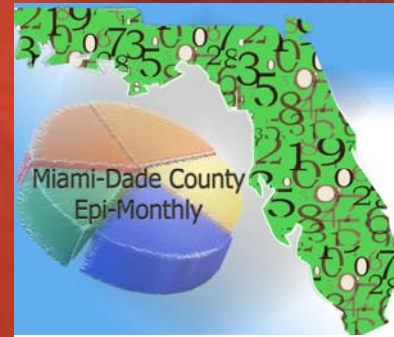


Epi Monthly Report

Substance Abuse Among Youths in Miami-Dade County

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Background

According to the 2003 Middle School Youth Risk Behavior Survey, by the time students reached the 8th grade, 40.7% had tried alcohol, 9.3% tried marijuana, 4.2% tried cocaine and 12.6% had tried inhalants. The 2005 National Youth Risk Behavior Survey of 9th to 12th graders in Miami-Dade County found that within the past 30 days of the survey, 40.8% had at least 1 alcoholic beverage, 12.8% used marijuana, and 3.1% used some form of cocaine. Additionally, 25.1% of students had been offered or sold drugs at their school. The White House Office of National Drug Control Policy (ONDCP) issued a special report entitled "Hispanic Teens and Drugs" in 2007 that showed Hispanics used all types of drugs more than their White and African-American counterparts. Since Miami-Dade County has a 61% Hispanic population, this is another issue of concern.

Methods

The Miami-Dade County 2006 substance abuse data among youths 10-19 years old

was obtained from the following sources:

- 1) Emergency department (ED) chief complaint data from the Electronic Surveillance System for the Early Notification of Community Based Epidemics (ESSENCE)
- 2) Miami-Dade Fire Rescue 911 Call Center
- 3) Agency for Healthcare Administration (AHCA) hospital discharge data
- 4) Florida Department of Highway Safety and Motor Vehicles
- 5) Miami-Dade Juvenile Assessment Center -records of adolescent drug-related arrests SAS 9.1.3 was utilized for analysis.

Results

ESSENCE data

There were 431 ED reported visits due to drugs and/or alcohol. Among youth 10-19 years, females were responsible for 52.0% of the visits and males comprised 48.0%. Seasonality showed that 50% of the entire year's ED visits occurred during the 4 months of September through December. (Figure 1.1)

Within the age group of 10 to 19 year olds, the number of ED visits generally increased with age. Teens aged 10 to 13 accounted for less than 5% of the total visits whereas teens 14 to 16 had 39% and teens 17 to 19 had 56% of the visits, respectively. The percentage of substance abuse related ED visits by race/ethnicity is as follows: 46.4% for Hispanic, 35.7% for Whites and 10.4% for Blacks. However, the county's population is 61% Hispanic, 20% Black and 18% White. This means that Whites had more visits and Hispanics and Blacks had less visits than expected for the population. The majority (80.5%) ED of visits were drug related rather than alcohol related.

When comparing both age and race/ethnicity together, Hispanic teens aged 10 to 14 had the highest percentage (69.1%) of visits when compared to other races (Fig 1.2). Females were more likely to have visited the hospital compared to males among 10-14 years old for substance abuse (Fig 1.3).

911 Data

In 2006, there were 2,323 overdose related calls to 911 for all ages; 1,480 (63.7%) of these calls involved teens aged 10-19 years. In 2005, 59% and 33% of all suicide-related 911 calls involved drug overdose for females and males, respectively.

Hospital Discharge Data

In 2006, Miami-Dade County had 181 youths hospitalized due to intentional drug overdoses. For those hospitalized, the median length of stay was 1 day and there was an average cost of \$17,621.

DUI Data

From 2005-2007, there were 585 arrests for DUIs among youth under 21 years of ages. 84% were among males.

Juvenile Assessment Data

From 2005-2007, there were 5,278 drug and alcohol related charges among 10-17 years old. Half of the charges were marijuana related and 1/3 were cocaine related. Over 90% of the cases were among males.

Conclusions

Since females and Hispanics were significantly more likely to have visited the emergency department at a younger age than their counterparts, more attention should be placed on educating these target groups in both school and community settings. Also, more attention needs to be focus on prevention of drinking and driving among males.

Figure 1.1

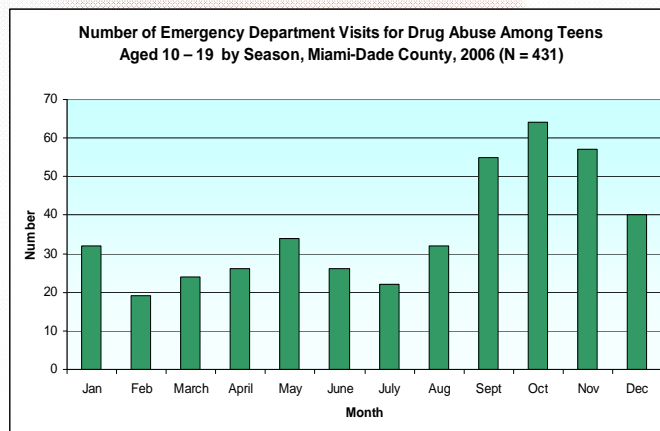


Figure 1.2

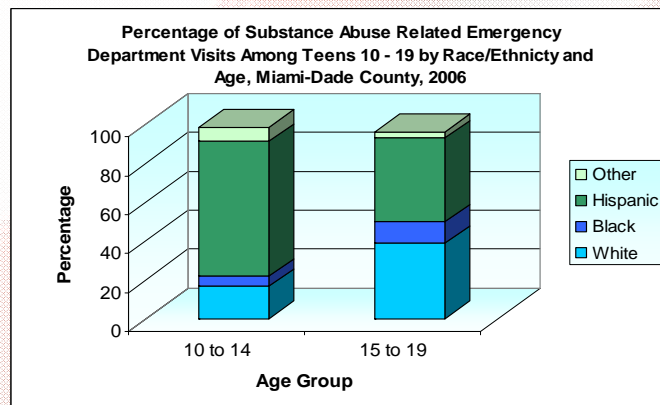
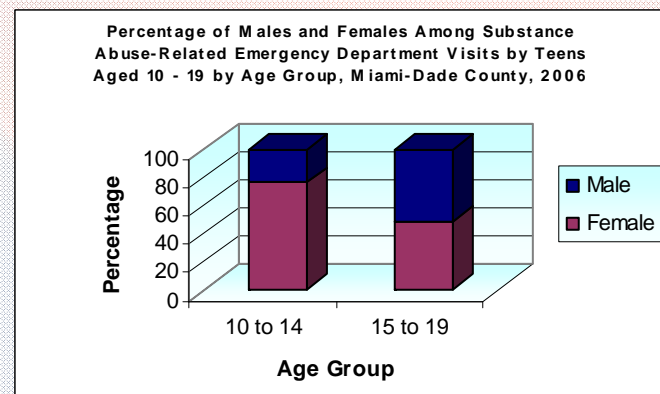
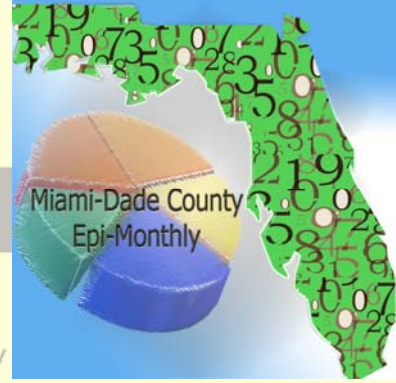


Figure 1.3



UV Safety



American Academy of Ophthalmology

The American Academy of Ophthalmology offers these tips to protect your eyes from the sun:

1. **Don't focus on color or darkness of sunglass lenses:** Select sunglasses that block UV rays. Don't be deceived by color or cost. The ability to block UV light is not dependent on the price tag.
2. **Check for 97-100% UV protection:** Make sure your sunglasses block 97 to 100 percent of UV rays and UV-B rays.
3. **Wear a hat:** In addition to your sunglasses, wear a broad-brimmed hat to protect your eyes.
4. **Don't rely on contact lenses:** Even if you wear contact lenses with UV protection, remember your sunglasses.
5. **Protect your eyes during peak sun times:** Sunglasses should be worn whenever outside and it's especially important to wear sunglasses in the early afternoon and at higher altitudes, where UV light is more intense.

About the American Academy of Ophthalmology

The American Academy of Ophthalmology is the world's largest association of eye physicians and surgeons - Eye MDs - with more than 27,000 members worldwide. Visit the site for more information:

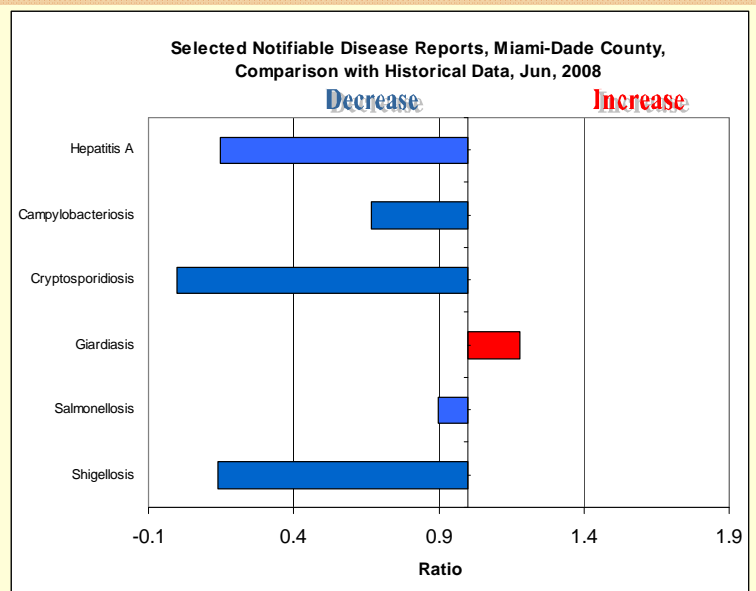
<http://www.aao.org>

TO REPORT ANY DISEASE AND FOR INFORMATION CALL:

Office of Epidemiology and Disease Control

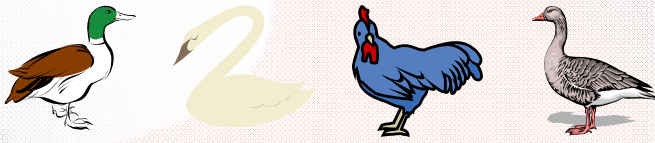
Childhood Lead Poisoning Prevention Program	305-470-6877
Hepatitis	305-470-5536
Other diseases and outbreaks	305-470-5660
HIV/AIDS Program	305-470-6999
STD Program	305-325-3242
Tuberculosis Program	305-324-2470
Special Immunization Program	786-845-0550

Selected Notifiable Disease Reports, June 2008

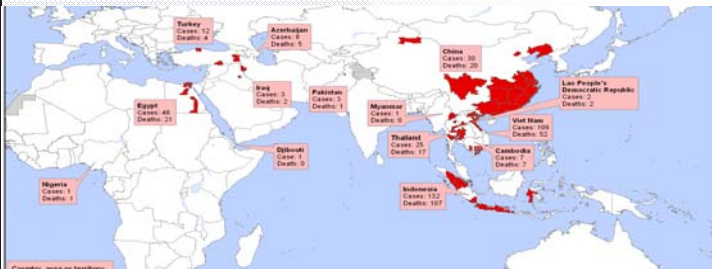


AVIAN FLU WATCH

Unless indicated, information is current as
of
June 30, 2008



- Since 2003, there have been 385 human cases of avian influenza (H5N1) confirmed by the World Health Organization (WHO). Of these, 243 cases have died. This means there is a 63% (243/385) fatality rate.
- **15 Countries with confirmed human cases** include Bangladesh, Cambodia, China, Djibouti, Indonesia, Thailand, Vietnam, Iraq, Azerbaijan, Egypt, Turkey, Nigeria, Pakistan, Myanmar, and Lao People's Democratic Republic .



- **No human cases of avian influenza (H5N1) have been reported in the United States.**
 - **H5N1 has been confirmed in birds in several other countries since 2003.** H5N1 has been documented in birds in more than 30 countries in Europe & Eurasia, South Asia, Africa, East Asia and the Pacific, and the Near East. For a list of these countries, visit the World Organization for Animal Health Web Site at :
http://www.oie.int/downld/AVIAN%20INFLUENZA/A_AI-Asia.htm.
 - **No restrictions on travel to affected countries have been imposed.** Travelers should avoid contact with live poultry and monitor their health for ten days after returning from an affected country.
- SOURCES: WHO, OIE, CDC

PARTICIPATE IN INFLUENZA SENTINEL PROVIDER SURVEILLANCE

The Miami-Dade County Health Department
NEEDS Influenza Sentinel Providers!!

Sentinel providers are key to the success of the Florida Department of Health's Influenza Surveillance System. Data reported by sentinel providers gives a picture of the influenza virus and ILI activity in the U.S. and Florida which can be used to guide prevention and control activities, vaccine strain selection, and patient care.

- Providers of any specialty, in any type of practice, are eligible to be sentinel providers.
- Most providers report that it takes **less than 30 minutes a week** to compile and report data on the total number of patients seen and the number of patients seen with influenza-like illness.
- Sentinel providers can submit specimens from a subset of patients to the state laboratory for virus isolation **free of charge**.

For more information, please contact **Erin O'Connell** at 305-470-5660.

About the Epi Monthly Report

The Epi Monthly Report is a publication of the Miami-Dade County Health Department, Office of Epidemiology and Disease Control, The publication serves a primary audience of physicians, nurses, and public health professionals. Articles published in the Epi Monthly Report may focus on quantitative research and analysis, program updates, field investigations, or provider education. For more information or to submit an article, contact Lizbeth Londoño at 305-470-6918.

Monthly Report
Selected Reportable Diseases/Conditions in Miami-Dade County,
June 2008

Diseases/Conditions	2008 this Month	2008 Year to Date	2007 Year to Date	2006 Year to Date	2005 Year to Date	2004 Year to Date
AIDS ^{*Provisional}	133	679	403	618	736	703
Campylobacteriosis	11	65	60	80	66	64
Ciguatera Poisoning	0	10	0	0	0	0
Cryptosporidiosis	0	7	14	8	12	7
Cyclosporiasis	0	4	0	0	0	0
Dengue Fever	0	1	1	1	0	3
<i>E. coli</i> , O157:H7	0	2	1	0	0	1
<i>E. coli</i> , Non-O157	0	0	0	0	0	0
Encephalitis (except WNV)	0	1	1	0	0	1
Encephalitis, West Nile Virus	0	0	0	0	0	0
Giardiasis, Acute	26	117	110	97	94	139
Hepatitis A	1	16	14	20	27	16
Hepatitis B	0	7	9	14	26	19
HIV ^{*Provisional}	176	864	691	559	764	858
Influenza A (H5)	0	0	0	0	0	0
Influenza Isolates	0	0	0	0	0	0
Influenza Novel Strain	0	0	0	0	0	0
Influenza, Pediatric Death	0	0	0	0	0	0
Lead Poisoning	17	73	78	75	79	141
Legionnaire's Disease	0	5	1	4	2	4
Leptospirosis	0	0	0	0	1	0
Lyme disease	1	2	0	0	0	1
Malaria	2	3	2	5	1	8
Measles	0	0	0	0	0	1
Meningitis (except aseptic)	0	3	5	10	7	5
Meningococcal Disease	2	6	4	8	5	11
Mumps	0	1	1	0	0	0
Pertussis	3	12	11	5	4	5
Rubella	0	1	0	0	0	0
Rubella, Congenital	0	0	0	0	0	0
Salmonellosis	46	190	146	240	199	166
Shigellosis	3	21	67	50	156	90
<i>Streptococcus pneumoniae</i> , Drug Resistant	9	64	53	59	27	45
Tetanus	0	0	0	0	0	0
Toxoplasmosis	0	0	1	0	0	1
Tuberculosis ^{*Provisional}	19	85	70	105	89	91
Typhoid Fever	0	0	0	2	2	1
<i>Vibrio cholera</i> Type O1	0	0	0	0	0	0
<i>Vibrio cholera</i> Non-O1	0	0	0	0	0	0
<i>Vibrio</i> , Other	0	0	0	0	0	0
West Nile Fever	0	0	0	0	0	0

* Data on AIDS are provisional at the county level and are subject to edit checks by state and federal agencies.

** Data on tuberculosis are provisional at the county level.