



THUNDERSTORM ASTHMA

August 2024

Thunderstorm asthma is thought to be triggered by an uncommon combination of high pollen levels and certain type of thunderstorm, causing many people to develop asthma symptoms over a short period of time. In regions with seasonal high concentrations of airborne grass pollen, thunderstorms in spring and early summer can trigger asthma in people with grass pollen allergy, even if they have not had asthma before.

These events are likely to occur in the months of early October through to late December and move in a west to east direction across Victoria.

Thunderstorm asthma can be life threatening.

Impact of a thunderstorm asthma alert day on the primary care system	During a Thunderstorm Asthma Alert Day, primary care providers, specifically general practice and pharmacies are likely to experience a high number of patients presenting with anxiety, allergy symptoms and respiratory conditions such as asthma attacks. Other emergency services such as Ambulance, hospital emergency departments and Priority Primary Care Centres (PPCCs) and Medicare Urgent Care Clinics (UCCs) are also expected to experience a high number of presentations.
Consider the role of your practice in an emergency	Emergency planning and response in general practice Factsheet-Thunderstorm-Asthma.pdf (racgp.org.au)
Know the pollen rating and risk of thunderstorm asthma	 Airrater - Quality Monitor & Allergy Symptom Tracker Australian Bureau of Meteorology PollenForecast VicEmergency issues alerts for high-risk Thunderstorm Asthma/allergy days.
Keep up to date with alerts and information	 <u>Subscribe</u> to heat and thunderstorm asthma alerts Learn more about <u>Thunderstorm Asthma HealthPathways</u> <u>Preparing patients for a disaster</u> HealthPathways <u>Post-natural disaster health</u> HealthPathways
Management of at risk people	 Encourage people with asthma and allergic rhinitis to stay indoors and reduce exposure to outside air (turn off air conditioners, close windows) on high-risk Thunderstorm Asthma days and days of high pollen count. Ensure people have a current <u>Asthma Action Plan</u>. Start asthma preventer medication prior to high risk season. People experiencing severe asthma symptoms such as chest tightness, wheeze, shortness of breath, or cough should seek urgent medical assistance.

	 Train staff, including non-clinical staff, in emergency asthma management. Increased bronchodilators (Ventolin) and resuscitation medication on site – appropriate equipment (spacers) available. Vulnerable population list of patients ready and handy
Update your emergency response	Preferably use the <u>Emergency Response Planning Tool</u> (free to general practices until December) and ensure staff are familiar with it. If using a paper system, store a copy off site.
documents	This will not only help you to stay focused and respond under pressure but get your business back up and running more quickly.
Ensure emergency contact details are up to date	So that Murray PHN can assist in coordinating support with government agencies during an emergency, make sure to let us know who your emergency contacts are via your Quality Improvement Consultant or: primarycareresponse@murrayphn.org.au
Communicate service closures or impacts	Use social media and other platforms. Prepare a message or email to patients using appointment confirmation system or Pen CS if needed. Consider sending other important alerts, for example: to patients with asthma during epidemic thunderstorm asthma days.
	Use Pen CS and CAT Plus recipes to identify relevant patient groups and send an SMS message to those patients who have not opted out.
	You will need to <u>set up your account</u> and ensure you have enough credits in the system to send the messages.
	Inform Murray PHN of service closures or impacts: primarycareresponse@murrayphn.org.au
Plan staffing	•
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Plan staffing Protect your data	In the event of no or reduced access to your site or staff absences, consider alternate models of work, alternate sites and equipment needs (ERPT can guide you through these considerations): • Are practitioners set up with ePrescribing so patients can obtain scripts immediately and remotely? Ensure paper scripts/prescribing pads are also available in the event that no internet is available. • Does the practice have an alternate contact number, or can you temporarily divert your practice number, so patients can call if the building is closed, and the phone system is inaccessible? • Can admin and clinical staff access your practice management and clinical software systems off site to facilitate remote models of care? • Ensure clinicians are able to create pathology and imaging requests if working remotely.
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Other useful links and resources to share with patients

- Thunderstorm asthma | healthdirect
- Thunderstorm asthma National Asthma Council Australia
- Thunderstorm asthma Better Health Channel
- My Health Record
- Alternative after hours and emergency care options

Contact us

For more information or support email primarycareresponse@murrayphn.org.au

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