



Hongihongi te rangi hou'  
'Smell the fresh air'

## **NZNO College of Respiratory Nurses Monthly News Bulletin Friday 30 August 2019**

### **NZNO/College News**

#### **Consultation**

NZNO is presently consulting with members on a range of issues.

**[The full outline can be found here](#)**

#### **Online Gambling in New Zealand: Discussion Document**

NZNO seeks your feedback on this consultation which aims to set the direction for the future of online gambling in New Zealand. This is in response to the increasing number of people affected by gambling harm and persistent health inequities for the most affected at-risk population groups.

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#### **WorkSafe New Zealand: Draft #2 Violence Good Practice Guidelines**

In May of this year WorkSafe consulted publicly on a draft guideline *Violence in the Healthcare Industry: Guidance for PCBUs*. The NZNO Addressing Violence Against Nurses Project Team made a comprehensive submission that contributed to refining the draft, and which started some valuable discussion.

**please send feedback to [policyanalyst@nzno.org.nz](mailto:policyanalyst@nzno.org.nz) by Friday, 13 September 2019**

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#### **Abortion Legislation Bill**

NZNO seeks your feedback on the changes proposed in the Abortion Legislation Bill, which takes abortion out of Crimes Act and seeks to treat the procedure as a health issue.

**Send feedback to [leanne.manson@nzno.org.nz](mailto:leanne.manson@nzno.org.nz) by September 12, 2019.**

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#### **Culture, Wellbeing and the Living Standards Framework: A Perspective**

This discussion paper is the first step in the process to better incorporate culture into the Living Standards Framework (LSF) and Dashboard, which are anticipated to be released in 2021.

**[NZNO welcomes your feedback on this paper,](#)**

Please send feedback to [Leanne.Manson@nzno.org.nz](mailto:Leanne.Manson@nzno.org.nz) by **September 23, 2019**

### **New Zealand**

#### **Asthma foundation announces free spacer initiative for inhalers**

Asthma and Respiratory Foundation NZ (ARFNZ) are pleased to announce a new initiative to distribute free spacers for use with respiratory inhalers to regional asthma societies and organisations across New Zealand.

### [Colds more likely to turn deadly for babies from damp, mouldy homes: study](#)

Researchers behind a new housing study say the findings are a wake-up call for the Government and policy-makers on the [critical importance of warm, dry homes](#).

### [Mouldy, damp homes linked to respiratory infection hospitalisations](#)

Māori and Pasifika children made up two thirds of children under two hospitalised with a respiratory infection according to a new study.

### [New Zealand 'simplified' asthma inhaler combo treatment reduces attacks, study shows](#)

Researchers have found a way of treating asthma that reduces the chance of an attack by a third.

## **Air pollution**

### [Air pollution can accelerate lung disease as much as a pack a day of cigarettes](#)

Air pollution -- especially ozone air pollution which is increasing with climate change -- accelerates the progression of emphysema of the lung, according to a new study.

## **Allergies**

### ['I actually had to call in sick': Why seasonal allergies are getting worse for city dwellers](#)

Data shows pollen levels rising across Canada, including in Calgary, Montreal, Toronto

*The item below is not available full text but may be sourced via a DHB library through databases like CINAHL or Proquest, or through the NZNO library service*

## **Asthma (inc paediatric)**

### [Survey: 75% of asthma sufferers are unable to work to their full potential](#)

A new multi-national survey has revealed that asthma sufferers are missing nearly one-tenth of work hours due to their symptoms, which also results in a loss of productivity and affects their emotional wellbeing.

### [Children with mild asthma can use inhalers as needed, study suggests](#)

A new study supports evidence that children with mild asthma can effectively manage the condition by using their two inhalers -- one a steroid and the other a bronchodilator -- when symptoms occur. This is in contrast to the traditional method of using the steroid daily, regardless of symptoms, and the bronchodilator when symptoms occur. The as-needed use of both inhalers is just as effective for mild asthma as the traditional protocol, according to the investigators.

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## **Acute asthma attacks in the school setting: Diagnosis and prevention**

Beverley Bostock-Cox

Independent Nurse, Vol. 2019, No. 8: 22-25.

Beverley Bostock-Cox explains what school nurses can do to ensure the safety of pupils with asthma

Adnan Custovic, Clare S Murray & Angela Simpson (2019) **Dust-mite inducing asthma: what advice can be given to patients?**, Expert Review of Respiratory Medicine, DOI: [10.1080/17476348.2019.1651647](https://doi.org/10.1080/17476348.2019.1651647)

Introduction: Amongst allergic asthmatics, high allergen exposure increases asthma severity. However, there is no consensus on the role of mite allergen avoidance in the management of asthma, and various guidelines differ in their recommendations.

Areas covered: Several systematic reviews/meta-analyses on mite avoidance in the management of asthma have been published, and their findings have been used for a call to provide a recommendation in British guidelines that dust-mite control measures should not be recommended. However, there are several problems with such analysis (such as combining studies in adults and children), and we question whether these are appropriate tools to evaluate available evidence about mite allergen avoidance, and whether it is correct to rely disproportionately on the results of meta-analyses/systematic reviews to inform clinical practice in this area. Recent evidence in children suggests that mite-impermeable bed encasings reduce emergency hospital attendance with severe asthma exacerbations.

Expert opinion: The practical questions include how to achieve a sufficient real-life reduction allergen exposure, and how to identify patients who will benefit from effective intervention. The intervention should start early in the natural history of asthma, and consideration for choosing patients should include using the titre of allergen-specific IgE antibodies or the size of skin test wheal as an indicator.

Selberg, S. , Hedman, L. , Jansson, S. , Backman, H. and Stridsman, C. (2019), **Asthma control and acute health care visits among young adults with asthma – A population-based study**. J Adv Nurs. Accepted Author Manuscript. doi:[10.1111/jan.14174](https://doi.org/10.1111/jan.14174)

### Aims

To study asthma control and acute health care visits among young adults with asthma.

### Background

Despite the access to effective treatment and nursing interventions, poor asthma control is still common among individuals with asthma. However, studies describing clinical characteristics among young adults with asthma are rare.

### Design

A population-based cohort study.

### Methods

In 2015, as a part of the OLIN pediatric cohort I (recruited in 1996 at age 7-8yr), N=2291 young adults (27-28 yr) completed a postal questionnaire survey including questions on asthma and respiratory symptoms. Of these, N=280 (12%) were identified as having current asthma and were further studied.

## Results

Of those with current asthma, women reported respiratory symptoms and smoking to a greater extent than men. Approximately one-fourth had uncontrolled asthma and acute health care visits due to asthma was reported by 15% of women and 8% of men. Uncontrolled asthma was associated with smoking, lower educational level, use of reliever treatment most days and acute health care visits. Acute health care visits due to asthma were associated with periodic use of regular controller treatment also after adjustment for uncontrolled asthma.

## Conclusion

The result indicate poor adherence to asthma treatment which may lead to decreased asthma control and acute health care visits.

## Impact

Most young adults with asthma are diagnosed and treated in primary care, ideally in a team with a nurse. The main findings highlight the need for evidenced-based nursing interventions, contributing to a more efficient asthma management in primary care.

## **Bronchial disorders (Bronchiectasis/Bronchiolitis)**

*The item below is not available full text but may be sourced via a DHB library through databases like CINAHL or Proquest, or through the NZNO library service*

Johnny Wu, Anne B Chang & Danielle F Wurzel (2019) **Contemporary management of bronchiectasis in children**, Expert Review of Respiratory Medicine, DOI: [10.1080/17476348.2019.1655400](https://doi.org/10.1080/17476348.2019.1655400)

Introduction: Bronchiectasis is increasingly recognized as a major cause of morbidity and mortality worldwide. It affects children of all ethnicities and socioeconomic backgrounds and represents a far greater burden than cystic fibrosis (CF). Bronchiectasis often begins in childhood and the radiological changes can be reversed, when mild, with optimal management. As there are limited pediatric studies in this field, current treatment approaches in children are based largely upon adult and/or CF studies. The recent establishment of bronchiectasis registries will improve understanding of pediatric bronchiectasis and increase capacity for large-scale research studies in the future.

Areas covered: This review summarizes the current management of bronchiectasis in children and highlights important knowledge gaps and areas for future research. Current treatment approaches are based largely on consensus guidelines from international experts in the field. Studies were identified through searching Medline via the Ovid interface and Pubmed using the search terms 'bronchiectasis' and 'children' or 'pediatric' and 'management' or 'treatments'.

Expert opinion: Bronchiectasis is heterogeneous in nature and a one-size-fits-all approach has limitations. Future research should focus on advancing our understanding of the aetiopathogenesis of bronchiectasis. This approach will facilitate development of targeted therapeutic interventions to slow, halt or even reverse bronchiectasis in childhood.

## COPD

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### **Home oxygen therapy in patients with COPD: safety issues for nurse prescribers**

British Journal of Nursing Vol. 28, No. 14 Focus

Two landmark studies demonstrated survival benefit in chronic obstructive pulmonary disease (COPD) complicated by chronic hypoxaemia with the prescription of long-term oxygen therapy (LTOT). Best practice evidence therefore recommends that individuals with stable COPD and resting hypoxaemia ( $\text{PaO}_2 \leq 7.3$  kPa) should be assessed for long-term oxygen therapy. However, it is estimated that up to one-quarter of COPD patients prescribed LTOT continue to smoke. Oxygen therapy consequently presents an obvious fire hazard in the case of such patients, who are therefore at greater risk of death or sustaining devastating head and neck burns. This article critically analyses, through the context of a care study, the professional, ethical and legal issues involved in making a safe prescribing decision for LTOT in an individual with COPD who is a current smoker. Home oxygen prescription is a growing trend in the COPD population, and it is important for nurse prescribers to be aware of the issues highlighted in the article to ensure safe prescribing practices.

Ora, L, Mannix, J, Morgan, L, Wilkes, L. **Nurse-led integration of palliative care for chronic obstructive pulmonary disease: An integrative literature review.** J Clin Nurs. 2019; 00: 1– 9. <https://doi.org/10.1111/jocn.15001>

#### Aims and objectives

To uncover what is known about nurse-led models or interventions that have integrated palliative care into the care of patients with chronic obstructive pulmonary disease.

#### Background

Chronic obstructive pulmonary disease is a highly symptomatic, incurable disease characterised by chronic symptoms that without appropriate palliation can lead to unnecessary suffering for patients and their caregivers. While palliative care practices can relieve suffering and improve quality of life, most palliative models of care remain cancer-focused. New models, including nurse-led care that integrates palliative care for patients with chronic obstructive pulmonary disease, could address patient suffering and therefore need to be explored.

## Influenza

### [The evolving threat of influenza](#)

The flu season has been particularly bad this year, but the way we record deaths may be masking the true impact of the virus.

“Discontent” doesn’t tell the half of it. This has been the winter of pounding headaches, aching limbs, exfoliated throats and darkened rooms.

### **Flu vaccine reduces risk of early death for elderly intensive care patients**

An influenza vaccine does not just work when it comes to influenza. A new study shows that elderly people who have been admitted to an intensive care units have less risk of dying and of suffering a blood clot or bleeding in the brain if they have been vaccinated. And this is despite the fact that they are typically older, have more chronic diseases and take more medicine than those who have not been vaccinated.

## Lung function

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### **Definition of a Yoga Breathing (Pranayama) Protocol That Improves Lung Function**

Kupershmidt, Sabina PhD; Barnable, Traci MSN, RN

Holistic Nursing Practice: [July/August 2019 - Volume 33 - Issue 4 - p 197–203](#)

This study tests the hypothesis that yoga breathing (pranayama) improves lung function in healthy volunteers during a 6-week protocol. A randomized controlled pilot study demonstrated an improvement in peak expiratory flow rate and forced expiratory volume. The easy-to-learn approach can be translated to the inpatient and outpatient settings.

## Pertussis

### **[At risk: Asthmatics warned to check they're vaccinated against whooping cough](#)**

Kiwi adults living with asthma are being urged to check they are up to date with whooping cough vaccinations as winter kicks in.

## Sleep apnoea

### **[Oral appliances may be highly effective in treating a type of sleep apnea](#)**

Certain traits may define a type of obstructive sleep apnea that can be effectively treated with an oral appliance, according to new research published online in the *Annals of the American Thoracic Society*.

### **[Kiwis' Increasing Waistlines Forcing Us to Find New Sleep Positions to Help Breathing - Research](#)**

Kiwis' expanding waistlines and higher BMIs are forcing us to adopt new sleep positions to help them breathe - according to new research.

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### **Capnography monitoring of patients with obstructive sleep apnea in the post-anesthesia care unit a best practice implementation project**

Borczyński, Elizabeth<sup>1,2</sup>; Worobel-Luk, Pamela<sup>2</sup>

JBI Database of Systematic Reviews and Implementation Reports: [July 2019 - Volume 17 - Issue 7 - p 1532–1547](#)

Introduction: The prevalence of OSA is substantial in North America. Post-operative patients with OSA are at risk for respiratory complications, but about 60% of surgical patients with this condition go undiagnosed. If the presence of sleep apnea is known, non-invasive capnography monitoring can be applied post-operatively to help detect early respiratory compromise during the recovery phase. The STOP-Bang Questionnaire, a validated screening tool to evaluate the risk of OSA, can efficiently be used as part of the pre-surgical evaluation.

Objectives: The aim of this project was to improve safety by averting post-operative respiratory events in patients with obstructive sleep apnea (OSA) through early detection of compromise during recovery from anesthesia. Specific objectives focused on implementing nurse-initiated capnography monitoring of patients with OSA in two post-anesthesia care units and, when indicated, expediently communicating abnormal end-tidal carbon dioxide excursions.

## **Smoking (inc vaping and electronic cigarettes)**

### **[Car smoking fines a punitive waste of time - health academic](#)**

Plans to fine parents for smoking in a car with children are punitive and a waste of time, a public health academic has told the Health Select Committee.

### **[Gloves off: Smoking researcher shunned over Philip Morris funding](#)**

A finalist for New Zealander of the Year for her work with Māori smokers is at war with academics because her research is funded by tobacco giant Philip Morris.

### **[New tobacco research programme to target Māori smoking rates](#)**

A new tobacco research programme has been launched that aims to eliminate disparities in smoking rates between Māori and non-Māori.

### **[Philip Morris tried to target poor through poverty group and a DHB](#)**

Tobacco giant Philip Morris has been trying to gain access to a major Auckland poverty group in a bid to get its new tobacco products marketed to poor people

### **[Maternal, primary caregiver smoking may up odds of childhood adiposity](#)**

Youths whose mothers or primary caregivers smoked had 30% and 31% increased odds of being overweight or obese by ages 3 and 5, respectively, compared with those with nonsmoking mothers or caregivers, according to a study in the [International Journal of Environmental Research and Public Health](#). The findings were based on data involving more than 11,100 children in Ireland.

[Irish Examiner](#) (8/16)

Feldman I, Helgason AR, Johansson P, et al

### **[Cost-effectiveness of a high-intensity versus a low-intensity smoking cessation intervention in a dental setting: long-term follow-up](#)**

BMJ Open 2019;9:e030934. doi: 10.1136/bmjopen-2019-030934

Objectives The aim of this study was to conduct a cost-effectiveness analysis (CEA) of a high-intensity and a low-intensity smoking cessation treatment programme (HIT and LIT) using long-term follow-up effectiveness data and to validate the cost-effectiveness results based on short-term follow-up.

Design and outcome measures Intervention effectiveness was estimated in a randomised controlled trial as numbers of abstinent participants after 1 and 5–8 years of follow-up. The economic evaluation was performed from a societal perspective using a Markov model by estimating future disease-related costs (in Euro (€) 2018) and health effects (in quality-adjusted life-years (QALYs)). Programmes were explicitly compared in an incremental analysis, and the results were presented as an incremental cost-effectiveness ratio.

## Smoking related illness

### [Vape users: No need for alarm over death in US, expert says](#)

A public health professor says New Zealand vape users shouldn't panic following the first [e-cigarette death in the United States](#).

*The item be low is not available full text but may be sourced via a DHB library through databases like CINAHL or Proquest, or through the NZNO library service*

Riccardo Polosa, Renée O'Leary, Donald Tashkin, Rosalia Emma & Massimo Caruso(2019) **The effect of e-cigarette aerosol emissions on respiratory health: a narrative review**, Expert Review of Respiratory Medicine, DOI: [10.1080/17476348.2019.1649146](https://doi.org/10.1080/17476348.2019.1649146)

Introduction: Due to the uptake in the use of e-cigarettes (ECs), evidence on their health effects is needed to inform health care and policy. Some regulators and health professionals have raised concerns that the respirable aerosols generated by ECs contain several constituents of potential toxicological and biological relevance to respiratory health.

Areas covered: We critically assess published research on the respiratory system investigating the effects of ECs in preclinical models, clinical studies of people who switched to ECs from tobacco cigarettes, and population surveys. We assess the studies for the quality of their methodology and accuracy of their interpretation. To adequately assess the impact of EC use on human health, addressing common mistakes and developing robust and realistic methodological recommendations is an urgent priority. The findings of this review indicate that ECs under normal conditions of use demonstrate far fewer respiratory risks than combustible tobacco cigarettes. EC users and smokers considering ECs have the right to be informed about the relative risks of EC use, and to be made aware that findings of studies published by the media are not always reliable.

Expert opinion: Growing evidence supports the relative safety of EC emission aerosols for the respiratory tract compared to tobacco smoke.

## Tuberculosis

### [A quarter of the world's population at risk of developing tuberculosis](#)

A new study has shown that probably 1 in 4 people in the world carry the tuberculosis bacterium in the body. The disease tuberculosis is caused by the bacterium Mycobacterium Tuberculosis, which affects more than 10 million people every year, and kills up to 2 million, making it the most deadly of the infectious diseases.

### [Lung mucosa plays big role in elderly's susceptibility to tuberculosis](#)

Old lungs are not as capable as young lungs of fighting off an infection of the bacteria that causes tuberculosis (TB), placing seniors at a greater risk of developing TB. The microbe that causes this infectious disease, Mycobacterium tuberculosis (Mtb), currently kills more people in the world than any other pathogen.

### [Guidelines for Tuberculosis Control in New Zealand, 2019](#)

The Guidelines for Tuberculosis Control in New Zealand 2019 contains information on the diagnosis, treatment and management of patients.

The Guidelines update earlier advice on TB diagnostics, and recommend use of a standardised daily regimen where appropriate. The wider use of therapeutic drug monitoring and multidisciplinary decision making are also encouraged. Groups that will benefit from latent TB infection (LTBI) screening and treatment have been better defined.

## **General items of interest**

### **Respiratory Research Review**

#### **Issue 162**

This month we explore the role of platelets in pulmonary inflammation and tissue destruction in patients with TB.

#### **Other highlights include:**

- Estimating the prevalence of latent TB in Australia
- A shorter regimen for rifampicin-resistant TB
- The use of adjuvant vitamin D in TB treatment.

### **Toddler leaves hospital for first time thanks to novel approach to treatment**

Bronchopulmonary dysplasia (BPD) is the most common illness that develops in babies born premature with underdeveloped lungs. A chronic disease that may present long-term breathing problems and can be fatal, there is no cure for BPD. However, new data released in 2017 shows a ventilation protocol developed at Nationwide Children's Hospital, coupled with the treatment of the whole child, are improving survival rates to 99%. The national average of for the survival rate of infants born with severe BPD is 80%.

### **The burden of respiratory infections among older adults in long-term care: a systematic review**

*BMC Geriatrics* volume 19, Article number: 210 (2019)

Respiratory infections among older adults in long-term care facilities (LTCFs) are a major global concern, yet a rigorous systematic synthesis of the literature on the burden of respiratory infections in the LTCF setting is lacking. To address the critical need for evidence regarding the global burden of respiratory infections in LTCFs, we assessed the burden of respiratory infections in LTCFs through a systematic review of the published literature.

### **WHO report on the global tobacco epidemic 2019: offer help to quit tobacco use**

26 JUL 2019

#### **World Health Organization**

Progress in global tobacco control has been strong since MPOWER was introduced in 2007 as a tool to help countries implement WHO FCTC demand reduction measures. Five billion people – about 65% of the world's population – are now covered by at least one MPOWER measure at the highest level of achievement. This number has more than quadrupled since 2007 when only 1 billion people – 15% of the world's population – were protected by at least one MPOWER measure (not including Monitoring or Mass media campaigns, which are assessed separately).

Since the last WHO report on the global tobacco epidemic, two years ago, progress has been steady, with 15 countries that previously had no best-practice measures taking action to reach best-practice level on one or more measures, and a further 21 countries that had at least one measure in place adding at least one more. This means a total of 36 countries introduced one or more MPOWER measures at the highest level of achievement between 2016 and 2018.

Offering help to quit – the focus of this seventh WHO report on the global tobacco epidemic – is an essential component of any tobacco control strategy. Global targets for reducing tobacco use will not be reached unless current tobacco users quit, and indeed, many tobacco users report that they want to quit. With the help of cost-effective population-based interventions, as outlined in the “O” measure of MPOWER (Offer help to quit tobacco use), tobacco users greatly increase their chances of successfully quitting.

Unfortunately, only 13 new countries have started providing comprehensive cessation programmes since 2007. There are now 23 countries protected by this measure, up from 10 countries in 2007.

However, in terms of population coverage, progress is still promising. One third of the world's population – 2.4 billion people in 23 countries – have access to cessation services provided at best-practice level. This is 2 billion more people (26% of the world's population) protected by comprehensive cessation support programmes since 2007, meaning that cessation programmes are now the second most adopted MPOWER measure in terms of population coverage. This is thanks to two large countries, India and Brazil, adopting comprehensive cessation support at best-practice level.

The above bulletin has been compiled by Linda Stopforth, SNIPS, on behalf of the NZNO College of Respiratory Nurses. It is for NZNO College of Respiratory Nurses only and must not be reproduced without their permission.

It is provided on the last Friday of each month and contains an overview of news items, articles and research papers of interest to the College members. All links are current at the time of being compiled and distributed.

For feedback please contact your College Administrator: [diana.geerling@nzno.org.nz](mailto:diana.geerling@nzno.org.nz)

**To learn more about the College go to:**

[http://www.nzno.org.nz/groups/colleges\\_sections/colleges/college\\_of\\_respiratory\\_nurses](http://www.nzno.org.nz/groups/colleges_sections/colleges/college_of_respiratory_nurses)

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