

Provider News

A Newsletter for Shasta County Clinicians

Winter 2015

Shasta County Health and Human Services Agency - Public Health

Updated ordinance helps protect the public from danger of exposure to e-cigarette vapor

Due to the health risks of electronic smoking devices, the Shasta County Board of Supervisors recently amended its Smoking in Workplaces and Enclosed Places ordinance to prohibit the use of electronic cigarettes in enclosed public places and all enclosed places of employment. The ordinance now also prohibits the sale of these devices in vending machines.

Electronic smoking devices produce a cloud of ultrafine particles containing nicotine and other dangerous substances to which users and bystanders are exposed. Studies have shown that the aerosol emissions and cartridge contents include carcinogens and heavy metals (e.g. formaldehyde, acetaldehyde, lead), and volatile organic chemicals that reach deep into the lungs (e.g. xylene, acrolein, toluene). Young children have been poisoned by ingesting the fluid from electronic smoking devices.

The CDC reports that between 2011 and 2013, the use of electronic smoking devices by never-smoking middle and high school students more



CT scan of normal lungs



CT scan of fatty pneumonia after seven months of using e-cigs

than tripled.

Products other than electronic smoking devices have been approved by the FDA for smoking cessation. Please encourage your patients to pursue one of these FDA-approved alternatives if they wish to quit smoking, not e-cigs.

Ebola preparation continues in Shasta County

Shasta County Public Health has been working diligently in partnership with regional hospitals to prepare for the unlikely event that a local case of Ebola arises. Some of these strategies include:

- Shasta County Public Health Laboratory is available to go to all five regional hospitals to package and ship specimens to the Centers for Disease Control (CDC), should it be necessary.
- Public Health's regional epidemiologist is available to answer general questions regarding Ebola Virus Disease (EVD) for our catchment area county partners.
- We routinely update our Hospital Preparedness Partners with current Ebola information, and have connected with area institutions that regularly send travelers to Africa.
- Our website is frequently updated with current Ebola information under "Current Health Concerns."
- We are participating in many Ebola teleconferences to stay abreast of current information.

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Marijuana has numerous adverse health effects

Marijuana is the most common illicit drug used in the United States. After a period of decline, its use has been increasing among young people since 2007. This corresponds with a diminishing perception of the drug's risks that may be associated with increased public debate over the drug's legal status. Here is a summary of the physical, mental and social health impacts of marijuana from a public health perspective. Consider using these talking points with your patients and contacts.

Physical health effects

Marijuana's short-term health effects include slowed reaction time, lack of coordination, altered attention and perception, decreased balance, dizziness, drowsiness, decreased judgment and decision-making, and impulse control issues. This can make driving or other complex tasks dangerous. Some people experience abnormal heart rhythms or increased blood pressure, especially those predisposed to heart disease. Long-term smoking of marijuana increases the risks of lung problems.

Numerous studies show that youth who are heavy users have abnormal changes in their brain structure. Adults who regularly use exhibit decreased brain volume, especially in the hippocampus and amygdala. Marijuana use is associated with adverse reproductive outcomes, including lower sperm count and decreased fertility. Use in pregnancy increases the risk for stillborn births, and babies born to mothers who used marijuana during pregnancy may have tremors, high pitched cries and decreased responses to stimuli.

As a group, children exposed to marijuana in utero exhibit lower school performance and memory abilities than children not exposed. They may also have decreased attentiveness and problem-solving skills.

Mental health effects of marijuana

Marijuana users who ingest high doses may experience acute toxic psychosis, including hallucinations, delusions, and a loss of sense of personal identity. Marijuana can unmask underlying mental illness such as anxiety disorders, personality disorders, schizophrenia or other psychosis, panic attacks, and depression. Early initiation and regular heavy use is also associated with an increased risk of bipolar mood disorder and with psychotic symptoms and disorders in later life.

Social health effects of marijuana

While some argue that using marijuana is a personal choice, there are community impacts when marijuana use is seen as acceptable within a community. The more acceptable and available it is, the more young people are more likely to use it. In Shasta County in 2010-11 (most recent available), 80.9% of 11th graders reported that marijuana is "very easy" or "fairly easy" to obtain. 30% of 9th graders and 45% of 11th graders reported they had tried marijuana at least once.

Users may have trouble sustaining or shifting attention and difficulty registering, organizing and using information, especially complex information. This can lead to decreased employability and lower

average incomes among early onset users. Several studies have linked workers' marijuana use with increased absences, tardiness, accidents, worker's compensation claims and job turnover.

Marijuana use can reduce motor skills, reaction time and judgment, leading to motor vehicle crashes. Columbia University found marijuana in the blood of 12% of drivers who died in car crashes in 2010, an increase from 4% in 1999. Marijuana is the most prevalent illegal drug detected in impaired drivers, fatally injured drivers and motor vehicle crash victims.

Addiction risk

When quitting marijuana, chronic users may experience withdrawal symptoms that are generally mild compared to withdrawal symptoms from some other drugs of abuse, and typically include irritability, agitation, insomnia, restlessness, anxiety, nausea, and/or cramping. 17% of regular users who started in their early teens become addicted. Half of Shasta County 11th graders who said they used marijuana stated they were 10-14 years old when they started using.

Healthcare providers have enormous influence in our community and can help raise awareness about the health risks of using marijuana. For more information about what you can do, contact Wendy Millis, Community Education Specialist at wmillis@co.shasta.ca.us or 245-6858 or Andrew Deckert, MD, MPH, Health Officer, at adeckert@co.shasta.ca.us or 225-5594.

Many resources available for Shasta County residents who need mental health services

If you are wondering if a patient should be referred to Shasta County mental health services, here is what you need to know before calling the ACCESS line at 225-5252 to talk to staff about a triage.

Shasta County Mental Health serves adults with a serious mental illness that significantly impairs their lives, including housing, employment or relationships. We also serve youth with serious emotional disturbances that cause problems with school, forming relationships and reaching developmental milestones. We can serve anyone experiencing a severe mental health crisis, but for ongoing services, our primary clientele are those on Medi-Cal.

If you are treating someone who may qualify, they can call or come in and talk to the ACCESS team at any time. The team is recovery-focused and will discuss available options. If the client doesn't qualify for County services, the ACCESS Team will try to connect them with other community resources. The County provides these services:

- Adult Services: Help for adults

who have severe and persistent mental health issues. Our treatment planning team includes psychiatrists, nurses, case managers, clinicians and peer support.

- Crisis Residential and Recovery Center: A voluntary residential facility that provides people with support during a mental health crisis. Clients stabilize here and develop a plan for their future.
- Alcohol and Drug Services: Available to adults and youth struggling with addiction.

To start services, clients can walk in 8 a.m. - 3 p.m. Monday through Friday. Services are first come-first serve, so there may be a wait. Providers can call ahead to see what the best route is for the client. Physicians can call for a consult with a psychiatrist if needed.

If you have a client who solely needs counseling or someone to talk to, you can contact Beacon Health Strategies at (855) 765-9703. Beacon provides care for more moderate mental health issues.

or water. It is only through direct contact with bodily fluids of a sick person (e.g. diarrhea, vomit, blood) and parenteral exposure to contaminated objects like needles.

Rule allows for safe disposal of medications

Manufacturers, distributors, pharmacies, hospitals and clinics with an on-site pharmacy, narcotic treatment programs, long-term care facilities and other authorized collectors can now be drop-off sites for unused prescription drugs, including opiates. The U.S. Drug Enforcement Administration's rule is available at www.federalregister.gov/a/2014-20926. The Act authorized DEA to develop and implement regulations that outline methods to transfer unused or unwanted pharmaceutical controlled substances to authorized collectors for disposal. Much opiate abuse medication comes from a social source (i.e. is given, taken/stolen, bought from family, friends or acquaintances rather than directly prescribed).

Many women of reproductive age prescribed opioids

CDC researchers found that during 2008–2012, on average, 28% of women aged 15-44 years with private health insurance and 39% of women enrolled in Medicaid filled a prescription written by a healthcare provider for an opioid medication. Read more here: www.cdc.gov/pregnancy/meds/treatingfortwo/features/opioid.html.

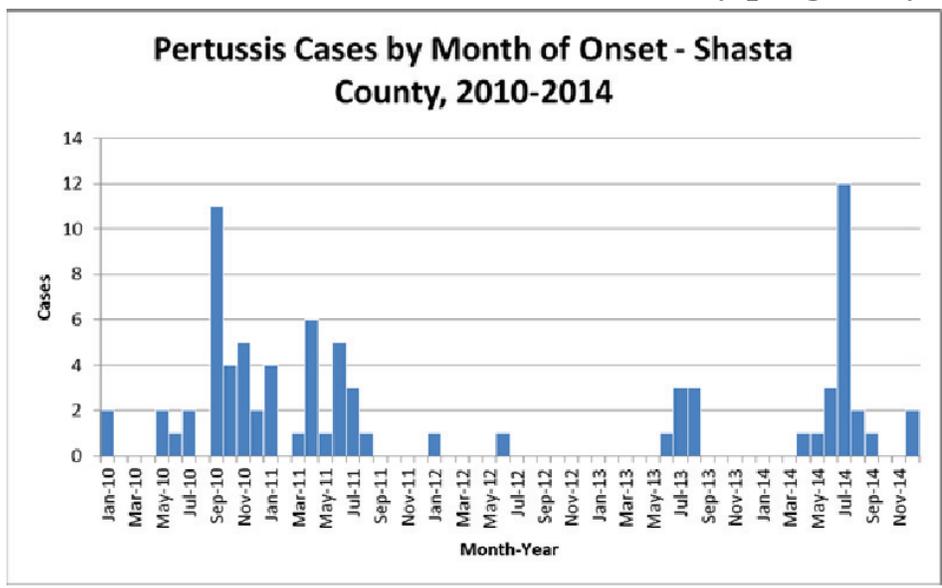
Ebola... *Continued from page 1*

- Because flu and Ebola symptoms are similar, please assure your patients that Ebola is not spread through casual contact, air, food

Return Service Requested

In brief

Pertussis is on the rise: Vaccinate in every pregnancy



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Morbidity/Mortality Report Released: The 2012 Shasta County Morbidity/Mortality Report is included in this newsletter for your reference.