The nation’s overall health has improved slightly, according to a new report, but rising rates of obesity, children living in poverty and diabetes continue to be worrisome for states’ health.

The report, which annually ranks the nation’s health on a state-by-state basis, shows improvements in some areas of America’s health status, including preventable hospitalizations and infectious diseases. Tobacco use has also declined, according to the 2010 edition of “America’s Health Rankings,” and four states — Utah, California, Massachusetts and Washington — have driven their smoking rates to less than 15 percent, which is a goal for all states. But while smoking has decreased to a 21-year low in the United States, tobacco use rates are still unacceptably high, according to the report.

“Obesity and tobacco use are top contributors to a variety of diseases, including heart disease, cancer, stroke, diabetes and other leading causes of premature death and disability,” said Georges C. Benjamin, MD, FACP, FACEP (E), executive director of APHA, which publishes the rankings jointly with United Health Foundation and Partnership for Prevention. “We cannot avoid these critical public and personal health battles. We must work with multiple stakeholders and our public health partners to develop comprehensive solutions to solve this problem.”

Released in December, the report found that the prevalence of obesity in the United States has climbed 132 percent over the past decade, rising from about 12 percent in 1990 to nearly 27 percent of Americans now tipping the scales into the obesity range. The prevalence of obesity ranges from about 19 percent in Colorado to more than one-third of population in Louisiana and Mississippi. On a more positive note, 16 states maintained or decreased their rates of obesity in the last year.

Rising rates of obesity are also contributing to an epidemic of diabetes in the United States. According to the report, the number of adults diagnosed with diabetes has climbed 19 percent since 2005. A report released in October by the U.S. Centers for Disease Control and Prevention warned that as many as one in three U.S. adults could have diabetes by 2050 if current trends continue.

Equally troubling is that more children than ever are living in households below the poverty threshold established by the U.S. Census Bureau. According to the report, about 21 percent of U.S. children younger than 18 are living in poverty, up from about 17 percent in 2007. Children living in poverty face challenges that include lack of access to health care, limited availability of healthy foods and fewer choices for physical activity and educational opportunities.

For the fourth consecutive year, the report ranks Vermont at the top of list of the nation’s healthiest states. Vermont has climbed steadily in overall health for the last 12 years, according to the report, which highlights the state’s low rate of uninsurance, high rate of public health funding, ready access to early prenatal care and high rate of high school graduation. Also ranked near the top are Massachusetts, which the report placed second in the nation for overall health, followed by New Hampshire, Connecticut and Hawaii.

Mississippi — with its high rates of obesity and children living in poverty — continues to trail the nation in terms of overall health, with Louisiana, Arkansas, Nevada and Oklahoma rounding out the bottom five.

The annual assessment of the nation’s health draws on data from a variety of sources, including the Centers for Disease Control and Prevention, the American Medical Association, the U.S. Department of Education and the U.S. Census Bureau.

For more information or to download a copy of the report, visit www.americashealthrankings.org.
Update on E-Cigarettes

A federal appeals court recently issued a decision allowing e-cigarettes to continue to be legally sold in the United States under federal law. (E-cigarettes are battery-powered devices that provide inhaled doses of nicotine and, when used, emit vapor rather than smoke.)

In 2009 the U.S. Food and Drug Administration (FDA) moved to establish authority over e-cigarettes as drugs or drug delivery devices by blocking the import of new e-cigarette shipments into the U.S. However, this month the court ruled in Sottera v. FDA that the FDA does not have the authority to continue to block the shipments. The court's decision does not necessarily apply to all e-cigarettes on the market. If an e-cigarette company markets its products as a smoking cessation aid, the FDA may still have the authority to regulate it as a drug or drug delivery device. The ruling also does not diminish the power of state or local governments to pass laws restricting e-cigarettes' sale or use. The FDA may choose to appeal the ruling to the U.S. Supreme Court.

Camel Dissolvable Tobacco Products Pulled from Test Markets

Jan 04, 2011 11:05 AM CST by Benjamin Chambers

The R.J. Reynolds tobacco company is taking its dissolvable tobacco products off the shelves in its American test markets, according to a Dec. 17 email from the Ohio-based Drug Free Action Alliance. The products -- Camel Sticks, Strips, and Orbs -- were being tested in Columbus, Ohio, Indianapolis, Ind., and Portland, Ore. According to a letter from R.J. Reynolds (PDF), the products were removed for "further refinements." The company said in the letter it plans to "reintroduce Camel Dissolvables in the future." It did not specify where or when they might be reintroduced. Health advocates have opposed dissolvable tobacco products for being too attractive to children. The products' packaging is similar to that used for candy and gum, with flavors the Drug Free Action Alliance described as "kid-friendly."

According to the Alliance, the annual Monitoring the Future survey showed a significant decline in the use of smokeless tobacco by teens in middle school and high school between the mid-1990s and the beginning of the 2000s.

This year's results from the survey showed that use is increasing. Among twelfth graders overall, for example, 8.5 percent reported using smokeless tobacco in the past month. When the data is narrowed to males only, the number of users -- 15.7 percent -- nearly doubled.

Anti-Smoking Drugs Alter Brain to Curb Cravings, Two Studies Suggest

January 19, 2011

Research Summary

New research indicates smoking-cessation drugs may work by changing the way our brains react to seeing others smoke, HealthDay News reported Jan. 3. In separate studies, researchers from the University of California in Los Angeles (UCLA) and the University of Pennsylvania (U Penn) in Philadelphia analyzed brain scans from more than 50 smokers exposed to both neutral and smoking cues via brief videos. Participants in the UCLA group received buproprion (Wellbutrin, Zyban) or placebo, while those in the U Penn group received varenicline (Chantix) or placebo. In both studies, participants who received the anti-smoking medications reported less craving and showed less activity in the brain area associated with craving than those who received placebo.

"Treatment with bupropion is associated with an improved ability to resist cue-induced craving," concluded Christopher Culbertson and colleagues, authors of the UCLA study. The ability of brain scans to map drug effects "has relevance for the use of neuroimaging in the development of improved treatment strategies in cigarette and other drug addictions," said U Penn study authors Teresa Franklin and colleagues.

Both studies -- Effect of Bupropion Treatment on Brain Activation Induced by Cigarette-Related Cues in Smokers and Effects of Varenicline on Smoking Cue–Triggered Neural and Craving Responses -- were published online Jan. 3 in the journal Archives of General Psychiatry.

Smoking Tied to Miscarriage Risk

A new Japanese study shows that smoking is linked to an increased risk of miscarriage in the first trimester. Researchers reviewed the medical records of 430 women experiencing early spontaneous abortion and 860 women who had a full term delivery in order to
nonsmokers, according to a study published in the January 15 issue of The American Journal of Cardiology.

Paul Frey, M.D., of the University of California in San Francisco, and colleagues compared the risk of MCVEs, including cardiac death, myocardial infarction, stroke, or resuscitated cardiac arrest among participants on statins who were smokers, never-smokers, and ex-smokers.

They pooled data from 18,885 patients in the Treating to New Targets and the Incremental Decrease in End Points through Aggressive Lipid Lowering trials, two studies which evaluated the efficacy of high-dose versus moderate-dose statin therapy in patients with CHD.

The researchers found that despite statin therapy, current smokers were 1.68 and 1.57 times more likely to experience a MCVE than never-smokers and ex-smokers, respectively. The rates of MCVE were increased for smokers compared with ex-smokers, and the differences between them were similar, regardless of intensity of statin therapy. The difference in absolute event rate between current and ex-smokers was found to be more than two times as large as the decrease in absolute event rate between high-dose and moderate-dose statin therapy. Smoking cessation was associated with a number needed to treat of 22 to prevent a MCVE over five years.

"Given the apparent magnitude of benefit from smoking cessation in patients with CHD despite modern medical therapy, smoking cessation deserves considerably more emphasis in secondary prevention," the authors write.

Among Statin Users, Smoking Cessation Deserves Emphasis

Among patients taking statins for coronary heart disease (CHD), smokers are still more likely to suffer a major cardiovascular event (MCVE), when compared with nonsmokers, according to a study published in the January 15 issue of The American Journal of Cardiology.

Paul Frey, M.D., of the University of California in San Francisco, and colleagues compared the risk of MCVEs, including cardiac death, myocardial infarction, stroke, or resuscitated cardiac arrest among participants on statins who were smokers, never-smokers, and ex-smokers. They pooled data from 18,885 patients in the Treating to New Targets and the Incremental Decrease in End Points through Aggressive Lipid Lowering trials, two studies which evaluated the efficacy of high-dose versus moderate-dose statin therapy in patients with CHD.

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"Given the apparent magnitude of benefit from smoking cessation in patients with CHD despite modern medical therapy, smoking cessation deserves considerably more emphasis in secondary prevention," the authors write.
A recent study published in the *American Journal of Preventive Medicine* is the first to look at the content of iPhone applications (apps) for improving health behaviors such as smoking cessation. Given the increased use of new media platforms (e.g. smartphones) to promote behavior change, authors Lorien Abroms from George Washington University School of Public Health and Health Services, Nalini Padmanabhan from the National Cancer Institute, and Todd Phillips from the Academy for Education Development, set out to examine the content of nearly 50 iPhone applications (apps) for smoking cessation. The aims of this analysis were to 1) determine the degree to which apps adhere to established best practices in smoking cessation, 2) the popularity of smoking cessation apps among iPhone users, and 3) the relationship between these variables. In conclusion, greater efforts are needed to bring the attention to evidence-based information as it relates to smoking cessation.

Key findings reveal that iPhone apps for smoking cessation rarely adhere to established guidelines for smoking cessation. Overall, apps that were more frequently downloaded were less likely to be adherent to established smoking cessation guidelines.

With the proliferation of smartphones comes new possibility for engaging a wider audience and providing cessation services to smokers in real time. As the number of mobile phone subscribers continues to increase every year, smartphones are beginning to reach more young adults and minorities, groups that have traditionally been difficult to engage regarding smoking cessation.

Due to budget constraints, this newsletter will no longer be mailed after July 1, 2011. If you would like to continue to receive this newsletter via e-mail, contact rebecca.horn@grdhd.org.

For the latest news and information, find us on Tobacco Control Coalition for the Green River District