**Asthma and Minority Health**

**Asthma** is a chronic respiratory condition that affects the lungs and causes repeated episodes of wheezing, chest tightness, shortness of breath and nighttime or early morning coughing. The cause of asthma is unknown, but is thought to be influenced by the environment and genetics. In 2011, 9.6% of Indiana adults and 9.5% of Indiana children currently had an asthma diagnosis, but some racial groups had disproportionately higher rates of asthma diagnoses than others [Fig. 1].

![Figure 1. Current asthma prevalence by race/ethnicity, Indiana, 2011](source: CDC and ISDH Data Analysis Team)

Since 2007, the overall age-adjusted rate of emergency department (ED) visits has been significantly higher for blacks than other races. In 2011, 124.4 per 10,000 black Indiana residents visited the ED compared to rates of 32.3 for whites and 7.9 for other races [Fig. 2].

![Figure 2. Asthma emergency department visit age-adjusted rates, by race, Indiana, 2007–2011](source: ISDH Data Analysis Team)

### Mortality Rates
Nationally, 1.0 person per 100,000 dies from asthma each year.  
- Compared to other races, blacks (2.3 deaths per 100,000 population) had the highest age-adjusted rate for asthma in the United States.  
  - Asian or Pacific Islander: 1.0  
  - White: 0.9  
  - Hispanic: 0.9  
  - American Indian or Alaskan Native: 0.8

### Economic Disparities
Asthma disproportionately affects low-income populations in Indiana.  
- During 2011, 19.8% of adults with an annual household income of less than $15,000 currently have asthma compared to 6.5% of adults with an income of $50,000 or more.

### Hospitalizations
As with ED visits, hospitalization rates vary between racial groups.  
- In 2011, black Indiana residents (33.0 per 10,000 people) were hospitalized over three times more often than whites (9.4 per 10,000).

### Note
Persistent asthma is based on NCQA HEDIS definition: At least 1 ED visit with asthma as the principal diagnosis; or, at least 1 acute inpatient claim with asthma as the principal diagnosis; or, at least 4 outpatient asthma visits with asthma as one of the listed diagnoses and at least 2 asthma medication dispensing events; or, at least 4 asthma medication dispensing events.

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For additional information on the impact of asthma in Indiana, please visit: www.asthma.in.gov
Medication management of asthma among 2011 Medicaid enrollees with persistent asthma

- Short-acting beta₂-agonist medications (SABAs) are intended to provide prompt relief of symptoms. Overuse of these medications can be an indicator of uncontrolled asthma. Among child (0-17 years) Medicaid enrollees, 20.1% of whites and 19.2% of blacks overused SABAs compared to 13.6% of Hispanic children. Among adult (18-64 years) Medicaid enrollees, 40.3% of whites overused SABAs compared to 34.8% of Hispanics and 33.0% of black children.
- Inhaled corticosteroids (ICS) are the most effective long-term control medication for asthma. Among child Medicaid enrollees, 93.1% of whites had at least one ICS prescription claim during the year compared to 92.6% of Hispanic children and 90.6% of black children. Among adult Medicaid enrollees, 90.3% of Hispanic adults had at least one ICS prescription claim during the year compared to 89.2% of whites and 85.6% of black adults.

Community resources

- For resources and programs concerning minority health, visit the Indiana Office of Minority Health.
- To be connected with Indiana asthma programs and resources, visit the Indiana State Department of Health Asthma Program webpage at www.asthma.in.gov or call the Indiana Family Helpline at 1-855-Help-1ST (855-435-7178).
- Additional information can be found at the Asthma Community Network, Centers for Disease Control and Prevention and the American Lung Association in Indiana.
- To get help with tobacco cessation, call the Indiana Tobacco Quitline at 1-800-QUIT-NOW (800-784-8669) or visit www.quitnowindiana.com.
- The Indiana Minority Health Coalition is a statewide non-profit organization that exists to eliminate health disparities through research, education, advocacy and access to health care services for minority populations.
- The American Lung Association Asthma Clinical Research Centers regularly recruit asthma patients for their studies.

References

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