



Public Health
Prevent. Promote. Protect.



A Preliminary Data Review of Jefferson County Health Statistics, 2010-2015

Dr. Nansalmaa Conway
Jefferson County Public Health

Background

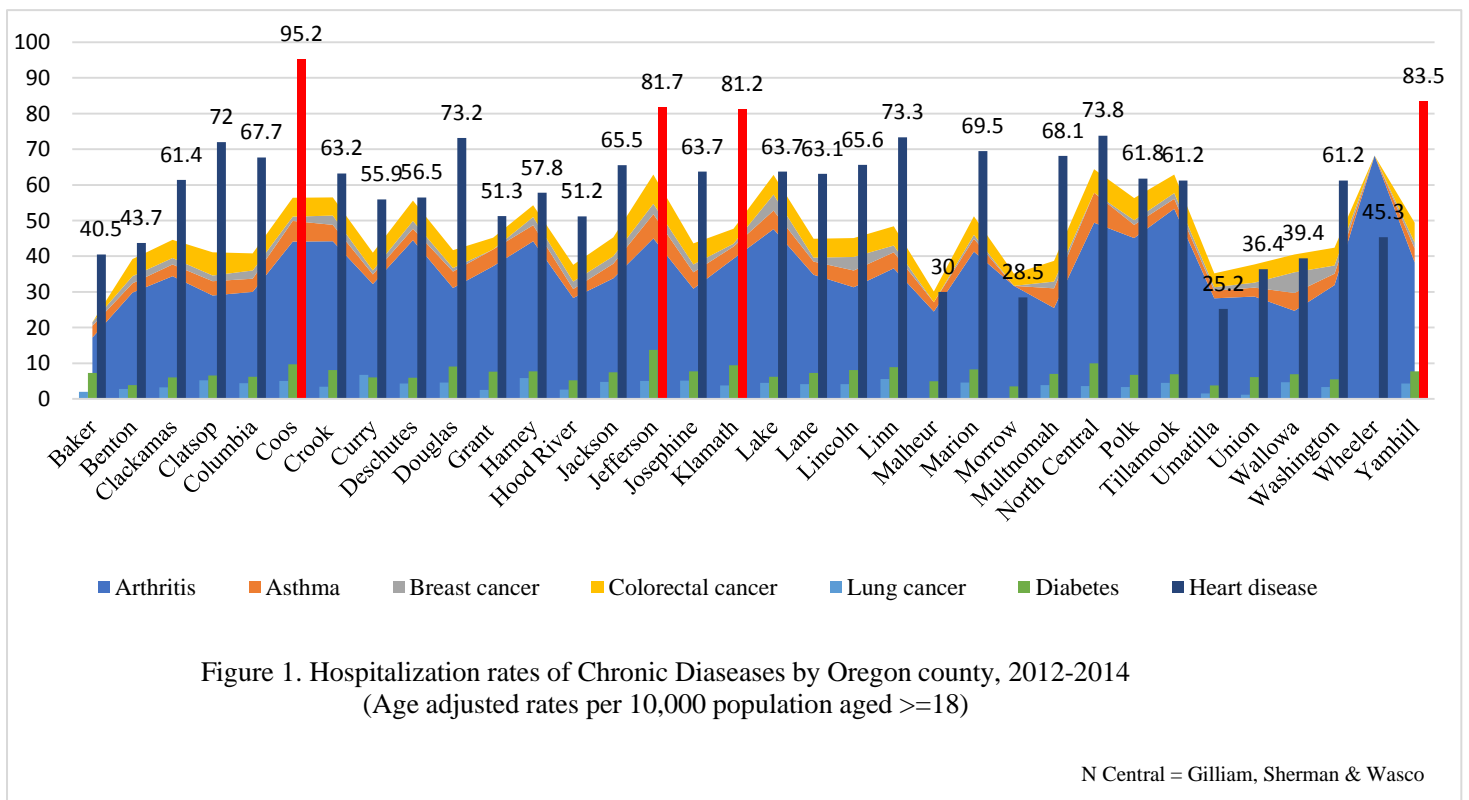


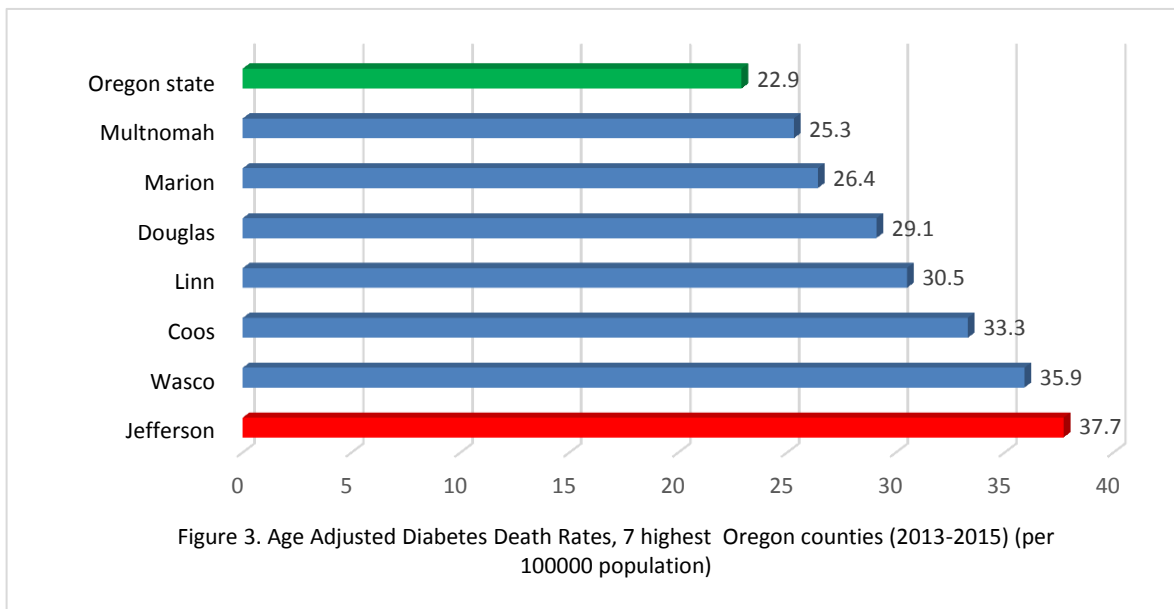
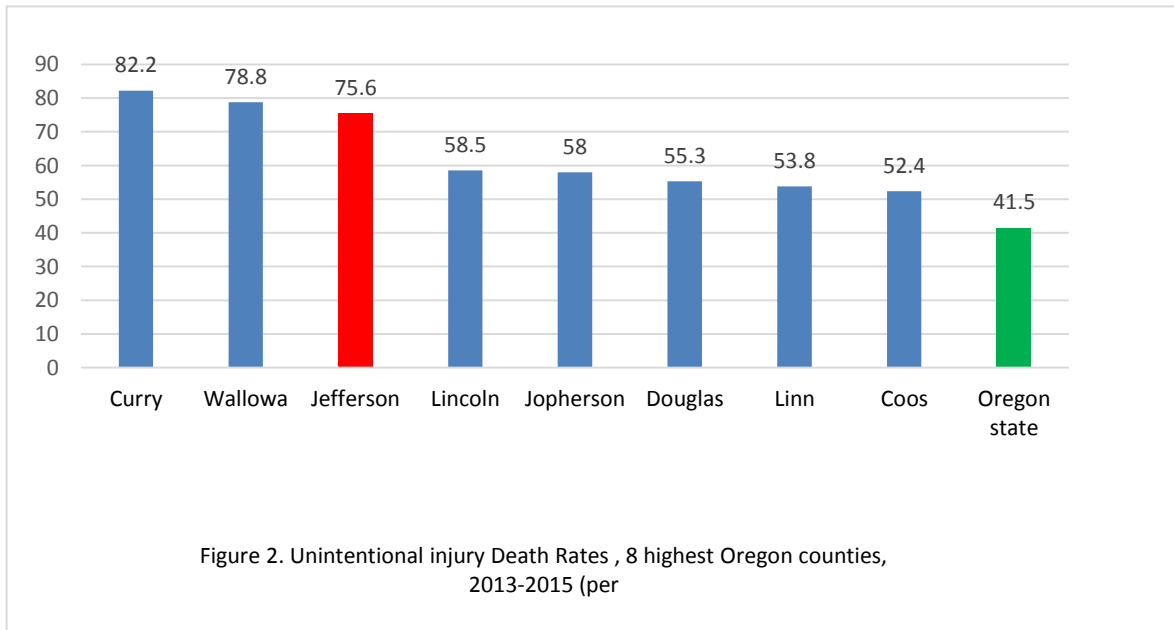
Prevalence of age-adjusted arthritis and cancer among adults aged >18 years of

Jefferson County were 1.04 times and **asthma was double the state average rate in 2010 -2013** (BRFSS Survey, OHA, 2015). Incidence rate per 100,000 population aged >19 years old of all cancers including lung and liver were slightly lower in Jefferson County than the state average rate in 2010 -2014. However, it is still stable. In figure 1, hospitalization rates per 10,000 population of chronic diseases such as arthritis, asthma, cancer (breast, colorectal and lung), diabetes, heart diseases and stroke were higher among Jefferson adults than other counties (Oregon County Data, OHA, 2015).

In figure 1, hospitalization rate of heart disease including heart attack (red bars indicate the 4 most elevated counties in the state) was third highest rank in Jefferson County comparing with other Oregon counties.

Moreover, according to Oregon Vital Statistics, 2015, the age adjusted death rate for Jefferson County was 801.1 per 100,000 population in 2013-2015, 1.1 times higher than the state rate (718.6). During that period, Oregon Health Authority data indicated that Jefferson County was one of the Oregon counties which had the highest incidence death rates of heart disease, unintentional injury and diabetes.



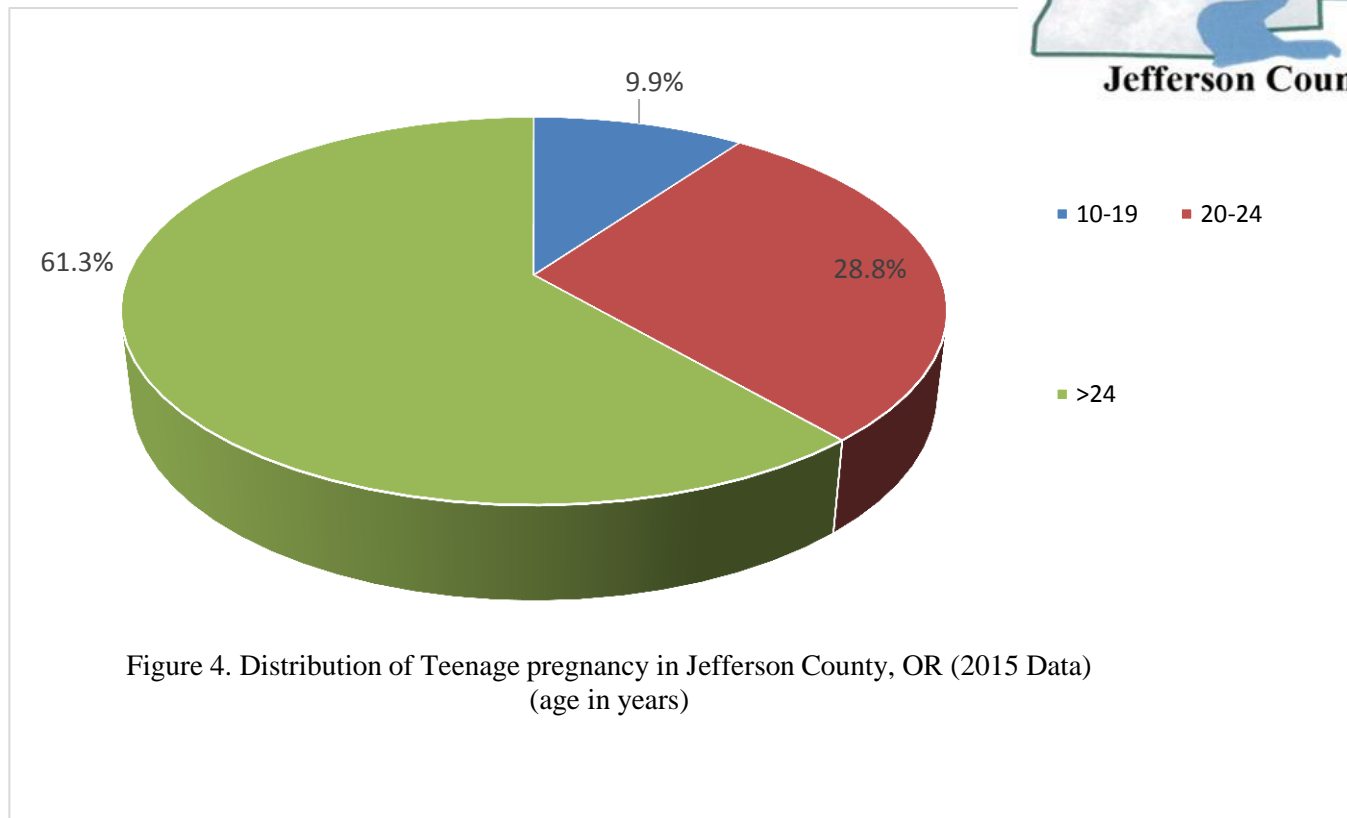


In figures 2 & 3, the rates of **unintentional injury and diabetes deaths were nearly two times higher in Jefferson County than the state average.**

Oregon Data Reports also showed that Jefferson County had many maternal health problems such as highest prevalence of non-marital births (56.9%) from total births and second highest rates of teenage pregnancy (7.7) per 1000 females including abortion and fetal deaths aged 10 -17 years old in 2015 among Oregon counties.



Per figure 4, teens (ages 10-19) were 9.9% of pregnancies in Jefferson County.



Moreover, low birth weight infants constituted 70.9 (per 1000 births) of all births and 71.4 for teen mothers. That is 1.1 times higher than the state average rate (64.2). In addition, Jefferson County's rate for inadequate prenatal care rates (107.1) was higher than the state average rate (96.7) (Oregon Vital Statistics, 2015).

According to the Adult Behavioral Risk Factor Survey (BRFSS, 2010-2013), in Jefferson County, the frequency of current cigarette smoking was 24.1% and obesity 40.1% among survey participants aged >18 (vs. 19% and 25.9% respectively for Oregon overall). It was reported that 18.9% of new mothers (estimated percentage of births) in Jefferson County were smokers in 2015 (Oregon Vital Statistics, 2015).

In addition, Oregon Healthy Teens Survey (OHA, 2015) showed us that 27.3% of 299 teens aged 13-18 years old smoked, and 14.3% drank alcohol during last 30 days. 41.7% of teenagers who were alcohol users drank strong liquor.

Oregon Vital Statistics Reports also indicated that tobacco related death prevalence was 23.2% of all deaths (N=207) in Jefferson County.

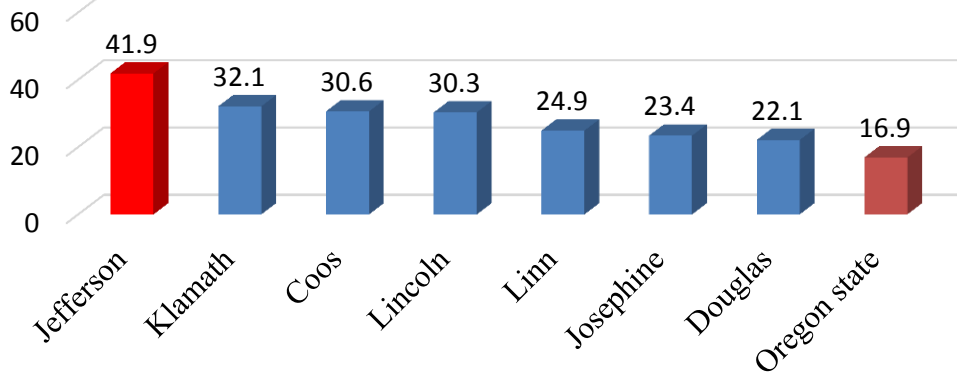


Figure 5. Alcohol-induced death rates by counties with highest rates, comparison with Oregon state average, 2012-2014 (per 100,000 population)

Jefferson County had the highest alcohol-induced death rates (41.9% per 100,000) among Oregon counties, 2.5 times higher than the state average (16.9) during 2012-2014 (Figure 5).

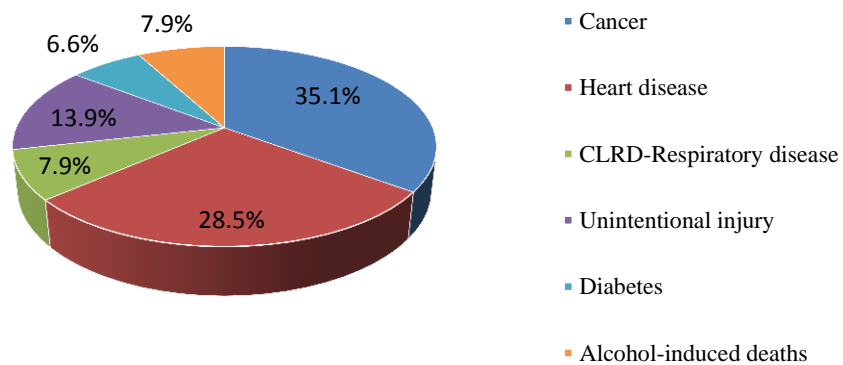


Figure 6. Leading causes of death in Jefferson county, Oregon (2015) (by percentage)

Finally, in figure 6, cancer, heart disease, chronic lower respiratory disease (CLRD), unintentional injury, diabetes and alcohol induced deaths were the leading causes of Jefferson County deaths in 2015 (Oregon Health Authority, 2015).

Conclusion

Chronic diseases such as cancer, diabetes, cardiovascular disease, and asthma are common in Oregon. It has been reported that among the adults of Jefferson County, prevalence of arthritis, asthma and diabetes were higher than the Oregon state rate for 2012 – 2015 (Oregon Public Health, 2016).



County Health Ranking Data (2015) reported that 8,900/100,000 cases of premature death under age 75 years are estimated to occur in Jefferson County. This is 1.5 times higher than the average rate for Oregon. Children who are living at risk of public health problems are more vulnerable to suffer from chronic illness. According to the county health factors ranking, Jefferson county was placed 36th (County Health Ranking, 2016), or last, in Oregon. Thus, identifying the need an intensive data compilation, review, and analysis to clarify the most common disease incidence/prevalence and associated risk factors (particularly for preventable illnesses).

ATTN: A new version will be available soon.

Contact Information: Dr. Nansalmaa Conway, Jefferson County Public Health Data Analyst
541-475-4456
nansalmaa.conway@co.jefferson.or.us

