

People's Health

Outcomes • Planning • Evaluation



Know the facts: Chronic Lower Respiratory Disease Deaths

DID YOU KNOW?

- Chronic lower respiratory diseases (CLRD) include several chronic conditions of the respiratory tract such as chronic bronchitis, bronchiectasis, chronic obstructive pulmonary disease (COPD), emphysema and asthma.
- CLRD is the third leading cause of death in the United States.
- Exposure to smoking or environmental pollution are risk factors for symptoms from CLRD.
- In the United States, about 25 million people have asthma.
- The annual economic cost for asthma alone in the United States is more than \$81.9 billion.
- In 2014, 15.7 million Americans had been diagnosed with COPD.
- In the United States, as many as 8 out of 10 COPD deaths can be attributed to smoking.
- In 2014, there were 6.9 million COPD-related ER visits in the United States.

WHERE WE WERE:

In Shasta County, there were 70.0 CLRD deaths per 100,000 population from 1999-01 (age adjusted 3-year average). The Shasta County 2001-03 CLRD hospitalization rate was 327.0 per 100,000 (age adjusted 3-year average). In Shasta County there were 701.3 CLRD emergency room visits from 2005-07 per 100,000 (age adjusted 3-year average).

WHERE WE ARE:

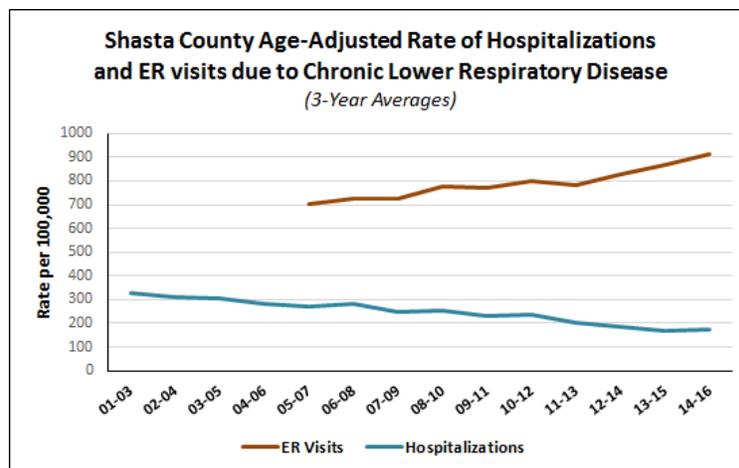
In Shasta County, there were 65.4 CLRD deaths per 100,000 population from 2014-16 (age adjusted 3-year average). From 2014-16, the CLRD hospitalization rate for Shasta County was 172.6 per 100,000 population (age adjusted 3-year average). In Shasta County there were 913.9 CLRD emergency room visits from 2014-16 per 100,000 (age adjusted 3-year average).

WHERE WE ARE AIMING (HP 2020 GOAL):

None.

DEFINITION:

Death, hospitalization, and ER visit rates due to chronic lower respiratory disease (age adjusted deaths per 100,000 population) for Shasta County residents (CLRD deaths, hospitalizations, and ER visits include those due to emphysema, chronic bronchitis, asthma, and COPD) and other chronic airway obstruction; ICD-10 codes J40-J47; ICD-9 group numbers 490-496).



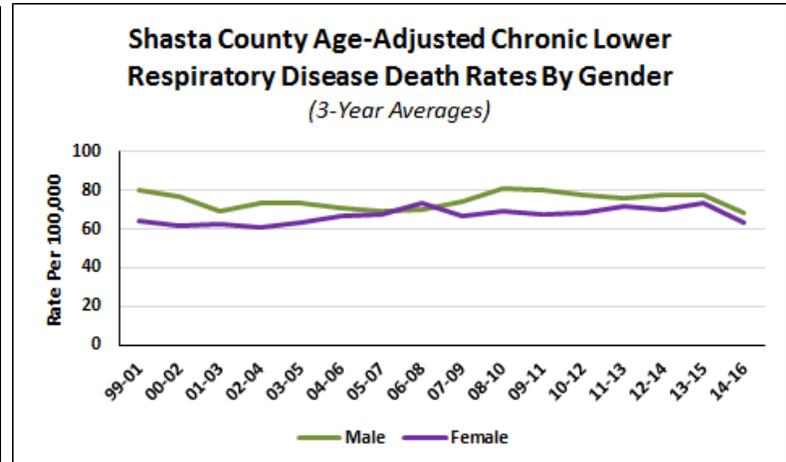
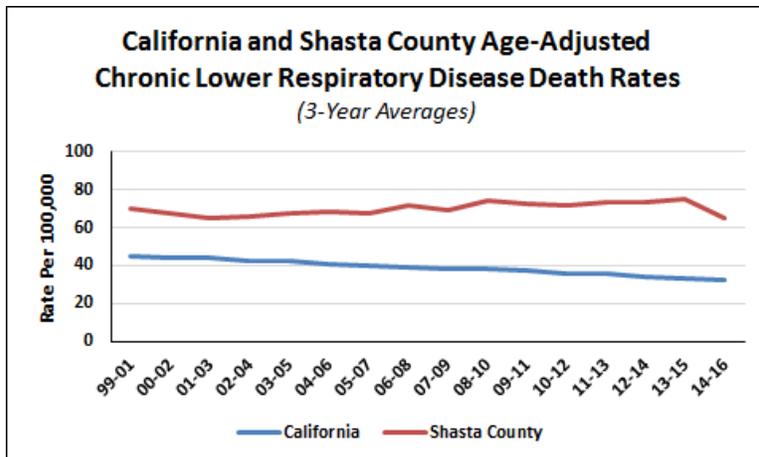
Contributing Staff: Miriam Rupp Last updated: April 2018.

Find more health information at www.shastahhsa.net. Click on "Health and Safety," then "Current Health Concerns."

Questions? Email shastahealthdata@co.shasta.ca.us

KEY POINTS:

- The Shasta County CLRD death rates between 1999-2001 and 2014-2016 are consistently higher than the California rates, see graph to left below.
- Unlike the death rates for California which show a steady decline over the years (from 45.3 in 1999-01 to 32.6 in 2014-16), the rates for Shasta County stayed relatively flat overall.
- Shasta County CLRD hospitalizations have decreased 47% from 327.0 in 2001-03 to 172.6 in 2014-16.
- Shasta County CLRD ER visits have increased by 23% from 701.3 in 2005-07 to 913.9 in 2014-16.
- Males in Shasta County, on average, have a higher death rates from CLRD than females, see graph to right below.



PRIMARY PREVENTION ACTIVITIES:

- Prevent initiation of cigarette smoking and vaping, especially among adolescents and young adults.
- Reduce risk factors, primarily smoking and repeated exposure to harsh chemicals or fumes, air pollution or other irritants.
- Encourage and facilitate stopping smoking and vaping at all ages.
- Reduce presence of environmental tobacco smoke and vape exhale, especially in homes and cars with children.
- Educate health care professionals and asthma patients about effective asthma prevention and management strategies, including exposure to smoke and other irritants as a trigger.

From the Desk of Andrew Deckert, MD, MPH

*Shasta County Public
Health Officer*



Chronic lower respiratory disease includes conditions such as chronic bronchitis, emphysema, asthma and other obstructive pulmonary diseases. These conditions comprise major health problems with a significant burden in terms of costs, illness and death. Smoking and environmental pollutants have a major role in their development and their prevention requires the control of these risk factors.

To your health!