



Chief Medical Officer's Report to the State Board of Health January 2008

Priorities

One of the Governor's top ten priorities is to "realign public health programs." The reorganization of DHHS was the first step. In support of this realignment, the Division of Public Health has identified five priority areas to focus on:

- Becoming the trusted source of state health data;
- Addressing health disparities;
- Devising a media and education plan;
- Creating a culture of wellness; and
- Providing meaningful budget transparency.

The Division will be working on these priorities in 2008.

Health Ranking

Nebraska ranked 10th this year in the United Health Foundation's report on state health rankings, up from 12th the year before.

Factors involved in our improvement include a decrease in the prevalence of smoking and in the rate of deaths from cardiovascular disease. Also, Nebraskans report fewer poor mental and physical health days per month compared to other states.

Challenges include a high prevalence of binge drinking, limited access to adequate prenatal care, and increasing rates of obesity and uninsuredness.

The United Health Foundation is a non-profit, private foundation dedicated to improving health and health care.

Preparedness Score

Nebraska was among seven states that received a perfect score in preparing for pandemic flu and other public health emergencies, according to a report released by the Trust for America's Health. Indicators included in the assessment were vaccination rates, disease surveillance, stockpiling vaccines for pandemic flu, having a laboratory that can test for biological threats, and having laws to extend liability shields to health care volunteers in an emergency.

The hard work of the many partners involved in public health preparedness is what has made this achievement possible. These partners include local health departments, businesses, NEMA, other state agencies, the National Guard and emergency management officials, among others.

State Employee Wellness Program Produces Results

Over 800 Nebraska state employees participated in the recent 2007 N-Lighten Nebraska State Employee Wellness Program, losing more than 1,650 pounds and logging 147,859 miles. The eight-week wellness program challenged team members to collectively lose pounds and participate in healthy wellness activities.

More than 85% of the 140 teams from more than 50 Nebraska counties participated in both accumulated physical activity and weight loss. Participants calculated points for all types of activity, based on the exertion required for the activity. One point was the equivalent of one mile walked.

The N-Lighten Nebraska State Employee Wellness Program began Sept. 4, and over the next eight weeks, participants received weekly activity and nutrition tips designed to educate and motivate them to practice and adopt sustainable health habits. Participants were encouraged to log activity points and weight totals periodically on the N-Lighten Nebraska website and could check their progress on a real-time leader board.

N-Lighten Nebraska is a program open to anyone and conducted by the Nebraska Sports Council in partnership with the Nebraska Department of Health and Human Services, University of Nebraska Cooperative Extension and Tiger Coaching & Personal Training. Additional information about N-Lighten Nebraska is available at www.N-LightenNebraska.com.

Child Death Review Team

The latest Child Death Review Team (CDRT) report shows that the number of deaths of children newborn up to age 17 has remained stable in recent years, with 301 deaths in 2000 and 302 deaths in 2004. In 1993, when child death reviews began, there were 361 child deaths in Nebraska.

The 2004 report includes the team's findings and recommendations based on review and analysis of the deaths of 302 Nebraska children, newborn to age 17. The report reflects data from all child deaths in Nebraska.

The top five causes of death for children newborn to age 17 for 2004 were:

- Pregnancy-related – 87
- Birth defects – 74 deaths
- Motor vehicle-related incidents – 40 deaths
- Unintentional injuries – 22 deaths
- Cancer/malignant neoplasms – 19 deaths

The report indicates that in 2004:

- Infants under 12 months old accounted for 57 percent of all deaths, consistent with previous years.
- Pregnancy-related factors accounted for 29 percent of all deaths, a combined category of maternal complications during pregnancy, labor and delivery problems, and prematurity. All but two of these 87 deaths were infants less than 12 months old.
- Birth defects accounted for one in four of the infant and child deaths (24.5 percent or 74 deaths).
- One-fourth (26.5 percent) of all deaths were attributed to non-medical conditions, the majority of which were preventable.

Overall death rates for African-American, Native American and Hispanic children were higher than for white and Asian children, a pattern observed during previous review periods.

Team recommendations to help prevent future deaths include:

- Preconception care should be considered a vital and routine aspect of care for all reproductive age women, to reduce perinatal risk factors and improve pregnancy outcomes.
- The Centers for Disease Control and Prevention recommends that all pregnant women have access to HIV counseling and testing and when indicated, antiretroviral medications during labor to prevent HIV transmission to their babies.
- Women of child-bearing age, whether or not they plan on becoming pregnant, should consume a daily multi-vitamin containing 400 micrograms of folic acid, which is the best way to prevent neural tube defects.
- Existing SIDS prevention regulations, messages and initiatives should be expanded to include other "Safe Sleep" issues and options.
- Parents should limit the number of teenage passengers a teen driver may carry.
- Children under 16 should not ride or drive adult size all terrain-type vehicles (ATVs) under any circumstances.
- Parents who keep firearms in the home must understand the importance of storing unloaded firearms and ammunition in separate, locked and inaccessible locations.
- Young children should never be unsupervised in or near water, even shallow wading pools.
- Health care providers should stay up to date on findings regarding risk factors for, causes and treatment for childhood cancers.
- Children diagnosed with cancer should be enrolled in clinical trials in order to receive access to the newest experimental treatments.

The Child Death Review Team was established by the Nebraska Legislature in 1993 to undertake a comprehensive, integrated review of existing records for all child deaths in Nebraska. The full 2004 report, which includes a listing of CDRT members, can be viewed at <http://www.dhhs.ne.gov/hew/fah/CDRteam/recommendations.htm>