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## **Global Asthma Report 2011 shows the tools to manage asthma exist but are not reaching many of the 235 million people affected**

New York, 17 September 2011 — Asthma is the most common chronic disease among children and also affects adults. Worldwide, 235 million people have asthma. For these people, asthma can mean struggling for breath when they have an asthma attack, a diminished quality of life, disability and even death. Although effective treatment is available, many people with asthma, especially in low- and middle-income countries, are unable to access or afford it.

To highlight the issues surrounding this major non-communicable disease, the **International Union Against Tuberculosis and Lung Disease (The Union)** and the **International Study of Asthma and Allergies in Childhood (ISAAC)** have collaborated to produce the **Global Asthma Report 2011**, which will be launched at an event sponsored by the Non-Communicable Disease Alliance on Saturday, 17 September at 10:45 am at the New York Academy of Medicine, 1216 Fifth Avenue (at 103rd Street). Release of the report coincides with the UN High-Level Meeting on NCDs taking place on 19–20 September.

Designed for stakeholders from government ministers and policy-makers to health workers and people with asthma, the **Global Asthma Report 2011** is a richly illustrated “atlas” that provides an overview of what is known about the causes and triggers of the disease, the global prevalence, the progress being made and the significant challenges today and for the future.

### **Key findings in the report:**

- ISAAC data show that asthma in children is increasing in low- and middle-income countries, where it is more severe than in high-income countries.
- The World Health Survey found an 8.2% prevalence of diagnosed asthma among adults in low-income countries and 9.4% in the richest countries. Middle-income countries had the lowest prevalence at 5.2%.
- Smoking and secondhand smoke are two of the strongest risk factors — and triggers — for asthma.
- Although asthma is frequently thought of as an allergic disease, this does not apply to all cases, and the non-allergic mechanisms need to be the focus of more research.
- Surveys around the world found asthma treatment falling short, with few patients consistently using the inhaled corticosteroids that effectively manage the disease. For example, the Asthma in America survey found only 26.2% of patients with persistent asthma used these medicines.
- While many countries now have asthma management guidelines, many health workers do not know how to diagnose or treat asthma and health systems are not organised to handle this type of long-term, chronic disease.
- A 2011 Union survey of the pricing, affordability and availability of essential asthma medicines in 50 countries found dramatic variations. For example, one generic Beclometasone 100µg inhaler in a private pharmacy cost the equivalent of nearly 14 days’ wages — and a patient with severe asthma requires about 16 of these inhalers per year.
- The Asthma Drug Facility established by The Union has been able to bring down the cost of treating a patient with severe asthma to approximately US\$ 40 per year.

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- When people do not have access to ongoing care, they often end up in emergency rooms and hospitals — a costly and unnecessarily disruptive process for all involved.
- Although economic data are unavailable for almost all low-income countries, a 2009 systematic review found annual national costs (in 2008 US dollars) ranging from \$8,256 million in the United States to \$4,430 million in Germany.
- Success stories from five high- and low-income countries that have implemented asthma management activities show that well-managed asthma saves money – and enables people to get on with their active lives. For example, in Finland, the mortality, number of hospital days and disability due to asthma fell 70–90% between 1994 and 2010 and a conservative estimate of the savings was \$300 million in 2007 alone.

“The tools to treat asthma are already available – there is no reason to delay”, says **Dr Nils E Billo, Executive Director of The Union**. “Moreover, when asthma is not diagnosed, not treated or poorly managed, and when people can not access or afford treatment, they regularly end up having to miss school or work, they are unable to contribute fully to their families, communities and societies, they may require expensive emergency care, and everyone loses. The obstacles to well-managed asthma can be overcome. Asthma is a public health problem that can – and should be addressed now.”

Learn more at our interactive website: [www.globalasthmareport.org](http://www.globalasthmareport.org). You may also download the complete report from this site.

### **About The Union**

The mission of the International Union Against Tuberculosis and Lung Disease (The Union) is to bring innovation, expertise, solutions and support to address health challenges in low- and middle-income populations. With nearly 10,000 members and subscribers from 150 countries, The Union has its headquarters in Paris and offices serving the Africa, Asia Pacific, Europe, Latin America, Middle East, North America and South-East Asia regions. Its scientific departments focus on tuberculosis and HIV, lung health and non-communicable diseases, tobacco control and research. Learn more at [www.theunion.org](http://www.theunion.org)

### **About ISAAC**

The International Study of Asthma and Allergies in Childhood (ISAAC) is the only global study of paediatric asthma and allergy currently in existence. In the 21 years it has been running, the ISAAC programme has completed three phases involving 306 research centres in 105 countries with nearly two million children. ISAAC findings are cited by world organisations involved in monitoring and preventing chronic respiratory diseases (CRDs) and are used to inform global health initiatives. Learn more at <http://isaac.auckland.ac.nz/>