

World Asthma Day 2021 ^[1]

Publish Date: 05 May 2021 00:30 CEST



Today is World Asthma Day, when people across the asthma community come together to raise awareness of the challenges being faced by millions of people living with asthma, their

families, friends and caregivers. Asthma is a common condition, affecting approximately 358 million people worldwide, and causing a major health and financial toll^{1,2,3}. This year's World Asthma Day theme is both important and timely, calling on the asthma community to uncover asthma misconceptions by combatting misinformation and sharing lesser-known facts about asthma.

Since its founding in 1998, World Asthma Day has taken place each May, organized by the Global Initiative for Asthma (GINA), an international advocacy group working tirelessly to support people with asthma. As it represents a central milestone in the asthma community calendar, we are marking the day by calling out and exploring some key myths and misconceptions about asthma.

So, what are your asthma misconceptions? As it's hard to know what you don't know, we've picked out three key topics related to asthma where misconceptions are prevalent:

Myth: All asthma is the same

Asthma is not a 'one size fits all' disease. When you think about it, it's not surprising that a disease that affects more than 1/3 of a billion people worldwide¹ manifests in different ways for different people, but it is frequently mischaracterized.

Asthma has many different causes, and can present differently in each person it affects. For many people with asthma, their condition is caused by allergens such as dust, pet dander and pollen⁴. For others, non-allergic triggers can be the cause, like smoke, cold weather or exercise⁵. Symptoms can happen all year-round (chronic) or be seasonal⁶.

As with many diseases, asthma symptoms are mild for some people and severe for others, although asthma attacks may be dangerous even for someone with an apparently mild disease⁷. Some people may not even realize their symptoms are caused by asthma.

However, severity and different triggers are not the only reasons for differences in asthma. For women with asthma, symptoms may be more or less frequent depending on the phase of their menstrual cycle⁸. Quality of life and outcomes also differ between men and women with asthma⁹.

So what does this mean? Having uncovered this misconception what can we do about it? The main takeaway here is that each person with asthma needs to work with their healthcare professionals to find an approach that fits their personal disease and experience¹⁰, which may include a referral to a specialist (pulmonologist or allergist). Understanding and fully testing for all of these different types and manifestations of asthma is very important in order to achieve the best possible treatment and management¹¹.

Myth: Asthma has nothing to do with climate change and the environment

People with asthma are particularly vulnerable to the impacts of air pollution and climate change. Although the ongoing climate emergency is important to everyone, air pollution and climate change may have a particular impact on people with asthma¹².

We know that environmental concerns are important to an increasing number of people¹³, and carbon footprint may become one of multiple relevant factors in inhaler preference for a

number of asthma patients¹⁴. Inhalers account for around 3% of the carbon footprint of the UK's National Health Service (NHS), the same as around half of their entire food and catering footprint¹⁵. Most of these inhaler emissions come from the propellants used in certain inhaler types known as pressurized Metered Dose Inhalers (pMDIs)¹⁶. However, not all inhalers have the same carbon footprint. Dry powder inhalers (DPIs) are another inhaler category and typically have a low carbon footprint compared with pMDIs as they do not need a propellant to function¹⁶.

Myth: Asthma attacks are normal

Asthma attacks and frequent symptoms are not normal. Because asthma is a common disease, it may be easy to underestimate its severity: people experiencing frequent symptoms who often need their reliever medication are considered to have 'uncontrolled' asthma, and are at risk of worsening symptoms, hospital visits, and even death¹⁷. As many as 60% of people with asthma do not have full control of their symptoms¹⁸, for varying reasons. Some patients, particularly teenagers, report feeling embarrassed about taking their medication in front of their peers¹⁹. Other studies have suggested that asthma control may be more difficult to maintain if patients have a complicated treatment regime with multiple inhalers, or find their inhaler difficult to use and have not received proper training^{20,21}. For a lot of people, they just don't realize that frequently experiencing symptoms is not normal²².

Whatever the reason may be, uncontrolled asthma is a major problem. If you have asthma and regularly experience symptoms, talk to your doctor about why this could be in order to find new management approaches together.

Our work in asthma research spans over 30 years, and we continue to strive each day to reimagine medicine and solutions to support asthma care. We recognize the importance of engaging with and supporting the asthma community to help patients learn about their asthma and how to control it. Education and health literacy are key tools to help better manage asthma, and represent an important shared goal across the asthma community. This World Asthma Day we invite you to join us in challenging assumptions and misconceptions. What were you surprised to learn about asthma?

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