Baby & Me Program: Advancing Into Year Number Three

There are currently 10 Community Health Centers (CHCs) participating in the Baby & Me Tobacco Free Program, including Aaron E. Henry Community Health Services Center, Central Mississippi Health Services, Claiborne County Family Health Center, Coastal Family Health Center, Family Health Center, G. A. Carmichael Family Health Center, Greater Meridian Health Clinic, Jackson-Hinds Comprehensive Health Center, Jefferson Comprehensive Health Center, and Southeast Mississippi Rural Health Initiative. Each CHC recently received new Baby & Me Program promotional materials, supplies and equipment. New individualized brochures and posters are being developed and readied for printing. CHCs with other B&M needs are encouraged to let the CHCAMS staff know what those needs are so they may be addressed.

The 2019 CHCAMS Annual Conference Tobacco Cessation Workshop proved to be very
informational, prompting lively discussion among participants. Seven CHCs were represented in the training. In addition, one of the state’s three Managed Care Organizations (MCO), Molina, was also present. Molina shared that discussions are ongoing with the 3 MCOs as to how they can become involved with the Baby & Me Program in Mississippi. This is exciting news, given ongoing efforts by CHCAMS and the Mississippi State Department of Health to encourage MCO involvement.

Presenters were from the Tennessee B&M Program and shared their programmatic data which points to the overall success of the program in that state. When Tennessee’s data and Mississippi’s data are compared, it’s clear to see that both states are experiencing reductions in pregnancy smoking rates, reductions in low birth weight outcomes, and a significant return on investments.

As the Baby & Me Program moves forward through its third year, the hope is for more CHCs to come onboard and participate, to see more community integration, more involvement with Medicaid and MCOs, and to see the program expand statewide so we can build a sustainable reality. If your CHC is interested in joining this winning team for healthy babies and expectant moms, contact Maria Morris at 601-981-1817 for more information.

Annual Women’s Conference
Saturday, October 5th

In an effort to increase awareness of the impact of tobacco and nicotine usage on women of child-bearing years, and their offspring, CHCAMS staff has partnered with United Health Care and the Mississippi Southern First Ecclesiastical Jurisdiction’s Women’s Department of District #15 to sponsor and present at the 2019 District #15 Annual Women’s Conference. Women throughout the District will come together to discuss issues relative to women’s health. Baby & Me staff will provide a workshop focused on tobacco prevention in women of child-bearing age and the latest facts related to second-hand and third-hand effects of cigarette smoke. The dangers of E-cigarettes, vaping and other emerging products will also be discussed.

United Health Care will launch and promote the Heart Smart Sisters Project, a community and faith-based thirty-day initiative designed to educate and promote healthier lifestyles which will result in reduced heart disease among women of color.

The Women’s Conference will be held on Saturday, October 5, 2019, at Eagle Ridge Conference Center, 1500 Raymond/Bolton Road, Raymond, MS 39154. A registration fee of $35.00 will also cover a continental breakfast and lunch. Those interested in attending should contact Missionary Iris Barnes at 601-573-9982.
Vaping Claims Its First Known Victim

The Philly Voice reports that Illinois Department of Public Health (IDPH) confirmed on Friday, August 23, the first death tied to vaping in the United States. The patient’s name, age, gender, and city of residency have not been released. The individual was hospitalized with severe respiratory illness after using e-cigarettes, IDPH officials said.

Doctors nationwide have been seeing more patients with severe lung disease tied to vaping. The State of Illinois reported 22 cases during the week of August 18 through 24, with patients ranging in age from 17 to 38. A team from the U. S. Centers for Disease Control and Prevention (CDC) is working with IDPH officials to investigate another possible 11 cases. “The severity of illness people experience is alarming, and we must get the word out that using e-cigarettes and vaping can be dangerous,” Illinois Public Health Department Director Dr. Ngozi Ezike said in a statement.

New Atlas reports that while there seems to be an ongoing outbreak of vaping-related illnesses, no specific e-cigarette product has been found linked to every case reported. The CDC issued a report for the same August time period announcing they are involved in 193 ongoing cases of negative health outcomes due to vaping in 22 states.

Reported symptoms of vaping-related severe lung disease include difficulty breathing, shortness of breath and chest pain. Fatigue, diarrhea, and vomiting have also been reported.

Dr. Robert R. Redfield, CDC Director, issued the following statement regarding the death of the Illinois resident: “This tragic death in Illinois reinforces the serious risks associated with e-cigarette products. Vaping exposes users to many different substances for which we have little information about related harms, including flavorings, nicotine, cannabinoids, and solvents. The CDC has been warning about the identified and potential dangers of e-cigarettes and vaping since these devices first appeared. E-cigarettes are not safe for youth, young adults, pregnant women, or adults who do not currently use tobacco products.”

E-Cigarettes, Seizures, & the Safety Reporting Portal

The Federal Drug Administration (FDA) continues to receive reports of e-cigarette users having seizures following e-cigarette usage. Since initially alerting the public on April 3 to reports of some e-cigarette users experiencing seizures, the FDA has since received 118 new reports of similar incidents. In total, including those posted in April,
the agency has received 127 reports of neurological events following e-cigarette use that occurred between 2010 and 2019. The numbers do not necessarily indicate an increase in frequency or prevalence of such incidents.

At this time, the FDA has not been able to identify any specific brand or tobacco product, or identifiable product problem, associated with these incidents. However, the agency remains concerned about the possibility of an association between e-cigarette use and seizures or other similar medical conditions and encourages the public, including e-cigarette users and medical professionals, to provide as much information as possible when reporting health or safety problems stemming from tobacco products through the [online Safety Reporting Portal](Link to SRP).

Healthcare providers in particular are reminded to ask patients about e-cigarette or vaping usage, particularly when providing care following a neurological event. Healthcare providers are also encouraged to help patients report any adverse experiences from tobacco use through the SRP, such as referring patients to the website, making relevant medical records available, or submitting a report on a patient’s behalf. The FDA will post full reports (PDF – 23MB), which are redacted in accordance with applicable laws, as a reference for those reporting seizures or other neurological symptoms following e-cigarette use. Details about adverse experiences are important in helping the FDA identify concerning trends and clear patterns or causes for particular incidents. When reporting an adverse experience, please be sure to include as much information as possible about the incident:

- Was patient affected a user or non-user?
- Device manufacturer’s name
- Device brand name, model, serial number & e-liquid
- Where was device/e-liquid purchased?
- Was device or e-liquid modified in any way or did the device malfunction?
- Use or exposure to other tobacco products, toxins, medications, supplements, or substances of abuse around the same time?
- Other symptoms or warnings before the adverse experience, such as nausea, vomiting, change in user’s behavior, alertness, vision or hearing?
- Details about pattern of product use or exposure before the adverse experience (duration, amount, intensity of e-cigarette use, time between use and adverse experience)?
- Health effects to specific areas of the body with symptom progression, duration of symptoms, course of recovery, medical care, testing, decisions rendered?
- Levels of nicotine, cotinine, other?
byproducts in blood or urine
- Underlying health conditions and health history, history of seizures in early life or with blood relatives
- Product use after adverse event
- Any reporting activity conducted

Safety Reporting Portal users can upload relevant medical records, photos, or other files that include or supplement this information. Providing follow-up information weeks, months, or years later that are linked to the initial report, giving final outcomes, can also be extremely useful to the FDA and peers using the SRP.

Teen Vaping Tied To Marijuana Use

Reuters Health reports a recent research review study suggests adolescents and young adults who have smoked e-cigarettes are more than three times more likely to move on to marijuana than youths who never tried vaping. Researchers examined data from 21 previously published studies with more than 128,000 participants ages 10 to 24. Overall, young people who used e-cigarettes were 3.5 times more likely to use marijuana, the analysis found, with teen vapers most at risk. Among adolescents ages 12 to 17, e-cigarette users were 4.3 times more likely to use marijuana. Among young adults ages 18 to 24, vapers were 2.3 times more likely to use marijuana.

“E-cigarettes are often considered benign or harmless by youth and their parents/families,” said Dr. Nicholas Chadi, lead author of the study and assistant professor of pediatrics at Sainte-Justine University Hospital at the University of Montreal in Canada. “What this study suggest is that e-cigarettes should be considered harmful, in a similar way as other substances like alcohol and tobacco, which have also been associated with increased marijuana use,” Chadi said by email.

The rise of vaping is problematic in part because most people with substance use disorders develop these problems before they turn 18, researches not in JAMA Pediatrics. Adolescents whose brains are still developing are more vulnerable than older adults to the addictive properties of nicotine, alcohol, marijuana, and other drugs.

Office of Tobacco Control 2018 Annual Report Released

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The Office of Tobacco Control, Mississippi State Department of Health, has released its 2018 Annual Report. The report reveals the collective successes OTC, its partners and collaborators have accomplished during fiscal year 2018. It is the goal of OTC to create opportunities for vulnerable adult populations to access cessation treatment services, to empower at-risk youth to reject tobacco, and to eradicate threats from new and emerging tobacco products like e-cigarettes. The OTC has completed a strategic plan for the next five years, one that will guide their efforts to build a vibrant community free from tobacco-related diseases. To have your own copy of the OTC Annual Report for 2018, click on the following link:

https://msdh.ms.gov/msdhsite/_static/resources/8217.pdf

Mississippi’s Tobacco Epidemic

Mississippi is experiencing a tobacco epidemic which includes the use of every tobacco product currently on the market. From hookah bars, electronic cigarette devices, chewing tobacco, to regular cigarettes, it seems people are determined to hold on to their tobacco, no matter what the results are. Cigarette smoking remains the leading cause of preventable death and disability in Mississippi and across our nation. While there has been a decline in the number of people smoking nationally, over 16 million Americans have at least one disease caused by smoking. Direct medical costs amount to approximately $170 billion that could be saved every year if we could keep teens from starting and get adult smokers to stop smoking. Statistics from 2017 tobacco use surveys revealed 19.5% of U.S. high school youth reported currently using some type of tobacco-related product, including e-cigarettes. Of that total, 8.8% youth reported that they were currently smoking cigarettes. The percentage of adults who said they smoked cigarettes was 22.2%, reflecting the fact that teenage tobacco usage may soon surpass that of adult Americans. Marketing is playing a significant role in the growing teenage epidemic, with the tobacco industry employing every means at its disposal to lure younger users.

Adult deaths from smoking-related illnesses number between five and six thousand deaths per year. This is a fact that has not escaped the average tobacco user. The term “cancer stick” was in usage 40 years ago and if someone approached you with that term to “bum” a cigarette, you knew exactly what they were
asking for. What the term truly reveals is that users do understand the long-term health risks associated with smoking: smoking is a leading contributor to the spread of cancers, among other illnesses, but in spite of knowing the risks, many continue to smoke.

While Mississippi has made great strides in promoting the adoption of local comprehensive smoke-free policies throughout the state, secondhand smoke continues to be a problem since there is no safe level of exposure to it. Secondhand smoke causes stroke, lung cancer, and coronary heart disease in adults who never willfully use tobacco products. If you have ever lived in a home, had to travel in a motor vehicle, or worked alongside a smoker, you’ve been exposed to secondhand smoke. The dangers of secondhand smoke have pressed our state to act to remove nonsmokers from exposure to these risks. Currently, approximately one-third of our state is protected by comprehensive policies at city, county and state levels that prohibit smoking in all indoor areas of workplaces, restaurants, and bars. Upon request, Mississippi provides research, data, analysis and scientific consultation to communities, multi-unit housing operators, hospitals, businesses, colleges and universities who desire to protect the public from secondhand smoke.

Mississippi is one of 50 states that receives funding and technical support from the Centers for Disease Control and Prevention to support comprehensive tobacco control efforts and telephone quit lines. The Office on Smoking and Health (OSH) is the lead federal agency for comprehensive tobacco prevention and control. For decades, OSH has led public health efforts to prevent young people from using tobacco and to help all tobacco users to quit.

**VA Hospitals Ban All Tobacco Use**

All Department of Veterans Affairs health care facilities will be completely smoke-free by October of 2019. The ban will include all forms of tobacco use, including e-cigarettes and vaping, and will include all facility grounds, VA officials announced in a press release dated Monday, June 10, 2019. This policy change ends the long-standing use of designated smoking areas or shelters at VA Hospitals. The Veterans Administration made the move based upon growing evidence that smoking and exposure to secondhand and third hand smoke creates significant medical risks, risks to safety, and risks to direct patient care which are inconsistent with acceptable medical interventions. These changes apply to everyone at VA facilities, including patients, visitors, volunteers, contractors, vendors, and staff.

The only exception will be made where VA facilities are co-located with a Defense Department hospital. The new VA policy will be enforced only on VA-controlled grounds. Some DOD hospitals may continue to allow smoking in designated areas where grounds are under their control.
Webinar: Tobacco in the Dental Setting

With the use of e-cigarettes and vaping at epidemic levels for teens and young adults, the Council on Advocacy for Access and Prevention will host an ADA C.E.R.P (Continuing Education Recognition Program) Webinar on Friday, June 14, 2019, from 10:00 a.m. until 11:00 a.m. (CST), entitled, “E-Cigarettes: What are the facts behind all that vapor?” The purpose of webinar is to inform dental providers about the products, trends of use, and health harms and benefits of e-cigarette usage. Additional information will be provided about the effects of e-cigarette flavors on oral health. Participants will also learn about efforts to address the harms that e-cigarettes products pose to young people and a first of its kind e-cigarette quit program to address the significant rise in youth vaping.

Brian King will be the instructor for the webinar. Dr. King (PhD, MPH) is the Deputy Director for Research Translation in the CDC’s Office on Smoking and Health. Dr. King has worked for nearly 15 years to provide scientific evidence to inform tobacco control policy and to communicate this information to stakeholders. He has authored more than 150 scientific articles on tobacco control. He was a contributing author to the 50th Anniversary Surgeon General’s Report on Smoking and Health, the lead author of CDC’s 2014 “Best Practices for Comprehensive Tobacco Control Programs” report, and senior associate editor of the 2016 Surgeon General’s Report on E-cigarette Use Among Youth and Young adults.

The link to register for the webinar:
https://cc.readytalk.com/registration/#/?meeting=2qh2tj3mw5wr&campaign=qpakctdan4vj

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