Substance Use & Injury Connection

This newsletter provides quarterly updates on activities across CSTE programs, our members, and our partners focused on substance use and injury surveillance and epidemiology. Features include highlights of CSTE Subcommittee activities and member accomplishments related to substance use and injury topics. If you have suggestions for content or updates to include, please submit them to Mia Israel at misrael@cste.org. To access the Substance Use & Injury Connection archives, visit https://www.cste.org/page/substanceuseinjury.

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CSTE Updates

This section includes updates and opportunities relevant to substance use and injury epidemiology across CSTE programs.
CSTE Annual Conference: June 19-23, 2022

The CSTE Annual Conference connects more than 2,500 public health epidemiologists from across the country and will include workshops, plenary sessions with leaders in the field of public health, oral breakout sessions, roundtable discussions, and poster presentations. The 2022 conference will be held June 19-23 in Louisville, KY. Take this opportunity to meet, build relationships, and network with your professional colleagues and peers. Submit abstracts here by 11:59 pm EST on Thursday, January 6. Registration opens Tuesday, February 1.

CSTE is currently planning for the possibility of some conference sessions to be held in-person and others virtually, however if circumstances change due to public health recommendations for group gatherings, then all portions of the conference may be held virtually. Updates are posted regularly at www.csteconference.org.

Save the Dates: CSTE Injury Surveillance Workgroup Planning Meeting

The annual CSTE Injury Surveillance Workgroup Planning Meeting will take place Tuesday, February 1 and Wednesday, February 2 from 1:00-4:00 pm EST both days. The purpose of this annual meeting is to convene CSTE injury members and stakeholders to plan for upcoming activities for the new fiscal year. The goals of the meeting are to provide a space for members to generate ideas, share suggestions and feedback, and coordinate roles in the workgroup. Register here by Friday, January 14.

Injury Data Linkage Technical Assistance Opportunity Available through January 2022

The CSTE Injury Data Linkage consultants are available to provide direct technical assistance to CSTE injury members based on their individual data linkage needs or questions. Technical assistance can include but is not limited to selecting linkage software, linking data sources, evaluating linked data, and analyzing linked data. Contact Mia Israel (misrae@cste.org) with questions or to request a meeting.
The following groups may be of interest to our CSTE Substance Use and Injury members with ongoing activities related to substance use and injury topics. To join one of the CSTE Subcommittees, make sure you are logged into your CSTE member account, click the link to the Subcommittee page, and click "Join Group" under the group name. To join one of the workgroups, contact CSTE staff to be added to the email list and receive meeting information.

CSTE Subcommittee Highlight

New Surveillance Resource: Alcohol Epidemiology Subcommittee

The Alcohol Epidemiology Subcommittee is one of several substance abuse-related subcommittees within CSTE. This subcommittee focuses specifically on alcohol epidemiology and was formed to address the various issues pertaining to the integrity of the field: data inventory, data development, indicator development, data analyses, outreach to other agencies, and support for prevention activities. The subcommittee meets bi-monthly via conference call. The subcommittee was instrumental in providing feedback for the CDC Alcohol Program’s newly released resource, *Measuring Alcohol Outlet Density: A Toolkit for State and Local Surveillance*, which was developed in partnership with CSTE.

This toolkit provides steps for using several alcohol outlet density indicators for surveillance in states and local jurisdictions. It is a companion to the *CDC Guide for Measuring Alcohol Outlet Density*, and provides analytic code, screenshots, and guiding questions to help teams accomplish the six steps outlined in the guide. It also adds a seventh step on visualization, reporting, and communication.

The following CSTE Subcommittees and Workgroups have ongoing projects and/or discussion topics related to substance use and injury:

- Alcohol Epidemiology
• Call Schedule: Currently every other month, 1st Thursday of the month at 1:00 pm EST
  • CSTE Contact: Mia Israel, misrael@cste.org

  • Disaster Epidemiology
    • CSTE Contact: Andrew Adams, aadams@cste.org

  • Health Disparities
    • Call Schedule: Every other month, 4th Thursday of the month at 2:00 pm EST
    • CSTE Contact: Kyra Parks, kparks@cste.org

  • Injury Epidemiology and Surveillance
    • Injury Surveillance Workgroup
      ▪ Call schedule: 1st Wednesday of the month at 2:00pm ET
      ▪ CSTE Contact: Mia Israel, misrael@cste.org

  • Cannabis
    • Call Schedule: Every other month, 4th Thursday of the month at 1:00 pm EST
      • CSTE Contact: Mia Israel, misrael@cste.org

  • Maternal and Child Health
    • CSTE Contact: Valerie Goodson, vgoodson@cste.org

  • Occupational Health Surveillance
    • CSTE Contact: Cailyn Lingwall, clingwall@cste.org

  • Overdose
    • Call Schedule: 2nd Thursday of every other month at 1:00 pm ET
    • CSTE Contact: Cailyn Lingwall, clingwall@cste.org

  • Prescription Drug Monitoring Program
    • Call Schedule: Every other month, 4th Thursday of the month at 1:00 pm EST
    • CSTE Contact: Danielle Boyd, dboyd@cste.org

  • Substance Use & Mental Health
    • CSTE Contact: Megan Toe, mtoe@cste.org

  • Substance Use and Mental Health Indicators
    • CSTE Contact: Megan Toe, mtoe@cste.org

  • Tribal Epidemiology
    • Call Schedule: Calls scheduled quarterly
    • Tribal Data Workgroup: Calls scheduled monthly
    • CSTE Contact: Jessica Arrazola, jarrazola@cste.org

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**Member Spotlight**
After a 30-year career, Holly Hedegaard, MD, MSPH recently retired from her position as an injury epidemiologist at the CDC/National Center for Health Statistics (NCHS). After obtaining her medical degree at the University of Colorado in 1988, Holly trained in both general surgery and preventive medicine, and became certified by the American Board of Preventive Medicine. From 1994-2012, Holly served as a medical/injury epidemiologist at the Colorado Department of Public Health and Environment, managing the Injury Epidemiology Program and the Emergency Medical Services and Trauma Data Program, which included oversight of general injury epi work, the Colorado Trauma Registry and the Colorado Emergency Medical Services Information System. During her time at the state health department, Holly was the principal investigator on several CDC-funded cooperative agreements, including firearm injury surveillance (1994-1997), the Phase III core injury surveillance enhancement project (2000-2004), and the National Violent Death Reporting System (2004-2012). Holly also taught and conducted research as an adjunct faculty member in the Department of Preventive Medicine/Biometrics at the Colorado School of Public Health. In May 2012, Holly joined NCHS as a medical officer/injury epidemiologist and served in that capacity until her retirement in October 2021.

During her time in Colorado and at CDC, Holly served on several national injury surveillance workgroups, including various committees that developed consensus recommendations for injury surveillance in state health departments, assessed an expanded definition for injury using hospital
discharge data systems, identified ways to improve external cause coding in administrative datasets, developed strategies to improve surveillance on non-fatal suicide attempts, provided input on the National Trauma Data Standards for the American College of Surgeons, developed performance measures for the collection and use of injury and emergency medical services data for the National Highway Traffic Safety Administration (NHTSA) and made recommendations to NHTSA regarding updates to the Model Minimum Uniform Crash Criteria. She also participated on the Data and Surveillance Task Force of the National Action Alliance for Suicide Prevention since its inception in 2010, serving as task force co-lead from 2011-2013. While at NCHS, Holly served on the Steering Committee of the International Collaborative Effort on Injury Statistics and Methodology, a forum for international exchange among injury researchers to develop and promote international standards in injury data collection and analysis. In recent years, Holly helped lead the CSTE injury subcommittee in developing case definitions and frameworks for reporting injuries by mechanism and intent, and by body region and nature of injury, using administrative data coded using ICD-10-CM.

“T first connected with the CSTE Injury Subcommittee when I worked at the Colorado state health department back in 1994. The collegiality and support from CSTE and its members have been integral in my development as an injury epidemiologist. The hardest tasks become fun when we can work on them together! I appreciate my CSTE colleagues so much – what a dedicated group of professionals!” Holly’s retirement plans include travel (if COVID ever calms down!), renting a house for an extended stay in France/Italy/Spain, and spending time with family and friends. But don’t be surprised if she comes back to work on projects as a contractor. It’s hard to leave a career that has been so satisfying!

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**Partner Announcements**

This section includes announcements relevant to our substance use and injury members from CSTE partners. Contact Mia Israel at misrael@cste.org if you would like to submit an announcement.
CDC Releases New Training Webpage and Messaging Products for ACEs, Overdose, and Suicide Prevention
CDC’s Injury Center's mission is to prevent injuries and violence through science and action. Since 2017, the center has focused on three priority areas that are urgent, related, and preventable: adverse childhood experiences (ACEs), overdose, and suicide. The new training webpage, designed in collaboration with the American Public Health Association, demonstrates the relationship between ACEs, overdose, and suicide and the importance of addressing these issues.

U.S. Surgeon General Issues Advisory on Youth Mental Health Crisis Further Exposed by COVID-19 Pandemic
U.S. Surgeon General Dr. Vivek Murthy issued a new Surgeon General’s Advisory to highlight the urgent need to address the nation’s youth mental health crisis. As the nation continues the work to protect the health and safety of America’s youth during this pandemic with the pediatric vaccine push amid concerns of the emerging omicron variant, the U.S. Surgeon General’s Advisory on Protecting Youth Mental Health outlines the pandemic’s unprecedented impacts on the mental health of America’s youth and families, as well as the mental health challenges that existed long before the pandemic.

The Surgeon General’s advisory calls for a swift and coordinated response to this crisis as the nation continues to battle the COVID-19 pandemic. It provides recommendations that individuals, families, community organizations, technology companies, governments, and others can take to improve the mental health of children, adolescents and young adults. Read the press release here and the full report here.

Drug Overdose Deaths in the U.S. Top 100,000 Annually
Provisional data from CDC’s National Center for Health Statistics indicate that there were an estimated 100,306 drug overdose deaths in the United States during 12-month period ending in April 2021, an increase of 28.5% from the 78,056 deaths during the same period the year before.

The new data documents that estimated overdose deaths from opioids increased to 75,673 in the 12-month period ending in April 2021, up from 56,064 the year before. Overdose deaths from synthetic opioids (primarily fentanyl) and psychostimulants such as methamphetamine also increased in the 12-month period ending in April 2021. Cocaine deaths also increased, as did deaths from natural and semi-synthetic opioids (such as prescription pain medication). The interactive web dashboard is available now.
New MMWRs Highlight Trends in Drug Overdose Deaths Involving IMFs

CDC released a report with data from the State Unintentional Drug Overdose Reporting System (SUDORS). These data describe trends in drug overdose deaths involving illicitly manufactured fentanyl (IMFs) during July 2019-December 2020 in 29 states and DC, and characteristics of IMF deaths during 2020 in 39 states and DC. See here for a recent CDC Notes from the Field, authored in partnership with Quest Diagnostics, detailing the acceleration of overdose deaths involving synthetic opioids (primarily IMF), during the COVID-19 pandemic.

NCHS Releases 2022 Injury Matrices Updates

The analytical tools associated with the ICD-10-CM external cause and injury diagnosis matrices have been updated. The updates reflect changes made by the ICD-10-CM Coordination and Maintenance Committee for federal fiscal year 2022. These changes include the incorporation of new codes that pertain to injury introduced by the committee.

Updates that went into effect on October 1st, 2021 that impact the external cause of injury matrix include (but are not limited to):

- New poisoning codes for cannabis and synthetic cannabinoids;
- The addition of a code for legal intervention with an unspecified person injured;
- The addition of R45.88, a code indicating nonsuicidal self-harm.

Updates that went into effect on October 1st, 2021 that impact the injury diagnosis matrix include (but are not limited to):

- New poisoning codes for cannabis and synthetic cannabinoids;
- The addition of subsets of existing TBI-related codes;
- The addition of R45.88 indicating nonsuicidal self-harm;
- The addition of U07.0, vaping-related disorder.

The updated matrices and accompanying resource files may be accessed using the following links.

New PLACES Data Now Live
CDC’s Division of Population Health in the National Center for Chronic Disease Prevention and Health Promotion is excited to announce the newest release of PLACES (available at www.cdc.gov/places). This release includes estimates for 29 chronic disease-related measures across 4 geographic levels: U.S. counties, incorporated and census-designated places, census tracts, and ZIP Code Tabulation Areas.

Job Opening: Michigan Dept. of Health & Human Services- Occupational Health and Injury Epidemiologist (Epidemiologist-E)
The Michigan Department of Health and Human Services is expanding their Division of Environmental Health in order to better serve the people of Michigan. Learn more about the opportunity [here](#). The posting closes December 22, 2021.

New CDC Campaign Helps Older Adults Age Without Injury
The 2019 cost of injury in the U.S. was $4.2 trillion, according to a [new report in CDC’s Morbidity and Mortality Weekly Report](https://www.cdc.gov/mmwr). The costs include spending on health care, lost work productivity, as well as estimates of cost for lost quality of life and lives lost. The economic assessment includes leading causes of injuries, such as overdoses, motor vehicle crashes, falls, suicide, and homicide. A [separate report](https://www.cdc.gov/mmwr) estimates the cost of fatal injuries for states. The states with the highest per capita 2019 cost of fatal injuries were West Virginia, New Mexico, Alaska, and Louisiana. The states with the lowest fatal injury costs were New York, California, Minnesota, Nebraska, and Texas. All states face substantial avoidable costs due to injury deaths.

National Network of Public Health Institutes (NNPHI): 2022 Public Health Improvement Training
NNPHI is hosting a virtual Public Health Improvement Training (PHIT) [June 6–8, 2022](#). PHIT offers networking opportunities, as well as interactive learning and skill-building sessions designed for different experience levels. In addition, PHIT has hands-on sessions and discussion groups that will renew commitment to performance excellence and inspire new insight long after the event.

Call for Workshops:
* December – Call for Workshops information released
* Early January – Call for Workshops submissions open
* Early February – Call for Workshops deadline
* Late February – Registration opens
Learn more. For additional questions, email Meghan Wolfe at mwolfe@nnphi.org.

New Morbidity and Mortality Weekly Report (MMWR) About Homicides of American Indian/Alaska Native (AI/AN) People

National Violent Death Reporting System homicide data on AI/AN people have been analyzed and reported for the first time. The MMWR, *Surveillance Summaries: Homicides of American Indians/Alaska Natives—National Violent Death Reporting System, United States, 2003–2018*, offers much-needed insight into the characteristics of AI/AN homicide victims and suspects, and the need for tailored prevention strategies to reduce violence against AI/AN people. These data insights can also help dispel misconceptions about homicide in the AI/AN community. Read the summary report.

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**Resources**

This section contains resources that might be valuable to substance use and injury epidemiologists.

1. CDC Alcohol Outlet Density Measurement Tools: [https://www.cdc.gov/alcohol/factsheets/outlet-density-measurement.htm](https://www.cdc.gov/alcohol/factsheets/outlet-density-measurement.htm)
2. Jurisdiction Level Vulnerability Assessment Toolkit: [https://resources.cste.org/JVAToolkit_Final_August2021/](https://resources.cste.org/JVAToolkit_Final_August2021/)


