

Union County Health Coalition

February 2011

Our Four Areas of Focus:

- Nutrition
- Exercise
- Smoking
- Teen Pregnancy

Join us at our monthly meetings on the last Thursday of each month at Methodist Hospital Union County at noon

Become a fan of Union County Health Council on Facebook





Lunch and Learn

“Healthy Heart”

(A program for women)

Free

February 16, 2011

12-1:00 p.m.

Union County Cooperative Extension Service

1938 U.S. Highway 60 W

Morganfield, KY

Please sign up by February 5, 2011

**Call the Union County Extension Office at 389-1400 to
reserve your spot.**

Sponsored by:

***Union County Health Coalition, Union County Methodist Hospital,
Green River District Health, Green River Regional Health Council,
Earle C. Clements Job Corp, and Union County Extension Service.***



Policy Guidance Document Regarding E-Cigarettes

The American Cancer Society Cancer Action Network, American Heart Association, American Lung Association and the Campaign for Tobacco-Free Kids are very concerned about the increase in the marketing and sales of electronic cigarettes or “e-cigarettes.” Our organizations strongly support the U.S. Food and Drug Administration’s assertion that the products should be regulated as drug-delivery devices and not as tobacco products. As litigation between FDA and two e-cigarette manufacturers works through the federal court process, the importation of e-cigarettes is prohibited although sales continue online and at kiosks and stores. In the meantime, our organizations are issuing this joint policy guidance document to assist field staff and others.

- Our organizations support legislation that would prohibit all sales of e-cigarettes until these products are approved by FDA. Bans on the sale of e-cigarettes should prohibit all sales and avoid including e-cigarettes in youth access laws while at the same time allowing sales to adults to continue.
- Our organizations support including e-cigarettes in smoke-free laws but such legislation must not imply e-cigarettes are tobacco products. Our organizations recommend that new smoke-free laws, or ordinances and amendments to existing smoke-free laws, be specific in defining e-cigarettes as different from tobacco products.
- At this time, our organizations do not support including e-cigarettes in tobacco tax statutes. If states consider taxes on e-cigarettes, they should be in a separate tax statute and not included with tobacco products.
- There is **no** scientific evidence that e-cigarettes can help smokers quit. The U.S. Public Health Service has found that the seven drugs approved by the U.S. Food and Drug Administration in combination with individual or group cessation counseling is the most effective way to help smokers quit. The health claims being made by e-cigarette companies are misleading and illegal under federal law.

E-cigarettes are battery-powered nicotine inhalation devices that claim to deliver nicotine to the user through a vaporized propylene glycol solution. E-cigarette manufacturers and retailers are making unproven health claims about their products – asserting that they are safe or safer than traditional cigarettes. Companies also claim that e-cigarettes can help people to quit smoking and in one egregious press release, an e-cigarette company claimed their products were recommended for pregnant women by physicians.

The U.S. Food and Drug Administration (FDA) conducted one limited study in July of 2009 and found that the products contained carcinogens and toxic chemicals, including the ingredients found in anti-freeze. A study conducted at Virginia Commonwealth University and published in February 2010 found that e-cigarettes deliver little or no nicotine to users¹. Additional research is needed to ascertain what is in these products, what effects they have on users and how they are being used. Until the products are found to be safe and effective, they should not be on the market.

For further information about this statement, please contact the following staff at the signing organizations:

American Cancer Society Cancer Action Network: Angela Jones, (202) 585-3202, angela.jones@cancer.org

American Heart Association: Carter Headrick, (303)731-5578, carter.headrick@heart.org

American Lung Association: Erika Sward, 202-785-3355, esward@lungusa.org

Campaign for Tobacco-Free Kids: Victoria Almquist, 202-296-5469, valmquist@tobaccofreekids.org

ⁱ Eissenberg, T, "Electronic nicotine delivery devices: ineffective nicotine delivery and craving suppression after acute administration," *Tobacco Control* 19:87-88, 2010

E-cigarettes and Smoke-free Policies

What are E-cigarettes and what do they contain?

- Battery operated devices with cartridges filled with nicotine, flavor, and other chemicals.¹
- The tip of the e-cigarette simulates the lit end of a cigarette, emitting a plume [of vapor].²
- E-cigarettes tested by the FDA contain nicotine, diethylene glycol (used in antifreeze and toxic to humans), carcinogens, and other impurities suspected to be harmful.¹
- Nicotine levels in e-cigarettes vary from very high to very low doses, regardless of labeling.¹
- Some e-cigarettes deliver drugs for weight loss and erectile dysfunction.³
- E-cigarettes are not approved by the FDA as nicotine delivery devices. Yet, e-cigarette companies market them as cessation aides and as a way around smoke-free policies.

Do E-cigarettes give off secondhand smoke?

- After the user inhales, the residual aerosol, or vapor, is exhaled into the surrounding air.⁴
- It is likely that e-cigarettes emit nicotine, propylene glycol, carcinogens, and other substances.⁵

Is secondhand vapor from e-cigarettes harmful?

- E-cigarettes emit secondhand vapor (not smoke) that can be seen and smelled, but it has not been studied, so claims of safety are premature.⁵
- Nicotine deposits react with an element in the air to form potent carcinogens.⁶
- People are then exposed to “thirdhand smoke” by inhalation, skin exposure, and ingestion.
- Nicotine is deposited on indoor surfaces and lasts for weeks to months.⁶

Are there other concerns about the use of e-cigarettes?

- They cause confusion when enforcing smoke-free policies.
- They model “smoking” for youth.
- The nicotine in e-cigarettes could facilitate youth initiation and addiction.
- People using e-cigarettes as a cessation aide are not likely to be successful.

How are U.S. agencies responding to the risks associated with e-cigarettes?

- On July 22, 2009, the FDA warned of the toxic ingredients in e-cigarettes.
- In 2010, the FDA warned five manufacturers that they were illegally marketing e-cigarettes and told their trade association that they intended to regulate these products.³
- The Air Force and the Marine base at Quantico have banned the use of e-cigarettes in the workplace. New Jersey and Suffolk County, NY, have banned e-cigarette use wherever smoking is prohibited.
- All U.S. domestic airlines ban the use of e-cigarettes.⁷

What are the recommendations regarding e-cigarettes and smoke-free policies?

American Cancer Society, American Heart Association, The Campaign for Tobacco-free Kids, and the American Lung Association recommend that smoke-free laws and policies prohibit the use of e-cigarettes.⁸

1. United States Food and Drug Administration. FDA news release. FDA and public health experts warn about electronic cigarettes. 2009; <http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm173222.htm>. Accessed 07/02/2009.
2. Yamin CK, Bitton A, Bates DW. E-cigarettes: A rapidly growing internet phenomenon. *Annals of Internal Medicine*. 2010;153:607-609.
3. American Medical Association. Health agencies update *Journal of the American Medical Association*. October 27, 2010;304(16):1777.
4. Trtchounian A, Williams M, Talbot P. Conventional and electronic cigarettes (e-cigarettes) have different smoking characteristics. *Nicotine & Tobacco Research*. doi: 10.1093/ntr/ntq114.
5. Henningfield JE, Zaatari GS. Electronic nicotine delivery systems: Emerging science foundation for policy. *Tobacco Control*. April 1, 2010 2010;19(2):89-90. doi: 10.1136/tc.2009.035279.
6. Sleiman MA, Gundel, L.A., Pankow, J.F., Jacob, P. III, Singer, B.C., & Destailats, H. . Formation of carcinogens indoors by surface-mediated reactions of nicotine with nitrous acid, leading to potential thirdhand smoke hazards. *PNAS*. 2010;107(15):6576-6581. doi/10.1073/pnas.0912820107.
7. Action on Smoking and Health (ASH). E-cigarettes banned on domestic flights, reports ASH. 2010; <http://www.prlog.org/10942504-cigarettes-banned-on-domestic-flights-reports-ash.html>. Accessed 10/19/2010.
8. American Cancer Society, American Heart Association, Campaign for Tobacco-free Kids, and American Lung Association. Policy guidance document regarding e-cigarettes April 9, 2010.

For more information, contact the Kentucky Center for Smoke-free Policy, 859-323-4587, www.kcsp.uky.edu

Please join us for a training on the:

Effects of Substance Abuse on Infants and Toddlers

This presentation provides a look at the effects of parental substance use on infants and toddlers. We will explore the risks to children whose parent(s) or caregivers use or abuse substances. This includes both illicit drug use and prescription drug misuse. We will also explore the effects and risks to children living in an environment where drugs are produced and/or used as in the case of methamphetamine. We will discuss what information drives the determination of child safety.

Presenters:

Debbie Acker, RN
Steve Hartwig, MS MSW

February 22, 2011
10:00 am- 2:00 pm
Green River District Health Dept
Bedford Walker Room
1501 Breckenridge St
Owensboro, KY

Lunch will be served

Please RSVP to Kelli King
kelliking@gradd.com
or 926-4433

Did you know that Medicare Part B will cover several preventive services including a “Welcome to Medicare” physical exam and yearly “Wellness” exam? Take this check list to your doctor or other health care provider and ask which preventive services are right for you. You can also keep track of your preventive services by visiting www.MyMedicare.gov. For additional information please call 1.800.Medicare or GRADD 1.800.928.9094 and ask to speak to a SHIP counselor.

MEDICARE-COVERED PREVENTIVE SERVICES

Abdominal Aortic Aneurysm Screening

Bone Mass Measurement

Cardiovascular Screening

Colorectal Cancer Screenings

Diabetes Screenings Diabetes Self-management Training

Flu Shots

Glaucoma Test

Hepatitis B Shots

HIV Screening

Mammogram (screening)

Medical Nutrition Therapy Services

Pap Test and Pelvic Exam (includes breast exam)

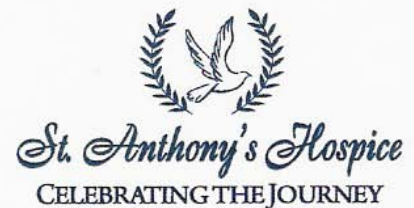
Pneumococcal Shot

Prostate Cancer Screening

Smoking Cessation (counseling to stop smoking for people with no sign of disease)

Save the Date!

St. Anthony's Hospice is pleased to announce the
2nd Annual Pat McCormick Race to Remember
10K and 2.5 mile fun run/walk
to be held on **Saturday, May 14, 2011**



The race start and end will be located at the Lucy Smith King Care Center,
on the campus of Methodist Hospital.

For questions regarding your opportunity to be involved
with this exciting event please contact me
at 826-2326 or jpreston@sahky.org.

Jennifer Preston
Marketing / Development Director

Committee accepts recommended changes to penal code and drug law

FRANKFORT – A state legislative committee today moved a step closer to reducing the state's \$500 million annual correctional system costs by accepting task-force recommended changes to Kentucky's prison system.

Recommendations that would strengthen the state's probation and parole system, improve how drug users are handled by the courts, give more support to crime victims and improve government performance in public safety and corrections spending were explained by officials from the Pew Center on the States before they were accepted today by the Judiciary Committee. The Center worked with the state Task Force on the Penal Code and Controlled Substances Act to craft the several pages of recommendations, which will be used to draft legislation overhauling criminal penalties and drug laws for consideration during the 2011 Regular Session.

Committee Co-Chairman Rep. John Tilley, D-Hopkinsville, said legislation including the recommendations will be filed the first week of the second part of the session, which begins Feb. 1.

Some of the recommendations shared by the Pew Center's Richard Jerome include codifying existing risk and needs assessment tools used on inmates by the prison system, allowing certain inmates to serve the last nine months of their prison sentence on release with mandatory supervision, allowing GPS to be used for pretrial,

probation and post-incarceration, earned credits for parolees and those on probation, creating a “presumed sentence” such as probation and treatment for simple drug possession.

“Dealing with users (who have not engaged in) other criminal activity, there are often better ways than incarceration,” Jerome said.

Other key recommendations would create a tracking system for victim restitution payment, and require fiscal statements on corrections spending to include the source of money that is spent.

Lawmakers began considering changes to the state’s Corrections system in recent years after national studies showed Kentucky had the fastest growing prison population nationally through 2007. Pew Center officials said Kentucky’s prison population rose 45 percent over the past decade—compared to a 13 percent increase nationally—although the state’s population has dipped slightly in recent years.