveling snow and playing outside may, in fact, be more effective than the gym in managing weight and decreasing stress, and is more likely to become a part of a child's life long-term. So grab a scarf, mitts and hat and get out there and play, play, play!

**Obesity:** The link between asthma and obesity has been shown in many studies. Obesity causes chronic inflammation throughout the body, including the lungs. Asthma is caused by inflammation in the lungs. Some research suggests that obesity also decreases the effectiveness of asthma Controller medication. A healthy lifestyle and diet are important in maintaining a healthy weight.

**Diet:** Some of the increase in asthma and allergies may also have to do with our diet. Diets rich in saturated fatty foods and low in fruits and vegetables may promote inflammation. Diets rich in fresh vegetables and fruit are thought to reduce inflammation and decrease the incidence of obesity. It is therefore important to provide our children with fresh, unprocessed foods daily and save “take-out” foods for special occasions.

**Milk, weight, and asthma:** The increase in allergy and asthma is believed to be related in part to changes in our North American diet. Studies are showing that children (especially teen girls) drink 36% less milk than they did 20 years ago and children who drink less milk are more likely to be overweight. Girls who drank little milk **and** were overweight were more likely to have asthma. (This was not seen in boys). So girls, don't forget your milk!

Although taking medication and decreasing asthma triggers remains very important in keeping asthma under control, our lifestyle choices also play a very important role in asthma management. Researchers are increasing their understanding of the importance of staying active and eating a healthy diet. So throw away the pop and chips and turn off those screens, grab an apple and go play in the snow! Tell your friends the doctor prescribed it!



## **Need more resources on Asthma and Food Allergies?**

The Winnipeg Children's Hospital Family Information Library has resources for families managing asthma and food allergy.

They have books for parents on both asthma and food allergy as well as books for younger children and older children.

DVDs, CDs and Cookbooks with recipes that are milk-free, egg-free and peanut/nut free are also available. You are able to order books or materials free of charge that will be delivered to you with a postage-paid return envelope.

To contact the library phone [\(204\)-787-1012](tel:204-787-1012) or email [erobin@hsc.mb.ca](mailto:erobin@hsc.mb.ca)

The Library is located at CH201 - Children' Hospital, 840 Sherbrook Street, Winnipeg.



## What is Food “Sensitivity” Testing and What Does It Mean?

The epidemic of allergic disease over the past 30 years has increased with the biggest increase seen in food allergy. Up to 8% of children are allergic to common foods such as milk, egg and peanuts and are at risk for life threatening reactions. A life threatening food allergy reaction happens when the immune system has decided for some reason a food (e.g. peanut) is harmful. The body will make allergic antibodies against the peanut allergen. Eating that food again can trigger a severe reaction.

To diagnose a food allergy, an Allergist must first take a good history. This means asking questions about any reactions, symptoms of reactions, timing of reactions and which food is suspected in causing the reaction. Allergists use skin prick tests, as well as an IgE specific blood test that measures the level of specific antibodies to the allergen (e.g. peanut). These tests can help support the diagnosis of food allergy.

There are now some pharmacies and alternative health care practitioners in Canada that offer testing for food “sensitivities”. It is important that families understand that food “sensitivities” and life threatening food allergies are **not** the same. These food “sensitivity” tests check for food specific antibodies called IgG (immunoglobulin G). We all produce these IgG antibodies to things we eat or things we are exposed to such as viruses and bacteria. IgG has no relation to allergy and only tells us that you were exposed and your body produced these “protective” antibodies. It is not helpful to have IgG testing to foods and it does no good to avoid these foods. In some cases, it can mean you are avoiding important nutritional food for no reason. These IgG based tests can be very expensive.

While Celiac disease (Gluten intolerance) has increased, the proper tests for these problems are a measure of antibodies called immunoglobulin A (IgA). The tests offered for food “sensitivity” do not diagnose Gluten (cereal/grains) intolerance. If you are concerned about food allergy see a Certified Allergist for the correct diagnosis and management.

“The Canadian Society of Allergy and Clinical Immunology does not support the decision of licensed physicians and our pharmacist colleagues to offer such testing, given the overwhelming consensus against the validity of such tests”.

<http://www.aacijournal.com/content/8/1/12>

## CALLING TEENS with FOOD ALLERGY

Hear from other teens with food allergies and help us to evaluate this new program @ the CAAEC.

Thursday

**Feb. 26<sup>th</sup>**

6:30 pm -8:30 pm

Thursday

**April 30<sup>th</sup>**

6:30 pm-8:30 pm



Enter for a chance to win a \$50 movie pass!

Call **204-787-4116** or email [caec@hsc.mb.ca](mailto:caec@hsc.mb.ca) to enroll.

Funding for development of this pilot program was provided by the Children’s Hospital Foundation of Manitoba



**FREE**

## Upcoming Food Allergy Education Sessions

*Call early registration is limited!*



### Winter-Spring 2015

<p><b>Food Allergy (7yrs and under)</b> <b>Parents Only</b></p> <ul style="list-style-type: none"> <li>○ Saturdays, <b>January</b> 17<sup>th</sup> &amp; 24<sup>th</sup></li> <li>➤ Tuesdays, <b>February</b> 3<sup>rd</sup> &amp; 10<sup>th</sup></li> <li>○ Saturdays, <b>February</b> 21<sup>st</sup> &amp; 28<sup>th</sup></li> <li>➤ Wednesdays, <b>March</b> 11<sup>th</sup> &amp; 18<sup>th</sup></li> <li>○ Saturdays, <b>April</b> 11<sup>th</sup> &amp; 18<sup>th</sup></li> <li>➤ Tuesdays, <b>April</b> 21<sup>st</sup> &amp; 28<sup>th</sup></li> <li>➤ Mondays, <b>June</b> 1<sup>st</sup> &amp; 8<sup>th</sup></li> </ul>	<p><u>Age of child:</u></p> <p>7 years and under</p>	<ul style="list-style-type: none"> <li>○ Saturday sessions run from 10:00 am to 11:30 am</li> <li>➤ Weekday evening sessions run from 7:00 pm to 8:30 pm</li> </ul>
<p><b>Food Allergy School age classes</b> <b>Parents and children</b></p> <p>Saturdays, <b>March</b> 7<sup>th</sup> &amp; 14<sup>th</sup></p> <p>Saturdays, <b>May</b> 2<sup>nd</sup> &amp; 9<sup>th</sup></p>	<p>7 - 11 years</p>	<p>Saturdays 10:00 am to 12:00 pm</p>

**FREE**

## Upcoming Asthma Education Sessions

*Call early as registration is limited!*



### Winter /Spring 2015

<p><b>Asthma Under 7yrs</b> <b>Parents only</b></p> <ul style="list-style-type: none"> <li>➤ Thursdays, <b>February</b> 12<sup>th</sup> &amp; 19<sup>th</sup></li> <li>➤ Mondays, <b>April</b> 13<sup>th</sup> &amp; 20<sup>th</sup></li> <li>○ Saturdays, <b>May</b> 30<sup>th</sup> &amp; June 6<sup>th</sup></li> </ul>	<p><u>Age of child</u></p> <p>7 years and under</p>	<ul style="list-style-type: none"> <li>➤ 7:00 pm to 8:30pm</li> <li>○ 10:00 am to 11:30am</li> </ul>
<p><b>Asthma School age Session</b> <b>Parents and children</b></p> <p>Thursdays, <b>March</b> 19<sup>th</sup> &amp; 26<sup>th</sup></p>	<p>7 - 11 years</p>	<p>7:00 pm to 8:30 pm</p>
<p><b>Asthma Teen Sessions</b> Wednesdays, <b>April</b> 15<sup>th</sup> &amp; 22<sup>nd</sup> <b>* for Teens only</b></p>	<p>12 yrs - 16 yrs <b>(Can bring a friend)</b></p>	<p>6:30 pm to 8:30 pm</p>