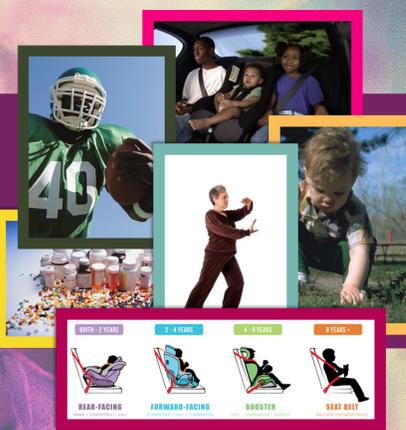


INJURY PREVENTION SERVICE



CREATING AN INJURY-FREE OKLAHOMA THROUGH PROGRAMS, POLICIES, AND PARTNERSHIPS



IPS INVESTIGATES: VAPING-RELATED LUNG INJURIES

The Oklahoma State Department of Health, led by the Injury Prevention Service, is participating in a national investigation of e-cigarette, or vaping, product use associated lung injury (EVALI). Nationally, nearly 1,900 confirmed or probable cases have been reported. Thirty-seven deaths have been confirmed in 24 states. Oklahoma has announced four confirmed cases, but no deaths associated with EVALI to date. Case status is based on standardized, national case definitions and cases are determined using a combination of medical record reviews and patient interviews.

Symptoms of EVALI include shortness of breath, fever, cough, chest pain, vomiting, abdominal pain, and diarrhea. Symptoms have resulted in hospitalizations lasting from days to weeks, with some patients admitted to intensive care units. A lung infection does not appear to be causing the symptoms. No one compound or ingredient has emerged as the cause of these illnesses to date; and it may be that there is more than one cause of this outbreak. Many different substances and product sources are still under investigation.

What the Oklahoma State Department of Health recommends:

- Consider refraining from use of **all** e-cigarette, or vaping, products.
- Youth, young adults, and pregnant women should not use e-cigarette, or vaping, products.
- If you are an adult who used e-cigarettes with nicotine to quit smoking cigarettes, do not return to smoking cigarettes.
- People experiencing lung symptoms after vaping should seek medical care and avoid e-cigarette, or vaping, product use.
- **Health care providers** should report cases of severe lung injury of unclear etiology in patients with a history of e-cigarette use/vaping to the Injury Prevention Service:
 - Call 405-271-3430, 8am-5pm, M-F
 - Fax 405-271-2799
 - E-mail injury@health.ok.gov

OVERDOSE DATA TO ACTION

The IPS was recently awarded nearly \$4.2 million annually for three years to continue statewide drug overdose prevention efforts. The Overdose Data to Action funding from the CDC will be used to support the collection of high quality, complete, and timely data on overdoses. Those data will be used to inform prevention and response efforts. For more information on drug overdose prevention, visit poison.health.ok.gov.

CHILDHOOD CONCUSSION PREVENTION

Oklahoma law requires school districts and youth sports organizations to have certain concussion-related policies and procedures in place to protect and support young athletes and to provide information to coaches, parents, athletes, and officials. The OSDH is responsible for maintaining online resources to assist in the development of these policies and procedures.

In response, the IPS has formed a coalition of stakeholders and experts to support efforts related to concussion prevention, recognition, and management. In November 2018, the IPS initiated a policy evaluation project and requested copies of concussion policies from every school district in Oklahoma for confidential review. Below are highlights from the evaluation.

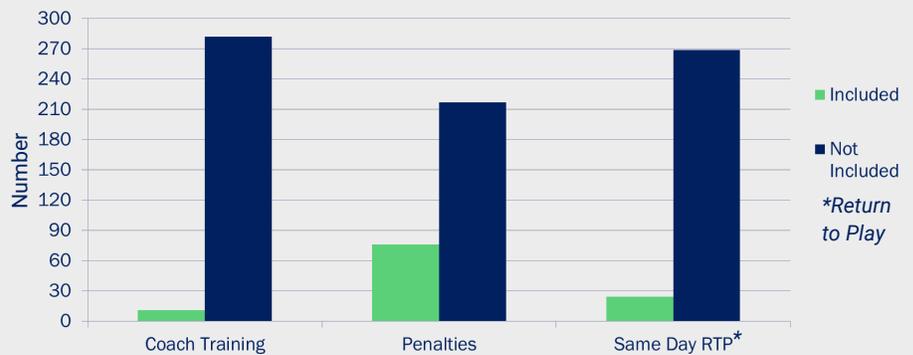
Summary of findings

- Contacted: 543 districts
- Responded: 319 districts
- Response rate: 59%
- Documents received: 293
- Districts with no policy: 26
- Districts with policy that met all requirements of state law: 1

Materials being developed

- Model concussion policy that can be adopted by school districts and youth sports organizations
- Updated guidance for return to play and return to learn processes after concussion
- New concussion fact sheets for parents, athletes, and coaches
- Updated IPS website content to provide easy access to new concussion materials

Most frequently missing policy components required by law



The most commonly missing policy components required by Oklahoma law were: annual coach training, penalties for not removing an athlete from play upon a suspected concussion, and specifically prohibiting same day return to play. There were 202 policies that included the requirement for written clearance from a health care provider to return to play, but did not specifically prohibit same day return to play without that clearance as detailed in the 2016 update to the law.

To learn more about childhood concussion prevention efforts in the IPS, including the Childhood Concussion Coalition: <http://concussion.health.ok.gov> | concussion@health.ok.gov | 405.271.3430

NEW OKVDRS REPORTS

The Oklahoma Violent Death Reporting System (OKVDRS) links data from multiple sources to track all violent deaths in our state. The data collected through the OKVDRS are used to guide violence prevention.

The most common type of violent death in Oklahoma is suicide. From 2013 to 2017, 3,700 Oklahomans died by suicide. In 2017, Oklahoma had the 13th highest suicide rate in the U.S. The most recent data have been published in regional fact sheets, and a statewide brief report, on our website: okvdrs.health.ok.gov.

MEET OUR TEAM



Elizabeth Kruger is an Epidemiologist who has spent the majority of her public health career with the IPS. Elizabeth brings more than two decades of epidemiology experience to her current work analyzing Oklahoma's prescription drug monitoring program (PDMP) data. Part of Elizabeth's work includes linking PDMP data with health outcome data to examine prescribing histories and risk factors for drug overdose.

Working with huge data systems is Elizabeth's favorite part of being in the IPS. It gives her the opportunity - and challenge - to partake in mining big population-level data and translating that data into reports for stakeholders.