Overcoming Hereditary Emphysema—One Woman's Struggle To Breathe Easy

(NAPSA)—For years, Jan Jenkins thought her wheezing, difficulty breathing and exhaustion were due to asthma aggravated by 15 years of smoking when she was younger. Yet, despite having quit smoking many years earlier at the age of 35, her breathing problems grew worse, and she regretfully had to cut back on many of the things she loved, including hiking and mountain biking, and was forced to give up tennis.

After 10 years and consultations with several doctors, she finally saw a physician who tested her for Alpha$_1$-Antitrypsin (AAT) deficiency—also known as hereditary emphysema and Alpha-1—one of the most common genetically linked disorders.

Jan found out she was one of the 100,000 people in the United States with AAT deficiency, a progressive disease caused by a reduction or lack of the blood protein AAT in the lungs.[1] Fewer than one in 10 with the condition have been diagnosed.

Jan's AAT deficiency is now augmented by a weekly infusion of alpha$_1$-proteinase inhibitor (A1PI). Although there is no cure for AAT deficiency and Jan will never recover normal lung function, she has been able to stay active and continue working as a special education teacher. She eats healthy, does light yoga, walks on a treadmill daily and enjoys hiking.

"Once we finally had the correct diagnosis, my doctor was able to recommend lifestyle changes and treatments to help reduce further lung damage,"

said Jan, 51, who lives in Las Vegas. "I was even able to enjoy a white-water rafting trip this summer."

People with chronic obstructive pulmonary disease (COPD), certain types of emphysema and several other conditions are encouraged to ask their doctors about being tested for AAT deficiency. Baxter Healthcare Corporation offers complimentary AAT deficiency test kits to physicians to screen their patients for the condition. Baxter has also launched a screening and prevalence study to identify people at risk for AAT deficiency. To date, the company has helped test more than 5,000 individuals for AAT deficiency.

"Early detection of AAT deficiency is crucial since the condition can be accelerated by lifestyle factors, including smoking, and cannot be reversed once it causes deterioration in the lungs," said Dr. John Butler, a physician at Rockford Pulmonology in Rockford, Ill. "Increased screening and detection of AAT deficiency not only helps individuals who have the disease, it also helps to increase public awareness of this hereditary condition."

According to the American Thoracic Society and the European Respiratory Society, the following symptoms and conditions are signs that may indicate risk for Alpha$_1$-Antitrypsin (AAT) deficiency, which may lead to hereditary emphysema:

- Early onset of emhysema (age 45 years or less)
- Chronic obstructive pulmonary disease (COPD)—emphysema, chronic bronchitis or bronchiectasis
- Family history of any of the following: emphysema/COPD, liver disease, or panniculitis
- Asthma with minimal response to medication, inhalers
- Shortness of breath with routine activity
- Cough with or without mucous
- Wheezing
- Liver disease with unknown cause
- Emphysema prominent in lower lobes of lungs

Before Jan received the correct diagnosis, one doctor told her she had asthma and she was shocked to learn she had AAT deficiency.

"People who have chronic breathing problems really should be tested for AAT deficiency," said Jan. "One simple blood test can either rule it out or determine if you might have the condition."

For more information about AAT deficiency or to order an educational brochure about the disorder, call 1-866-ARALAST or visit www.baxter.com.

[1] Alpha-1 Network. What is Alpha-1? www.alphaone.org.