

New York's asthma rates reveal social disparities

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A report just issued by the Center for Children's Health and the Environment at Mount Sinai School of Medicine has concluded that the poor and minorities in New York City are 21 times more likely to be hospitalized for asthma than the affluent. For example, lower East Harlem, where the average household income was \$18,732, had the most serious problem, with a rate of hospitalization of 222.28 per 10,000 per year. In a neighborhood like the Rockaways where the average household income was \$103,125, the rate was zero, which means that not a single person had to be treated in a hospital for asthma in the last year. The report cited a previous study that has shown that asthma hospitalization rates were 7.5 times higher for minorities than for whites.

Dr. Luz Claudio, an assistant professor in the environmental and neuropathology division of Mount Sinai hospital, and the major author of the report, told the *WSWS* that the study examined income level by zip code, providing a more precise relationship between income and asthma. She explained that "based on previous results which emphasized ethnicity, we didn't expect that the results we found were going to be so startling."

The Center for Disease Control and Prevention in Atlanta reports that asthma attacks have doubled for American children in the past decade. The condition is now the leading cause of child hospitalizations, totaling 5 million, while the asthma death rate has increased by 78 percent from 1980 to 1993.

The US National Health Interview Survey found that in 1990 nearly 3.7 children under age 18 suffer from asthma. The disease accounts for 2.2 million pediatrician visits per year, and 10 million school days missed. In 1985, asthma in the US cost \$6.5 billion. Between 1979 and 1987, the number of children 18

years and younger that have visited a hospital for the disease has increased by 4.5 percent a year.

It has been estimated that roughly 5 percent of the total population in the US currently suffers from some degree of asthma. The disease, however, is not evenly distributed throughout the country, but is concentrated in the heavily populated urban centers of the Northeast like New York City. From 1982 to 1986, asthma deaths in this city were three times higher than the rest of the nation.

The Sinai report, which was published in the *Journal of Asthma*, offers three factors that could be responsible for the disparity in asthma rates. The first is that residents in the poorest neighborhoods lack access to proper preventative care.

Asthma, if left untreated, can lead to wheezing attacks that restrict the victim's ability to breathe. However, the disease can be treated with careful and long-term monitoring in the home. Some of the measures that can be taken include the use of air filters and hypo-allergenic bedding.

The authors of the Mount Sinai study cited previous studies that indicate that poor black and Hispanic families receive substandard care, and are therefore compelled to rely exclusively on the treatment they receive in an emergency hospital room. Proper follow-up care is rarely provided after the asthma attack is treated. A number of emergency room physicians have told the *WSWS* that the environment they work in simply does not give them the time or the opportunity to provide the necessary follow-up care.

Second, poor housing is a critical factor for the high rates in certain areas. This is because buildings in low-income areas may have an increased exposure to air pollutants due to excess water created by water leaks and poor ventilation. This will increase exposure to

indoor allergens. Experts, in general, have identified pesticides, dirt, dust mites, and cockroaches as major causes of respiratory problems.

Third, there is significant evidence that minority and low-income people live in the most polluted areas in the city. They are exposed to the highest levels of toxic pollutants such as lead, ozone, carbon monoxide and particulates. Other studies have demonstrated a correlation between low air quality and respiratory diseases.

This report is another indication of the growing social polarization and tensions not only in New York City, but also internationally. The poorest sectors of the population are compelled to live in the worst and the most stressful conditions. As a result, they are the most susceptible to life-threatening diseases, and at the same time receive the most inadequate medical treatment.



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