



**RESPIRATORY
HEALTH
ASSOCIATIONSM**
of Metropolitan Chicago



Respiratory Health Association of Metropolitan Chicago & Illinois COPD Coalition announce
State Plan for Addressing COPD in Illinois

Press Conference

10:00 a.m. | Thursday, May 1, 2008

James R. Thompson Center | 100 West Randolph Street, Chicago, 15th Floor Press Room

AGENDA

Introduction

Joel Africk - President and CEO, Respiratory Health Association of Metropolitan Chicago

COPD in Illinois and State Plan

Jeffrey Glassroth, MD - Illinois COPD State Plan Chair and Vice Dean & Chief Academic Officer, Feinberg School of Medicine, Northwestern University

NHLBI Learn More Breathe Better Campaign

James P. Kiley, PhD - Director of the Division of Lung Diseases, National Heart, Lung, and Blood Institute

Personal Perspective

Grace Anne Dorney Koppel - COPD patient and advocate

Chronic Disease in Chicago

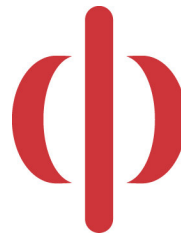
Terry Mason, MD – Commissioner, Chicago Department of Public Health

Lung Disease in Cook County

David Goldberg, MD - Director, Section of Preventive Medicine, Cook County Bureau of Health Services

Closing Comment and Q&A

Joel Africk - President and CEO, Respiratory Health Association of Metropolitan Chicago



**RESPIRATORY
HEALTH
ASSOCIATIONSM**
of Metropolitan Chicago

For Immediate Release
April 28, 2008

Media Contacts:

Mary Beth Berkoff (312) 628-0225

Cell (773) 213-4776

Meghan Bradley (312) 628-0250

Cell (773) 209-6704

Illinois releases plan to tackle 4th leading cause of death *Illinois only the second state to address COPD*

WHAT: Respiratory Health Association of Metropolitan Chicago (RHAMC) and the Illinois COPD Coalition will release the Illinois COPD State Plan. Doctors, clinicians, patients and experts will discuss the impact and management of COPD as well as recommendations and implementation of the second state COPD plan in the nation.

WHY: Over half a million Illinoisans suffer from chronic obstructive pulmonary disease (COPD). In the United States COPD claims the life of one person every four minutes. This progressive disease is the 4th leading cause of death, killing more women than men, and is predicted to be the 3rd leading cause by 2020. COPD is diagnosed in more than 12 million people and an additional 12 million likely have the disease and don't know it.

WHO: **Grace Anne Dorney Koppel**—COPD patient/advocate
James P. Kiley, PhD—Director of the Division of Lung Diseases, National Heart, Lung, and Blood Institute
Jeffrey Glassroth, MD—Illinois COPD State Plan Chair and Vice Dean & Chief Academic Officer, Feinberg School of Medicine, Northwestern University
Terry Mason, MD—Commissioner of the Chicago Department of Public Health
David Goldberg, MD — Director, Section of Preventive Medicine, Cook County Bureau of Health Services
Joel Africk—President and Chief Executive Officer, Respiratory Health Association of Metropolitan Chicago

WHEN: Thursday, May 1, 2008 at 10AM

WHERE: James R. Thompson Center, 100 West Randolph St., Chicago; 15th Floor Press Room

VISUALS / INTERVIEWS:

- All press conference speakers
- Local COPD patients

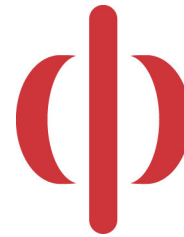
###

S
M
E
N

Chicago's Lung Health
Leader Since 1906

1440 W. Washington Blvd.
Chicago, IL 60607-1878
Phone: (312) 243-2000
Fax: (312) 243-3954
www.lungchicago.org

S
M
E
N



**RESPIRATORY
HEALTH
ASSOCIATIONSM**
of Metropolitan Chicago

For Immediate Release
April 28, 2008

Media Contacts:
Mary Beth Berkoff (312) 628-0225
Cell (773) 213-4776
Meghan Bradley (312) 628-0250
Cell (773) 209-6704

New Coalition Introduces State Plan; Targets COPD Illinois State Plan Aimed at the 4th Leading Cause of Death

Strategic action plan to be announced May 1 at Thompson Center

On May 1 the Illinois COPD Coalition—convened by Respiratory Health Association of Metropolitan Chicago—will make Illinois only the second state in the US to introduce and begin implementing a plan designed to address COPD.

The new plan seeks to stem the growth in new cases, reduce mortality rates, and improve the quality of life for the more than 500,000 Illinois residents currently living with the serious lung disease, COPD (chronic obstructive pulmonary disease)

“Of the top five leading causes of death, COPD is the only one on the rise. This plan gives COPD the attention it deserves. Our goal is to increase public awareness and do more to combat COPD in Illinois,” said RHAMC President and CEO, Joel Africk.

In addition, the Plan looks to: increase access to therapies like pulmonary rehabilitation, and when necessary, home oxygen care; and increase funding and resources at the state level and recommends the development of a statewide COPD resource network.

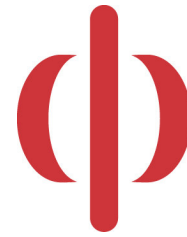
Joining the Coalition in introducing this new effort, will be Dr. James P. Kiley, Director of the Division of Lung Diseases at the National Heart, Lung, and Blood Institute (NHLBI) and patient advocate Grace Anne Dorney Koppel.

“NHLBI is committed to COPD education and research. We are pleased to be a partner in this new effort as we bring our national COPD Learn More Breathe Better program to Illinois, where RHAMC and the Coalition plan to use our educational materials in their general public and healthcare provider outreach,” said Kiley.

COPD is an under-recognized and under-diagnosed disease with an estimated 12 million Americans currently living with the disease, and another 12 million who have it and don't know it. In people who have COPD, the airways—tubes that carry air in and out of your lungs—are partly blocked, which makes it hard to get air in and out. Symptoms include “smokers cough”, shortness of breath, feeling like you can't catch your breath, or wheezing.

Chicago's Lung Health
Leader Since 1906

1440 W. Washington Blvd.
Chicago, IL 60607-1878
Phone: (312) 243-2000
Fax: (312) 243-3954
www.lungchicago.org



**RESPIRATORY
HEALTH
ASSOCIATIONSM**
of Metropolitan Chicago

S
M
E
N

"If you are diagnosed with COPD, seek out the best doctor you can find and get treated. And by all means if you smoke, stop," advises Grace Anne Dorney Koppel. "Life with COPD can be very good if treated aggressively through medication and pulmonary rehabilitation. Better yet, catch COPD early, before it progresses if you have ever been a smoker or worked in occupations in which you were exposed to lung irritants. Get a breathing test. It may be the most important test you've ever taken."

Koppel, Kiley and a number of other experts will be on hand to explain the plan and the state of COPD in Illinois, and the importance of a State Plan including:

- **Jeffrey Glassroth, MD**—Illinois COPD State Plan Chair and Vice Dean & Chief Academic Officer, Feinberg School of Medicine, Northwestern University
- **Terry Mason, MD**—Commissioner, Chicago Department of Public Health
- **David Goldberg, MD**—Director, Section of Preventive Medicine, Cook County Bureau of Health Services
- **Joel Africk**—President and Chief Executive Officer, Respiratory Health Association of Metropolitan Chicago

The Illinois COPD State Plan will be released during a news conference on May 1, 2008, at 10AM at the James R. Thompson Center, 100 W Randolph St., 15th floor, Chicago.

For more information about the Illinois COPD state plan or for a copy of the executive summary—once the plan is released, please visit www.copdillinois.org.

For information on NHLBI's COPD Learn More Breathe Better initiative visit, www.learnaboutcopd.org.

Respiratory Health Association of Metropolitan Chicago (RHAMC) has been a local public health leader since 1906. Today, the Association fights lung disease and promotes healthy lungs by supporting research, advocacy, and educational efforts on behalf of individuals and families affected by lung cancer, asthma, COPD (chronic bronchitis and emphysema), and other lung diseases.. For more information, please visit www.lungchicago.org.

###

Chicago's Lung Health
Leader Since 1906

1440 W. Washington Blvd.
Chicago, IL 60607-1878
Phone: (312) 243-2000
Fax: (312) 243-3954
www.lungchicago.org

State Plan for Addressing COPD in Illinois **Press Conference Speaker Biographies**

***Jeffrey Glassroth, MD* | Illinois COPD State Plan Chair and Vice Dean & Chief Academic Officer, Feinberg School of Medicine, Northwestern University**

Dr. Glassroth serves as Vice Dean and Chief Academic Officer and Professor of Medicine at the Feinberg School of Medicine of Northwestern University. His research interests relate to lung infections and, particularly, to tuberculosis. Dr. Glassroth has focused on the prevention, diagnosis, and general epidemiology of lung infections including, in recent years, those related to HIV infection. He is also co-editor of a major textbook on lung infections and a co-editor of Baum's Textbook of Pulmonary Medicine.

Dr. Glassroth has remained an active clinician and teacher throughout his career. He has held an array of administrative roles throughout his career including Associate Dean for Clinical and Academic Affairs and Chief Operating Officer for the 400 member clinical practice of Northwestern, Vice Dean at Tufts and Northwestern, in addition to having chaired two Departments of Medicine. He is a Master of the American College of Physicians.

***Grace Anne Dorney Koppel* | COPD patient/advocate**

Grace Anne Dorney Koppel is an attorney in private practice in Potomac, Maryland. A graduate of Fordham University (B.A.); Stanford University (M.A.) and Georgetown Law (J.D.), she continues to work as a practicing attorney, senior Vice President for Koppel Communications, (an independent production company) and business manager for her husband, Ted Koppel. Since January 2007, Grace Anne has also been active as a national spokeswoman and patient advocate for the National Heart, Lung, and Blood Institute of the National Institutes of Health in the hopes of raising awareness of COPD (chronic obstructive pulmonary disease) which affects some 24 million Americans, 12 million of whom are undiagnosed and untreated. She has appeared on CBS Evening News, Good Morning America, The View, on cable, radio and in magazine publications to try to capture physician and public interest for NHLBI's "Learn More, Breathe Better Campaign." Grace Anne has four children and five grandchildren and a devoted husband. She also has COPD but has "learned much more" about managing her disease and does "breathe better".

***James P. Kiley, PhD* | Director of the Division of Lung Diseases, National Heart, Lung, and Blood Institute**

James P. Kiley, Ph.D., joined the National Heart, Lung, and Blood Institute (NHLBI) in 1984 as Health Scientist Administrator in the Institute's Division of Lung Diseases. From 1989-1994, Dr. Kiley served as Chief of the Division's

Airways Diseases Branch. From 1995-2000 he served as Director of the National Center on Sleep Disorders Research, which is part of NHLBI. He was named Director of the Division of Lung Diseases in 2000. Dr. Kiley's primary research interests include obstructive and interstitial lung diseases and sleep.

Dr. Kiley is the author or coauthor of more than 85 scientific publications and abstracts. He has served as a reviewer for the Journal of Applied Physiology, Chest, Respiratory Physiology, the Journal of the U.S. Public Health Service, and the Journal of Clinical Investigations.

***Terry Mason, MD* | Commissioner, Chicago Department of Public Health**

Dr. Terry Mason is Commissioner of the Chicago Department of Public Health. Appointed by Mayor Richard M. Daley in late 2005, Dr. Mason is re-shaping the department to meet the public health challenges of the 21st century, especially the challenge of chronic disease. He is a nationally known health educator, motivator, advocate for better nutrition and regular exercise, and champion of strengthening families as a path to healthier communities. He is a leader of the Mayor's Fitness Council and emphasizes the connection between a healthy body, mind and spirit. Dr. Mason has served as Chief of Urology at Mercy Hospital and Medical Center in Chicago and as Assistant Professor of Urology at the University of Illinois at Chicago's (UIC) College of Medicine. He is on the faculty of the UIC School of Public Health. Dr. Mason is also the host of WVON-AM's weekly radio program *Doctor in the House*, which airs on Saturday mornings in the Chicago area and worldwide via the Internet.

***David Goldberg, MD* | Director, Section of Preventive Medicine, Cook County Bureau of Health Services**

***Joel Africk* | President and Chief Executive Officer, Respiratory Health Association of Metropolitan Chicago**

Joel Africk is President and Chief Executive Officer of the Respiratory Health Association of Metropolitan Chicago, where he oversees the activities of the Association's 50-person Chicago staff and serves as the Association's principal advocate for its policy agenda. Joel serves on the Board of the Chicago Asthma Consortium, and is a Fellow in the Institute of Medicine of Chicago.

Prior to assuming his current position, Joel was a partner in the Chicago law firm of Jenner & Block, LLC, where he represented clients in a broad range of business litigation matters concerning professional liability, contract, employment, and bankruptcy law. He is a cum laude graduate of Harvard Law School (J.D.) and a magna cum laude graduate of the University of Illinois at Urbana Champaign, where he received a degree in Political Science and passed the Uniform CPA examination.

State Plan for Addressing COPD in Illinois

Executive Summary



The *State Plan for Addressing COPD in Illinois* was developed through the work of the Illinois COPD Coalition – a 100 member coalition, convened by Respiratory Health Association of Metropolitan Chicago (RHAMC). Coalition members represent a broad group of stakeholders from throughout the State, including community-based organizations, public health departments, professional organizations, patients, caregivers, health care providers (physician, nurses, respiratory therapists, and physical therapists), as well as pharmaceutical companies and home health care providers.

Chronic obstructive pulmonary disease (COPD) refers to a group of diseases that cause airflow blockage and breathing-related problems. COPD, also referred to as emphysema and chronic bronchitis, is one of the most significant public health issues in the United States today. It is a preventable, treatable disease that is the 4th leading cause of death, and is projected to be the 3rd leading cause of death by 2020. It is estimated that 12 million people in United States have been diagnosed with COPD, and that an additional 12 million are believed to have the disease and don't even know it. COPD is also the 4th leading cause of death in Illinois. It is estimated that 557,120 Illinoisans have been diagnosed with either chronic bronchitis, emphysema, or a combination of both. This does not take into account those that may have the disease, but have not yet been diagnosed. Therefore, more detailed prevalence in Illinois is not known at this time.

To focus more attention on this chronic condition, the Illinois COPD Coalition was brought together to create a comprehensive COPD State Plan for Illinois that outlines strategies for reducing the burden of COPD in Illinois. The State Plan will serve as a guide to reduce the incidence of COPD and COPD-related morbidity and mortality as well as improve the quality of life for those living with COPD. Some objectives for doing this include:

- Enhance the prevention of COPD, by promoting smoking cessation activities and increasing awareness of environmental causes of COPD;
- Educate primary health care providers to help increase diagnosis rates and to provide patients with the GOLD standard of COPD care;
- Increase COPD awareness among at-risk populations and others to improve health care decision-making;
- Provide a statewide network of resources for those living with COPD to increase self-management skills and adherence to treatment; and
- Increase surveillance through the Behavioral Risk Factor Surveillance System and other data collection tools to provide specific information about COPD in Illinois.

Five working groups were formed to develop the *State Plan for Addressing COPD in Illinois*:

The *Prevention, Early Detection, Surveillance and Data* working group developed recommendations for COPD prevention and improving early detection practices. It also examined existing data sources to define recommendations around monitoring COPD. Key points include:

- Promote public health campaigns directed at patients and health care providers that: a) help smokers quit; and b) increase the use of spirometry to diagnose COPD in those with risk factors and respiratory symptoms.
- Increase the availability and affordability of high quality smoking cessation programs.

- Increase the availability of accurate, high quality diagnostic testing with spirometry, a noninvasive breathing test that determines how well a person's lungs are working.
- Promote clean air, both indoor and outdoor, to reduce the risk of developing COPD and to reduce morbidity in people who already have COPD.

The *Treatment and Management* working group focused on COPD care – ensuring that health care providers offer state of the art care for patients and that patients have access to pharmacologic and non-pharmacologic therapies. Key points include:

- Increase awareness among health care providers about appropriate treatments for COPD through the formulation of a COPD curriculum for medical students and residents, creation of a COPD Disease Expert Network, and dissemination of a newsletter for medical professionals about standards for COPD care.
- Increase patient knowledge about COPD (cause, treatment, prognosis, and strategies to live with the disease) through delivery of educational opportunities for patients and their caregivers, and dissemination of patient materials and newsletter for COPD patients and their caregivers.
- Ensure access to non-pharmacologic therapy, including pulmonary rehabilitation and home medical equipment and oxygen, by collaborating with community fitness resources and establishing a standardized menu of home oxygen equipment options.

The *Public Awareness, Patient Education and Resources* working group focused on ways to increase overall awareness of COPD and proper medical management, as well as ways to link patients to resources. Key points include:

- Educate the general public, people living with COPD, and medical providers through implementation of National Heart, Lung, and Blood Institute's (NHLBI) *COPD Learn More Breathe Better Campaign*, and launching radio and print public service announcements utilizing NHLBI resources.
- Identify existing resources for COPD patients; create a comprehensive resource list and a resource driven website geared toward patients and providers.

The *Policy and Advocacy* working group explored policy approaches for improving COPD outcomes. Key points include:

- Remove barriers to access for diagnostic and care opportunities for COPD by determining public and private insurance coverage of smoking cessation treatments, spirometry, and pulmonary rehabilitation, and maximizing insurance coverage and reimbursement.
- Increase programming related to COPD through increased state funding for COPD, and encourage Illinois Department of Public Health to dedicate staff resources to COPD.
- Raise awareness among elected officials by holding annual COPD Awareness Days in Springfield, increasing district-specific visits, and creating a toolkit for legislators.
- Increase advocacy among patients by providing advocacy trainings and an advocacy toolkit.
- Increase COPD surveillance.

The recommendations generated for the *Research* section include:

- Increase communication among researchers statewide in the area of COPD by holding an annual COPD Research Conference.
- Promote research opportunities among people living with COPD by developing a centralized website for research opportunities.

- Improve communication on research advancements to the COPD patient community through the expansion of patient education materials, such as RHAMC's *Inspiration* newsletter.
- Commission future research that evaluates the effectiveness of strategies recommended in this plan.

The *COPD State Plan Outcomes and Evaluation* working group discussed ways to evaluate the implementation and effectiveness of the Plan as well as the sustainability and functioning of the Coalition itself. Key outcomes include:

- Decreased COPD-related mortality as measured by Illinois state mortality data.
- Increased prevalence data through the addition of COPD-related questions to the Behavioral Risk Factor Surveillance System.
- Decreased number of COPD-related hospitalizations, as measured by Illinois hospitalization data.
- Annual Coalition meetings for discussions on progress and implementation.
- Increase of Coalition membership by 5% each year between 2008 and 2011.
- Each year, at least one collaboration will be developed for implementation of one or more of the strategies of the Plan.



THE CASE FOR AN ILLINOIS CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD) STATE PLAN

You Should Know that COPD in the United States.....

- Is the **4th leading cause of death** and is predicted to be the 3rd leading cause by 2020
- Kills more than 120,000 Americans each year—that's one death every 4 minutes.
- Has increased dramatically in women over the last 50 years, such that in 2002, **more women than men died of COPD.**
- Is diagnosed in more than **12 million people** and an additional 12 million likely have the disease and don't even know it.
- Cost the nation an estimated **\$32.1 billion** in 2002. Direct medical services accounted for \$18.0 billion and indirect costs of morbidity and premature mortality was \$14.1 billion.
- For Medicare beneficiaries is nearly **2.5 times** that of the expenditures for all other patients.
- Accounted for **1.5 million** emergency department visits by adults 25 and older in 2000.
- Resulted in nearly **726,000** hospitalizations in 2000.

You Should Know that COPD in Illinois.....

- Causes shortness of breath and other symptoms that can get in the way of even the most basic day-to-day tasks—from doing housework, to taking a walk, or even bathing and getting dressed in untreated Illinoisans.
- Accounted for an estimated **557,120 Illinoisans** diagnosed with either chronic bronchitis, emphysema or a combination of both.

We Envision a COPD State Plan that.....

- **Increases early detection** of COPD in order to decrease the severity of disease in those diagnosed, thereby increasing their quality of life and reducing health care expenditures.
- **Educates primary health care providers** to help increase diagnosis rates and provide patients with the GOLD standard of COPD care.
- **Increases awareness** of those at risk so that they are empowered in their health care decision making.
- Provides a statewide **network of resources** for those living with COPD, their families, and caregivers to decrease hospitalizations and emergency room visits through increased self management skills that reduce exacerbations.
- **Increases surveillance** through the Behavioral Risk Factor Surveillance Survey to provide specific data on the state of COPD in Illinois to evaluate the impact of health interventions.





RHAMC Areas of Expertise

The mission of Respiratory Health Association of Metropolitan Chicago (RHAMC) is to promote healthy lungs and fight lung disease through research, advocacy, and education. To that end, the RHAMC serves an estimated one million Cook County residents diagnosed with asthma, lung cancer, chronic obstructive pulmonary disease (COPD), emphysema, and other lung diseases through community-based interventions. More specifically, the goals of the RHAMC include the following:

- *Advocate for cleaner air.*
- *Reduce tobacco use and exposure to second hand smoke.*
- *Reverse the asthma epidemic in Chicago.*
- *Improve treatments and cures for lung disease.*

Respiratory Health Association staff and board members are leaders in the lung health community and have been at the center of many debates and discussions on issues that impact chronic diseases, respiratory health and clean air. Topics and issues we can discuss are:

- Respiratory Illnesses:
 - Asthma
 - Chronic obstructive pulmonary disease (COPD)
 - Tuberculosis
 - Lung cancer
 - Disproportionate instances of respiratory diseases in women
- Lung Disease Research
- Air Quality:
 - Ozone and particulate matter
 - Air Pollution Action Days
 - Environmental Tobacco Smoke (ETS)
 - Child care and school air quality
 - Transportation issues affecting lung health
 - Radon

For more information and/or to be connected with local experts, please contact:

Mary Beth Berkoff
Interim Director, Marketing & Communications
(312) 628-0225
mbberkoff@lungchicago.org

Meghan Bradley
Manager, Marketing & Communications
(312) 628-0250
mbradley@lungchicago.org

**Chicago's Lung
Health Leader
Since 1906**