

**Medical Director's Report
Board of Health
December 2010**

New Data on Life Span

Data from the Center for Vital and Health Statistics from the U.S. Department of Health and Human Services indicates that for the entire population life expectancy is 77.7 years. Interestingly, for the Hispanic population, it's 80.6 and for the non-Hispanic White population, it's 78.1. For the non-Hispanic Black population, it's 72.9.

This is interesting due to the lower socio-economic status for the Hispanic population generally in contrast to the non-Hispanic White population. Yet, the Hispanic population has a longer life expectancy. There could be some data error that could be contributing to this, but the results are consistent with other studies showing an advantage for the Hispanic population.

For the non-Hispanic White population, if you are a male, 50% will live to the age of about 79 years. If you are a non-Hispanic White female, 50% will live to approximately 83 years. If you are a Hispanic female, 50% will live to approximately 88 years and if you are a Hispanic male, 50% will live to about 82 years. If you are a Black non-Hispanic male, 50% will live only to about 71 to 72 years and if you are a Black non-Hispanic female, 50% will live to about 80 years.

Presentation before Cornell University's Public Health Club

I participated in a presentation to approximately two dozen students at Cornell who were mostly undergraduates interested in public health careers and public health work. I co-presented with Theresa Lyczko, Sigrid Connors, and Liz Cameron, as we discussed public health delivery and our individual careers in public health, as well as fields of interest and challenges in public health. The presentation was approximately one hour and a quarter, with a very attentive audience who asked several questions in our question and answer period.

Cholera Outbreak – Haiti

Cholera is a water-borne and food-borne infection caused by a bacterium which causes severe diarrhea and resultant dehydration which can kill the individual through dehydration, electrolyte disturbance, and circulatory collapse. Treatment is largely rehydration.

The increases in Haiti remotely could be imported into this country through travelers, either victims of the Haitian health care situation or health care workers and support personnel returning to this country who have been working down there.

The Department of Health has put out an advisory in this regard.

Fatal Crashes in Drivers aged 16-17

Recent data indicates that the National rate for fatalities for drivers aged 16 or 17 declined 38% in the four years from 2004 to 2008. The rate in 2008 was 16.7 fatalities per 100,000. The variation between states ranged from 9.7 to 59.6. The rate in New York State in the year 2008 was 33 per 100,000 population in this age group. This was a decline from 65 in 2004 in New York State. Teen drivers have the highest motor vehicle crash risk of any age group with a resultant leading cause of death. It's thought that graduated driver licensing programs including extended learner periods, nighttime driving restrictions, and passenger restrictions have had an impact on improving the rate. The decline in the statistics from 2004 to 2008 isn't definitely known. It may have some roots in the decrease in number of vehicle miles traveled due to rising gasoline prices and adverse economic conditions, but it might also have some roots in delaying drivers' licenses for financial reasons.

Comment: Graduated driving permissions with restrictions initially when a license is obtained allows a teenage driver to gain experience with supervision and helps to cut down on the number of fatalities.

Update on Worldwide attempts to Eradicate Wild Polio Virus

In 2009, there were some wild-type polio virus outbreaks. Those appear to have been interrupted by efforts to treat and vaccinate. But, new importations have occurred in 2010 with the first importation into a WHO European region since that region was certified polio-free in 2002. These were cases in Tajikistan and 18 more cases in Kazakhstan, Russia and Turkmenistan.

There are four countries that have never interrupted wild-polio virus transmission and those are Afghanistan, India, Nigeria, and Pakistan. In addition, previously polio-free countries have had imported cases come in to them such as Angola, Chad, the Dominican Republic, and the Congo in Sudan.

Comment: Efforts to finish the eradication of polio require enough money, enough stability in the countries to allow the public health programs to operate, and the cooperation of the public.

Cigarette Smoking and Smokeless Tobacco use – the current situation

From the Behavioral Risk Factor Surveillance System, a 2009 report indicates that for New York State 19% of men and 16.8% of women continue to smoke cigarettes. For the same time period, 3.5% of men and 0.7% of women use smokeless tobacco. The highest rates were in Kentucky for cigarette smoking at 25.6% and for smokeless tobacco in Wyoming at 9.1%. The lowest rates were in Washington State at 15% for cigarette smoking and 1.3% for smokeless tobacco use.

The Healthy People 2010 target calls for cigarette smoking to be cut down to 12% and smokeless tobacco use to 0.4%. Clearly, New York hasn't made it.