About the Air Pollution and Respiratory Health Program

The Air Pollution and Respiratory Health Program of the National Center for Environmental Health, Centers for Disease Control and Prevention (CDC) leads CDC’s fight against environmental-related respiratory illnesses, including asthma, and studies indoor and outdoor air pollution.

CDC’s asthma program focuses on three main activities: (1) tracking: collecting and analyzing data on an ongoing basis to understand when, where, and in whom asthma occurs; (2) implementing scientifically proven interventions: ensuring that scientific information is translated into public health practices and programs to reduce the burden of asthma; and (3) establishing and maintaining partnerships: ensuring that all stakeholders have the opportunity to be involved in developing, implementing, and evaluating local asthma control asthma programs.

This same approach of research-based intervention conducted in partnership with international, national, and local partners is applied to CDC’s work in preventing carbon monoxide poisoning, studying the health effects of exposure to forest fire smoke, battling chronic obstructive pulmonary disease, and investigating human health effects of mold exposure.

Tracking
CDC provides on-site, short-term consultation and epidemiological assistance to both domestic and international public health agencies. For example, CDC staff are currently studying the effect of outdoor air pollution on children’s asthma in the El Paso/Ciudad Juarez international trucking corridor in cooperation with the U.S.-Mexico Foundation and others.

In conjunction with the National Center for Health Statistics and the National Center for Chronic Disease Prevention and Health Promotion, the Air Pollution and Respiratory Health Program supports a number of major asthma data collection efforts, including (1) collection of state-level adult asthma prevalence rates for detailed subgroups in 50 states and 4 territories through the Behavioral Risk Factor Surveillance System Survey; (2) collection of data on days of restricted activity, days in bed, days of work or school lost, physician visits, and hospitalizations due to asthma through the National Health Interview Survey; and (3) collection of in-depth state and local asthma data through development and testing of a National Asthma Survey (currently used in five states). These data allow CDC and states to plan and evaluate asthma control interventions.

Interventions
CDC’s National Asthma Control Program was created in 1999 to support the goals and objectives of Healthy People 2010. With appropriations of $37.1 million in fiscal year (FY) 2004, CDC funded 37 states, 9 cities, 1 territory (Puerto Rico), and a number of other partners, including other federal agencies, universities, and national organizations, under its National Asthma Control Program for activities in FY 2004.

CDC identified potentially effective interventions describing and documenting research-based asthma control interventions that are being implemented in communities worldwide (http://www.cdc.gov/asthma/interventions/default.htm). For example, CDC funds the Inner City Asthma Intervention, a four-year program implemented at 23 sites in 15 states and based on nearly a decade of research performed by the National Institute of Allergy and Infectious Diseases. In addition, CDC funds the Controlling Asthma in American Cities Project (CAACP) in seven cities. CAACP is a locally developed, multi-component asthma initiative aimed at reducing the burden of asthma in communities.

Partnerships
CDC works with government and non-governmental agencies and organizations worldwide to conduct research and surveillance and to develop training materials, educational information, and innovative methods to address respiratory health problems associated with air pollution. Through these efforts CDC helps local and state governments and private agencies inform the public about the health effects of air pollution and provides people with accurate and useful information about steps they can take to protect their health.
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CDC partners with state health departments in 29 states and the District of Columbia to develop asthma control plans that include disease tracking, intervention, and occupational components, as well as working with state health departments in 6 states to implement such plans. Additionally, CDC partners with major non-governmental agencies such as the American Lung Association, the Allergy and Asthma Foundation of America, and the Allergy and Asthma Network/Mothers of Asthmatics to support asthma control activities such as adult educational programs and addressing asthma control through school health programs.

Other Air Quality Research and Interventions
CDC is engaged in a number of studies including ones that will evaluate the public health impact of forest fire smoke exposure, is investigating the link between recreational boating and carbon monoxide poisoning, and plans to analyze state data to define the public health problem potentially associated with Acute Idiopathic Pulmonary Hemorrhage among infants.

CDC has partnered with the National Interagency Prescribed Fire Training Center to investigate biomass smoke exposure among forest firefighters, with the National Park Service and state recreation departments to investigate carbon monoxide poisoning and recreational boating, and with Native American tribes to investigate the impact of mold exposure on human health.

For more information on the program, visit http://www.cdc.gov/nceh/airpollution, E-mail edcinfo@cdc.gov, or call 1-800-CDC-INFO.