

**Title of Intervention:** Medical Indoor Environment Counseling

**Intervention Strategies:** Supportive Relationships

**Purpose of the Intervention:** To reduce exposure of asthma patients to dust mites

**Population:** Child and adult patients with a history of asthma and/or rhinitis

**Setting:** Health care facility-based

**Partners:** None mentioned

**Intervention Description:**

- Supportive Relationships: All patients were counseled by their physician about mite allergen avoidance in the home. Those in the intervention group received advice from the medical indoor environment counselor as well.

**Theory:** Not mentioned

**Resources Required:**

- Staff/Volunteers: Health care providers, medical indoor environment counselors
- Training: Not mentioned
- Technology: Not mentioned
- Space: Private area for counseling
- Budget: Not mentioned
- Intervention: Not mentioned
- Evaluation: Questionnaire

**Evaluation:**

- Design: Randomized prospective study
- Methods and Measures:
  - Mite allergen levels were measured on mattresses, mattress bases and floors.

**Outcomes:**

- Short Term Impact: Compliance for changing the mattress bases, removing or treating the carpets, washing duvets, pillows and stuffed animals were significantly higher in the intervention group than the control group. A significant decrease in mite allergen was obtained for the intervention group in mattress bases and in carpets.
- Long Term Impact: Not measured

**Maintenance:** Not mentioned

**Lessons Learned:** The use of Medical Indoor Environment Counselors and doctors helped to increase compliance with mite-allergen avoidance.

**Citation(s):**

de Blay, F., G. Fourgaut, et al. (2003). "Medical Indoor Environment Counselor (MIEC): role in compliance with advice on mite allergen avoidance and on mite allergen exposure." *Allergy* 58(1): 27-33.