

# Santa Cruz County 2003 Health Almanac

## Respiratory Diseases

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## Agencies and Information Sources

### **Santa Cruz County (SCC) Health Services Agency** - <http://www.santacruzhealth.org>

The Health Services Agency (HSA) exists to protect and improve the health of the people in Santa Cruz County. The Agency provides programs in Environmental Health, Public Health, Medical Care, Substance Abuse Prevention and Treatment, and Mental Health.

### **California Department of Health Services** - <http://www.dhs.ca.gov/default.htm>

To Protect and Improve the Health of All Californians

### **California Health Interview Survey** - <http://www.chis.ucla.edu/index.html>

The California Health Interview Survey (CHIS) is the largest state health survey conducted in the United States. Every two years, CHIS plans to collect information on the health and health care needs of California's diverse population.

### **Centers for Disease Control and Prevention** - <http://www.cdc.gov/default.htm>

CDC's Mission is to promote health and quality of life by preventing and controlling disease, injury, and disability. CDC and other respiratory disease specific sites include:

- **National heart, Lung and Blood Institute:** <http://www.nhlbi.nih.gov/>
- **American Lung Association:** <http://www.lungusa.org/>
- **Asthma:** <http://www.cdc.gov/nceh/airpollution/asthma/default.htm>

## The American Lung Association®

The American Lung Association® (ALA) is the oldest voluntary health organization in the United States, with a National Office and constituent and affiliate associations around the country. Founded in 1904 to fight tuberculosis, ALA today fights lung disease in all its forms, with special emphasis on asthma, tobacco control and environmental health. ALA is funded by contributions from the public, along with gifts and grants from corporations, foundations and government agencies. ALA achieves its many successes through the work of thousands of committed volunteers and staff.

The American Lung Association has many programs and strategies for fighting lung disease. Among these are:

**Asthma.** Open Airways For Schools is the ALA's elementary-school education program for children with asthma. Open Airways teaches children with asthma to understand and manage

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their illness so they can lead more normal lives. A key part of the program is ALA's facilitation of asthma-care partnerships involving school nurses and educational staff as well as physicians, families and ALA volunteers.

**Tobacco control.** ALA offers a variety of smoking control and prevention programs targeted to specific groups-some aimed at adults, others intended for school use, and still others designed to build bridges between the home and school and involve community leaders along with parents and educators.

An important part of the ALA drive to eliminate tobacco use among youth is sponsorship of the Smoke-Free Class of 2000, a nationwide program focusing on prevention of use of tobacco products by youngsters. As part of the Smoke-Free Class of 2000, ALA has developed Teens Against Tobacco Use (TATU), a peer-teaching tobacco control program aimed at deterring youngsters from taking up smoking. We also have a new state-of-the-art smoking cessation program for teens, called Not On Tobacco, or N-O-T.

For people who already smoke, ALA offers its Freedom From Smoking® program, considered the "gold standard" of group-setting, peer-support smoking cessation programs.

**Environmental health.** Lung disease can be caused or aggravated by air pollution, both indoors and out. ALA is active in the pollution control arena and has become the leading public advocate for clean air, as well as the chief source of information and public education on the health hazards of air pollution. ALA has published a number of special reports on air pollution.

**Research and professional education.** ALA funds a broad program of grants and awards designed to further both basic and applied research in lung function and lung disease. This funding has led to such major breakthroughs as the use of lifesaving surfactant therapy for thousands of premature infants with respiratory distress syndrome (RDS).

**Advocacy programs.** ALA's advocacy programs seek to influence the development and enforcement of laws and regulations related to lung health at the national, state and local levels, providing authoritative information to policymakers. ALA played a major role, for example, in the passage of the landmark federal Clean Air Act, as well as the law prohibiting smoking on domestic passenger airline flights. And as a result of an ALA lawsuit filed in 1993, the Environmental Protection Agency established revised, stricter air quality standards for smog and soot in July 1997. Children with asthma are among the millions of Americans who will benefit from the lower levels of air pollution these new standards are expected to bring. ALA also has been a leader in advocating for tobacco control legislation that will adequately protect our children's health.

ALA also has been instrumental in persuading the Congress to increase federal funding for lung-related biomedical research, as well as domestic health programs such as tuberculosis control activities.

**Multicultural programs.** There is a higher prevalence of some types of lung disease among minority populations compared with the general population. ALA places special emphasis on reaching minority communities with health education and other programs to prevent and control lung disease, as well as on supporting research in aspects of lung disease afflicting particular populations.

**Communications programs.** ALA informs and educates the public about the impact and prevention of lung disease in a variety of ways. This information is disseminated through many channels, including this web site, public service announcements, news releases and conferences, and spokespersons who can address lung disease issues via print, broadcast and electronic media.

To reach your local American Lung Association, call 1-800-LUNG-USA (1-800-586-4872).

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### State of the Air Report: 2003

<http://lungaction.org/reports/stateoftheair2003.html>

“Santa Cruz County received “an ‘A’ for air quality-an honor shared by just 10 of the state’s (CA) 50 counties.” “Santa Cruz recorded zero days in which EPA ozone standards were violated.” “The county violated state ozone standards - .09 parts per million – just once during the two-year period, and for only one hour”

Santa Cruz Sentinel 05/09/03

### Allergies/Hay Fever

(All figures are for U.S.)

Nine percent of adults had been told in the past 12 months that they had hay fever (1997)

The percent of adults with hay fever was higher in the West (11.2%) than in any other region of the United States (1997)

9.0 million visits to office-based physicians each year are attributed to Allergic Rhinitis (2000)

<http://www.cdc.gov/nchs/fastats/allergies.htm>

### Asthma

(All figures are for U.S.)

There were 4,487 deaths from Asthma (2000)

More females (10.5 million) than males (7.1 million) reported having asthma

Asthma was the primary reason for 9.3 million visits to office-based physicians in 2000. (2000)

<http://www.cdc.gov/nchs/fastats/asthma.htm>

### Information:

<http://www.cdc.gov/niosh/topics/asthma/>

Millions of people suffer from allergies caused by every day exposures to agents such as dust mite, cat dander, and pollens. Agents encountered by workers can also cause allergic problems such as asthma, nasal and sinus allergies, hives, and even severe anaphylactic reactions.

Examples of these work-related agents include animal proteins, enzymes, flour, natural rubber latex, and certain reactive chemicals.

Asthma is one of the more serious problems that can be caused by work-related allergy. It can cause recurrent attacks of symptoms such as wheezing, chest tightness, shortness of breath, and coughing. In severe cases, these symptoms can be disabling. Fortunately, when potential hazards are recognized, work-related allergies and asthma can often be prevented or their effects minimized

### FDA Issues Warning for Serevent, Advair

WebMD Medical News

Reviewed By Michael Smith, MD

on Monday, August 18, 2003

**Date of alert:** Aug. 14, 2003

**What is alerted:** The FDA has added new safety information and warnings to the labeling for drug products containing salmeterol -- a long-acting bronchodilator used to treat asthma and emphysema. Products affected by these changes are Serevent Inhalation Aerosol, Serevent Diskus, and Advair Diskus.

**New precautions:** New labeling will contain a boxed warning about a small but significant increased risk of life-threatening asthma attacks or asthma-related deaths seen in patients taking salmeterol in a recently completed U.S. safety study.

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**Basis of alert:** Based on the results of a 28-week study that compared effects of salmeterol in asthma patients with asthma patients not taking the drug. African Americans, in particular, had a significantly higher risk of having a life-threatening asthma attack or asthma-related death when taking Serevent.

**Manufacturer:** GlaxoSmithKline.

SOURCE: FDA.

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### Ever Diagnosed With Asthma by Gender (Adult) CHIS 2001

	Ever Diagnosed with Asthma	
	Yes	No
California--Male	11.5	88.5
Santa Cruz --Male	13.0	87.0
California--Female	12.7	87.3
Santa Cruz--Female	12.2	87.8

### Ever Diagnosed With Asthma by Age Group (Adult) CHIS 2001

	Ever Diagnosed with Asthma	
	Yes	No
California--Total	12.1	87.9
Santa Cruz --Total	12.6	87.4
California--0 - 17	13.6	86.4
Santa Cruz --0 - 17	14.8	85.2
California--0 - 11	12.3	87.7
Santa Cruz --0 - 11	15.7	84.3
California--12 - 17	16.3	83.7
Santa Cruz --12 - 17	13.2	86.8
California--18 - 75+	11.5	88.5
Santa Cruz--18 - 75+	12.0	88.0

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### Ever Diagnosed With Asthma by Race/Ethnicity (Adult) CHIS 2001

	Ever Diagnosed with Asthma	
	Yes	No
California--White	13.5	86.5
Santa Cruz --White	13.2	86.8
California--Black	18.0	82.0
Santa Cruz--Black	.	91.5
California--Latino	8.2	91.8
Santa Cruz --Latino	9.6	90.4
California--Asian	10.0	90.0
Santa Cruz--Asian	*17.1	82.9
California--Am. Ind.	22.8	77.2
Santa Cruz --Am. Ind.	.	90.4
California--Other	16.0	84.0
Santa Cruz--Other	*18.4	81.6

Statistically unstable

### Ever Diagnosed With Asthma by Poverty Level (Adult) CHIS 2001

		Ever Diagnosed with Asthma	
		Yes	No
California--0 - 99%	Sum	10.7	89.3
Santa Cruz--0 - 99%	Sum	11.1	88.9
California--100 - 199%	Sum	11.5	88.5
Santa Cruz --100 -199%	Sum	*8.9	91.1
California--200 -299%	Sum	12.6	87.4
Santa Cruz --200 - 299%	Sum	*13.4	86.6
California--300%+	Sum	12.7	87.3
Santa Cruz --300%+	Sum	14.0	86.0

\* Statistically unstable

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### **Bronchitis**

(All figures are for U.S.)

There are a total of 1,167 deaths from Bronchitis in the U.S. each year (2000)

Five percent of adults 18 years and older had been told in the past 12 months that they had chronic bronchitis (1997)

Higher percents of women than men had been told they had chronic bronchitis (1997)

Percents of adults with chronic bronchitis were higher in the South than any other region (1997)

<http://www.cdc.gov/nchs/fastats/brnchtis.htm>

### **Chronic Obstructive Pulmonary Disease**

(All figures are for U.S.)

Deaths Annually: 122,009 (2000)

Age-Adjusted Death Rate: 44.3 deaths per 100,000 population (2000)

Cause of Death Rank: 4 (2000)

Cases of Chronic Bronchitis Reported Annually: 9.6 million (1997)

Cases of Emphysema Reported Annually: 3.2 million (1997)

Cases of Asthma Reported Annually: 17.6 million (1997)

<http://www.cdc.gov/nchs/fastats/copd.htm>

### **Emphysema**

(All figures are for U.S.)

Two percent of men 18 years of age and over had been told they had emphysema compared with 1% of women in this same group.

There are over 16,700 deaths from Emphysema in the United States each year (2000)

Over 1 million Americans have Emphysema (1996)

Emphysema rates are highest for Males ages 65 years and over (1996)

More people in the Midwest have Emphysema than any other region in the country (1996)

<http://www.cdc.gov/nchs/fastats/emphsema.htm>