



Got Mold?

There are many types of molds. Molds will not grow without water or moisture. They can be found indoors and outdoors. Mold spores are very tiny and lightweight which makes it easy for them to travel through the air.

Mold can cause health problems for all people. It is important to stay away from mold if you have asthma. It could trigger an asthma attack.

Mold can cause:

- Coughing
- Wheezing
- Throat, eye, and skin problems
- Breathing problems for people who have asthma

You can prevent and manage indoor mold growth by controlling indoor moisture. The basic rule is if you can see or smell mold, then take steps to remove the mold from your home and get rid of the excess moisture.

How to remove mold:

1. Find the source of the moisture and fix it
2. Wear mask, gloves and goggles while removing mold
3. Open windows and doors for fresh air before you start to clean up
4. Scrub mold off hard surfaces with hot soapy water
5. Allow to dry
6. Rinse with clean water and dry quickly
7. Bag and get rid of any items that have mold on them such as rags, paper, leaves, etc. For others wash in hot soapy water.

If you have a lot of mold damage you may want to hire an expert in mold clean-up.

Note to Renters:

You should report all plumbing leaks and moisture problems to your building manager right away. If you keep having water problems that are not being taken care of, you may want to call your local or state federal housing authorities.

For more information on mold and indoor air quality contact the Washington State Department of Health Office of Environmental Health, Safety and Toxicology toll free at (877) 485-7316 or the Indoor Air Quality information line at (360) 236-3090.

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If you need help quitting, call the Free and Clear[®] Program at (800) 784-8669 for one-on-one help.

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Using a Peak Flow Meter

A peak flow meter is a good tool to help manage asthma. It is a hand-held device that measures the ability of your lungs to push air out. Using the readings on the peak flow meter, you can chart the severity of your asthma. This can help you adjust your medicine.

A high peak flow meter reading means your lungs are working well. A low peak flow meter reading means your lungs are not working as well and you may need to adjust your medicine. With a peak flow meter you can see a drop in your readings even before you experience symptoms. Ask your provider what your peak flow range should be and include it on your asthma action plan.

There are other uses for the peak flow meter. It can help pinpoint what triggers your asthma. You can measure if your lung capacity is better or worse at work than when you are at home. If your results at work are better, it could mean triggers at home are causing your asthma to flare up.

Make sure you write down your peak flow meter readings. It is a good idea to do three trials and write down the highest one. Try and check around the same time each day. You may want to check more often if your asthma is acting up.

Keep a record of your peak flow meter readings and take them with you to your provider visits. Based on your results, your provider can adjust your medicines as needed. Be sure you keep taking your medicines and keep your provider informed.



Washington State Law for Students with Asthma

Washington State has a law that requires all schools to allow students to carry and use their asthma medicine if:

- There is a current asthma action plan on file with the school nurse and the student's health care provider
- The medicine has been ordered by the student's health care provider and
- The student has shown the skills needed to take the medicine to both the health care provider and the school nurse

There are close to 25 million people in the United States who have asthma. Talk with your provider about the best ways to get your asthma under control. A daily controller medicine may need to be used. Also make sure you have an asthma action plan. This plan is made with the help of your provider to manage medicine and reduce contact with asthma triggers both at home and at school.

Importance of a Healthy Weight

Chronic Obstructive Pulmonary Disease (COPD) is a lung disease that makes it hard to breathe. If you have COPD it is important to maintain a healthy weight and eat well. If you have COPD and you are over or underweight, it is even harder to breathe.

When you are overweight, your body needs more oxygen. This means your heart and lungs have to work harder. This makes breathing even more difficult for someone with COPD.

People with COPD often lose weight too because they use a lot of energy to breathe. A person with COPD burns ten times the calories just to breathe compared to someone who doesn't have a lung disease. When you lose weight, you lose muscles, including the muscles

that help you breathe. A healthy weight will help keep your breathing muscles strong.

Eating well also gives you more energy. If you have COPD, you need more energy to breathe than a healthy person. With proper nutrition you will feel less tired and have more energy for daily activities. Good nutrition will also help your body fight off infections and prevent illnesses. Be sure to talk with your provider before you make changes to your diet.

Talk to your provider about what a healthy weight is for you. Weigh yourself once or twice a week, or as often as your provider tells you to. Contact your provider if you gain or lose two pounds in one day or five pounds in one week.

Spirometry Testing

People with COPD have trouble breathing. The two main forms of COPD are chronic bronchitis and emphysema. The most common test for COPD is a lung function test called spirometry.

A spirometry test is very short. It is a breathing test that measures the amount of air a person can blow out of the lungs (volume) and how fast that person can blow it out (flow).

During the test you will be asked to take a deep breath, then blow out as hard and as fast as you can, for as long as you can. The results will be recorded on a graph. Your provider will use the results to assess how well your lungs are working and decide how best to treat you.





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Approvals: MHW – 2/27/12 HCA (HO) – 3/5/12 HCA (BH) – 3/1/12
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