

1998 CSTE ANNUAL MEETING

CSTE POSITION STATEMENT # CD 13

COMMITTEE: Chronic Disease

TITLE: Inclusion of Respiratory Disease Indicators in the National Public Health Surveillance System (NPHSS)

POSITION TO BE ADOPTED: The following chronic disease health status indicators should be placed under national surveillance as part of the National Public Health Surveillance System (NPHSS):

- a) Chronic obstructive pulmonary disease (COPD) mortality (ICD-9 490-496), underlying or contributing cause.
- b) Pneumonia immunization (pneumococcal immunization per 100 persons, aged 65+), self-reported on the BRFSS.
- c) Influenza immunization (within the past year per 100 persons, aged 65+), self-reported on the BRFSS.

BACKGROUND AND JUSTIFICATION: COPD affects about 6% of the general US population, and is a preventable disease primarily attributable to cigarette smoking. Nationally, mortality due to COPD increased by 44%, from 13.3/100,000 in 1979 to 19.2/100,000 in 1994.

In 1995, pneumonia and influenza together ranked sixth among the ten leading causes of death in the United States. A national health objective for 2000 is to increase pneumococcal and influenza vaccination levels to greater than or equal to 60% for persons at high risk for complications from these diseases, including those aged 65 years or more.

JUSTIFICATION FOR INDICATORS CHOSEN: Mortality data is collected and reported by every state and territory and is readily available. Tracking mortality trends of COPD is inexpensive and simple to implement and highlights challenges in prevention and management of these diseases. The Behavioral Risk Factor Surveillance System is conducted in every state and provides estimates of the prevalence of pneumococcal and influenza immunization coverage for adults aged 65 years and older.

GOAL(S) FOR SURVEILLANCE:

- a) Local: None
- b) State:
 - Measure burden of COPD on hospital system
 - Measure vaccine coverage
 - Monitor trends over time

- Obtain and allocate public health resources for program planning
- Measure the effectiveness of intervention programs.
- c) National:
 - Monitor trends over time
 - Obtain and allocate public health resources for program planning
 - Measure the effectiveness of intervention programs.

PROPOSED METHOD OF SURVEILLANCE:

- a) State: Behavioral Risk Factor Surveillance System as currently conducted, mortality.
- b) National: BRFS, and mortality data collected at the state level.

PROPOSED SURVEILLANCE DEFINITIONS:

- a) Chronic obstructive pulmonary disease mortality (ICD-9 490-496), underlying or contributing cause.
- b) Pneumonia immunization among persons aged 65 years and older (ever pneumococcal immunization per 100 persons, aged 65+), self-reported on the BRFS.
- c) Influenza immunization among persons aged 65 years and older (within the past year per 100 persons, aged 65+), self-reported on the BRFS.

DATA TO BE COLLECTED:

- a) Local:
 - Death certificate data with COPD as an underlying or contributing cause, as reported at the local level to the state vital statistics system.
- b) State:
 - State vital statistics data on COPD as underlying or contributing causes of death.
 - Self-reported immunization data from the Behavioral Risk Factor Surveillance System.
- c) National:
 - National Center for Health Statistics mortality data system: COPD deaths as reported by states.

INFORMATION SYSTEM TO BE UTILIZED TO COLLECT AND TRANSMIT INFORMATION:

- a) Behavioral Risk Factor Surveillance System
- b) Mortality data, as collected and reported by states to the National Center for Health Statistics

TEMPORARY/PERMANENT

Permanent

PARTNER ORGANIZATIONS AND ROLE:

National Heart, Lung, and Blood Institute
 Centers for Disease Control and Prevention (NCHS, NCEH, NIP)
 American Lung Association (National and state affiliates)
 Association of State and Territorial Health Promotion and Public Health Educators

FEDERAL AGENCY/DATA SYSTEM INVOLVED:
CDC: NCHS, NCCDPHP

COORDINATION WITH OTHER ORGANIZATIONS:

Agencies for Response: National Center for Chronic Disease Prevention and Health
 Promotion, CDC
 National Center for Health Statistics, CDC
 National Center for Environmental Health, CDC
 National Immunization Program, CDC

Agencies for Information: National Heart, Lung, and Blood Institute
 American Lung Association
 Association of State and Territorial Health Promotion and Public
 Health Educators

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