



Mask Use for People With Asthma or Any Severe Lung Disease

In partnership with pulmonologists from Michigan Medicine, the Michigan Department of Health and Human Services (MDHHS) Asthma Program would like to help promote mask use for people with asthma. In the general media, there has been an upswing in information stating that people with asthma can't or shouldn't wear masks. This is not true as an absolute statement, and we offer the following information to help inform the public and health care providers about mask use for people with asthma or any severe lung disease.

- All of the major medical associations who care for patients with asthma have issued a joint statement saying that people with asthma and other severe lung diseases should wear masks to help prevent the spread of COVID-19, along with practicing physical distancing and washing their hands frequently. People with asthma who are not actively having an asthma attack can breathe through a cloth or standard medical masks without difficulty when inactive or doing light physical activity, such as walking. The gaps between mask fibers and around the edges of the mask allow for sufficient airflow so that there is no risk of buildup of carbon dioxide or deficiency in oxygen. During the pandemic, people who are actively having breathing problems should stay at home except to seek medical care, and when seeking medical care, should follow the masking guidelines of their medical provider.
- Children with asthma can wear a mask if one is required to attend school or visit public spaces, as long as they are not having breathing problems. As above, if a child is having breathing problems, they should see a doctor right away.
- There are some potential benefits of mask wearing for people with asthma, such as reducing exposure to common asthma triggers, including common cold viruses, cold air and airborne allergens like pollen and animal dander.
- People with and without asthma will find it relatively uncomfortable to wear a mask during moderate-to-vigorous physical activity but exercising while wearing a mask does not pose a risk of asthma flare to those with well-controlled asthma. The preferred option for exercising safely during the pandemic is to employ physical distancing while exercising outside. During hot and humid weather, some people with asthma will need to stay in a temperature and humidity-controlled environment where possible.

For health care providers:

- The decision to give a face mask exemption should not be taken lightly. Wearing a face mask is one of the few protections against spread of COVID-19 in public places that we have. Exemptions should be considered only in extreme circumstances.
- In some instances, physician reassurance regarding the safety of the facial coverings may be all that is needed.
- There are many facial covering options that may be more comfortable than others. Something is likely better than nothing when a patient is intolerant of certain facial coverings. People with allergies to latex may have an allergic reaction to masks made of certain elastic materials, and should seek out masks made of non-latex containing materials.
- Though face masks and face shields should not be viewed interchangeably, available data suggest face shields can reduce the amount of inhalation exposure to another droplet-spread respiratory virus, namely influenza.
- The use of N95 masks should be reserved for frontline workers, except for select immunocompromised patients who should discuss this need with their physicians. Even for these patients, physical distancing should be observed and should be the mainstay of self-protection.
- If an individual is given an exemption for facial coverings, there is still the chance for confrontation or challenge by individuals or workplaces that mandate the use of coverings.



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