

ATTACHMENT # 20

Health Profile '94: *The Health of Our Community*

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Copies of the *Health Profile '94: The Health of Our Community*, have been provided to public libraries throughout the county. To order a personal copy, send \$8.00 in check to: Department of Public Health, MCAH Program, 3313 Chanate Road, Santa Rosa, CA 95404. Allow 4 weeks for delivery.

Consensus Health Status Indicators

Indicator	Sonoma County		California	Year 2000 Objective ¹
	Rate ²	Rank Among 58 California Counties	Rate ²	Rate
Death rate per 100,000 population for:				
All Causes	475.7	26	495.0	No Objective
Motor Vehicle Crashes	19.5	22	17.3	16.8 ✓
Unintentional Injuries	31.6	17	31.1	29.3 ✓
Work Related Injuries	1.9	22	1.9	4.0
Cardiovascular Disease	89.6	11	116.6	100.0
Homicide	4.8	24	12.3	7.2
Suicide	14.1 ✓	33	11.7	10.5 ✓
Lung Cancer	37.6 ✓	31	35.4	42.0
Breast Cancer	19.9	20	22.1	20.6
Stroke	29.2	34	28.9	20.0 ✓
Infant Mortality³ for:				
All Races	7.4	24	8.8	7.0
Asian/Other	6.8	26	8.0	No objective
Black	16.2	45	18.1	11.0
Hispanic	7.2	33	7.8	No objective
White	7.3	25	8.0	No objective
Reported Incidence per 100,000 population of:				
AIDS	28.6	54	25.2	39.2
Measles	0.9	10	19.6	0.0
Tuberculosis	8.1	30	16.0	3.5 ✓
Primary and Secondary Syphilis	1.0	21	13.7	10.0
Indicators of Risk Factors				
Incidence of Low Birth Weight ⁴	4.4	5	5.9	5.0
Births to adolescents ⁵	2.5	4	4.3	No objective
Late Prenatal Care ⁴	14.0	2	27.4	10.0 ✓
Childhood (<18) Poverty ⁶	9.7	5	18.2	No objective

Indicates a rate which may be statistically unreliable due to the small number of events.
 Source: Year 1993 County Health Status Profiles, California Department of Health Services.

¹National Health Objectives from: Healthy People 2000, USPHS, 1991.

²Three year average 1989-1991.

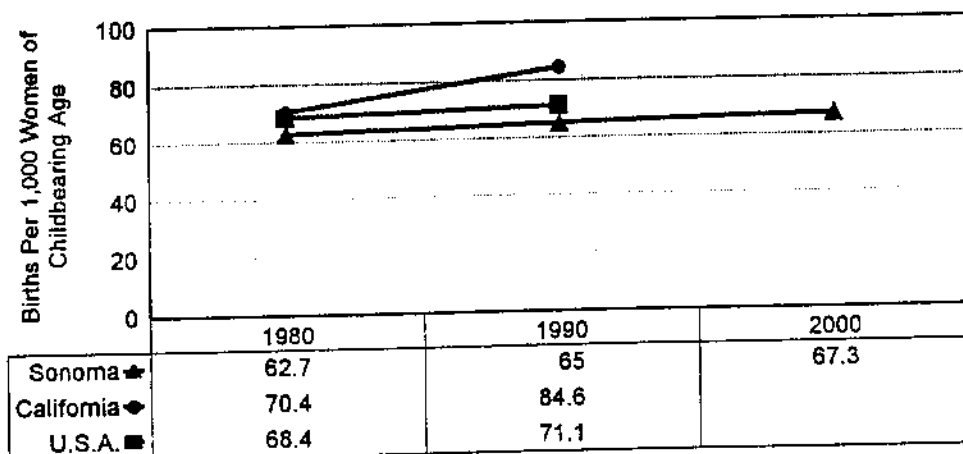
³Deaths ≤1 yr. per 1,000 live births. Three year average 1987-1989.

⁴Percent, Three year average (1989-1991).

⁵Percent of births to mothers aged 10-17 years (1989-1991).

⁶Percent, 1990 Census Summary Tape.

Projection Of Fertility Rate for Sonoma County



The fertility rate, which is the number of births per 1,000 women age 15-44, is shown for 1980 (based on a 1979-81 average) and for 1990 using actual census data. Based on this trend, the fertility rate is projected to be 67.3 for the year 2,000.

The California fertility rate has surpassed the national rate since 1975 and has shown a generally upward trend. Sonoma County continues to have a lower fertility rate than both the national and the California rate, and continues to show only a slight upward trend. In the last three years the fertility rate in women, ages 30-34, had decreased by 9%. The rate rose by 14% for women ages 15-19, 17% for women ages 20-24.

Source: Vital Statistics of California, 1990.

BIRTH DEFECTS (1987)

Reportable Defects	Rate per 1,000/Live Births	
	Sonoma County	California (Not including Sonoma County)
Cardiac Defects	6.78	6.19
Oral Clefts	1.51	1.65
Down Syndrome	.94	1.05
Overall Birth Defects	32.96	30.80

Source: California Birth Defects Monitoring Program Report.

There were too few cases of trisomies 13 and 18, neural tube defect, fetal alcohol syndrome and renal agenesis to represent graphically. Approximately 175 babies are born each year in Sonoma County with serious structural birth defects.

Sonoma County's overall rate of birth defects and the rate of Down syndrome, oral clefts and cardiac defects are similar to California's rates.

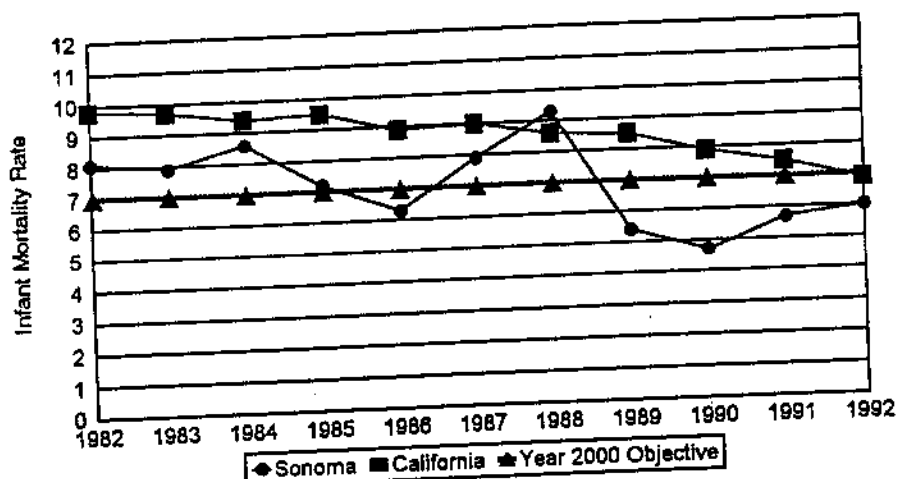
Therapeutic Abortions

Reporting of therapeutic abortions (TABS) is not required in California; therefore, there is no complete data set which can be verified to account for all TABS done in an area. In 1991, 1,417 Medi-Cal TABS were performed in Sonoma County; 270 (19%) of these were performed on teens. It is estimated that another 500 TABS are funded privately or by insurance. It is estimated that 2,136 abortions were performed in Sonoma County in 1991, including 406 performed on teens.

These numbers and estimates do not represent only Sonoma County residents. Some persons come from other places to Sonoma County for TABS, and some Sonoma County residents go elsewhere for TABS.

Source: Department of Health Services Medi-cal Reports, Register #9303211, March, 1993.
Local estimates based on informal survey.

Infant Mortality (Infant Deaths Per 1,000 Live Births) Sonoma County vs California 1982-1992



In 1992 the overall infant mortality rate for Sonoma County was 6.0 deaths per 1,000 live births. California's rate was 6.9 per 1,000 live births. The Year 2000 Objective is 7 infant deaths per 1,000 live births. Sonoma County's overall infant mortality rate is below California's rate and the Year 2,000 Objective. However, the rate for African American infants is higher, at 13.7, (based on 1987-89 three year average).

Source: California Department of Health Services, Birth and Death Records.

Lead Poisoning

"Lead poisoning is one of the most common and preventable pediatric health problems today"¹. Because the effects of lead poisoning can be permanent, causing acute brain and kidney damage, cerebral palsy, mental retardation, coma or death, prevention is imperative. Children are much more sensitive to the effects of lead than adults because their nervous systems are still developing. Adults who work in occupations which put them at-risk for lead poisoning (i.e., bullet manufacture) are routinely tested as a requirement of law. Most children with elevated blood lead levels do not have symptoms, therefore blood lead testing is the only way to identify children with this condition.

Legislation was enacted in November 1991 to test all children ages six months to 72 months who are at-risk for lead exposure. Sonoma County Child Health and Disability Prevention (CHDP) Program providers are now routinely providing lead testing for their CHDP clients. In Sonoma County, we have had lead test results which reflect several known lead contaminants: home remedies, paint, water, occupational (lead batteries).

Two children in Sonoma County Have recently been found to have blood lead levels over 25 ug/dl, a highly dangerous level. One ingested a home remedy and one was exposed to lead batteries. Public health nurses and sanitarians, if necessary, are dispatched to investigate all cases with blood lead of 15 and over in order to find and eliminate the source, and to help prevent future problems.

Sonoma County Children Tested for Blood Lead 1992		
Blood Lead Level	Number	%
Below 10 ug/dl	301	94.9
10-14 ug/dl	10	3.2
15-24 ug/dl	4	1.3
Over 25 ug/dl	2	0.6
Total	317	100

Source: Sonoma County Public Health Department CHDP Program.

¹ October 1991 position statement of the United States Centers for Disease Control (CDC).

**Sonoma County Communicable Diseases
Reported Cases, 1986 to 1993**

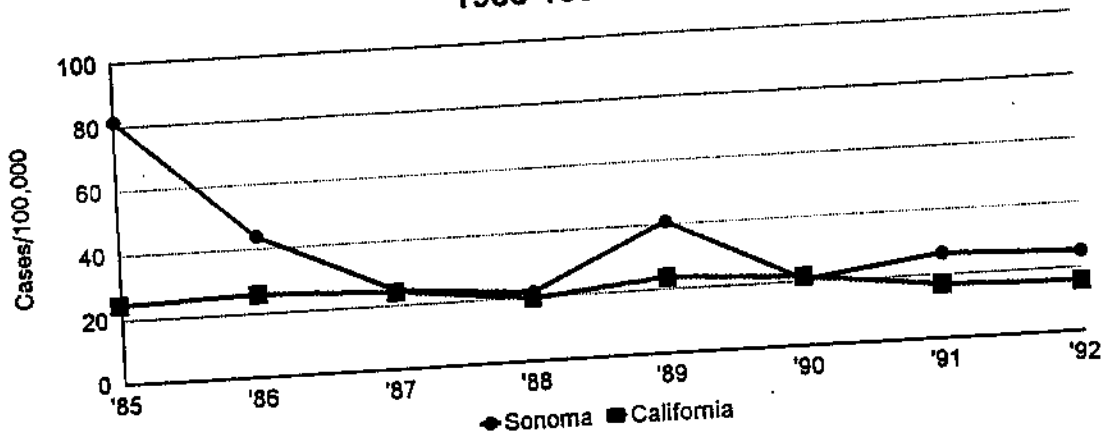
Disease	1986	1987	1988	1989	1990	1991	1992	1993
AIDS	51	66	104	113	102	142	127	359
Amebiasis	32	29	21	34	34	26	16	15
Campylobacteriosis	38	42	43	55	102	107	155	225
Chlamydia*				262	876	606	691	609
Giardiasis	34	55	55	62	118	117	159	134
Gonorrhea	432	320	312	315	242	204	201	140
Hepatitis A	170	96	83	158	80	102	103	81
Hepatitis B	126	129	101	121	107	70	60	34
Hepatitis non A non B	11	4	2	7	4	6	19	18
Lyme Disease*				73	143	79	27	9
Malaria	6	1	4	1	3	1	2	3
Meningitis, Viral	8	9	10	21	16	10	15	19
Meningococcal Infections	9	9	5	4	6	7	6	4
Measles (Rubeola)	63	0	0	2	3	0	1	40
Mumps	2	5	7	5	16	5	4	4
Nongonococcal Urethritis*				1	27	62	52	24
Pelvic Inflammatory Disease*				13	29	139	109	129
Pertussis	1	0	10	5	4	4	12	8
Rubella	1	0	0	2	3	0	1	0
Salmonellosis	32	48	66	46	60	50	60	75
Shigellosis	25	27	40	43	43	26	27	34
Streptococcal Infections	19	28	67	73	5	0	0	0
Syphilis	13	32	54	44	30	14	18	15
Toxic Shock Syndrome	0	0	1	2	6	2	4	0
Tuberculosis	22	15	30	24	24	40	21	19
Typhoid Fever	1	0	0	0	0	2	1	0

* Reportable as of March 1989

Reportable diseases and conditions of lower incidence which occurred in 1993 were: Ascariasis (2); Coccidioidomycosis (1); Cysticercosis (3); Kawasaki Syndrome (4); Leprosy (1); Meningitis-Bacterial (1) Viral Encephalitis (4); Vibrio (2); Toxoplasmosis (1); Hepatitis B-Chronic (81); Legionellosis (1); Lysteriosis (1); LGV (2); Tetanus (2).

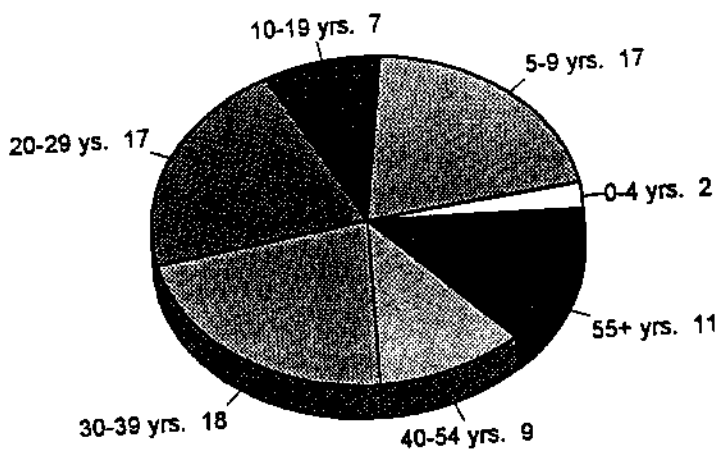
Source: Sonoma County Public Health Department.

Hepatitis A Reported Cases per 100,000 Population 1985-1992



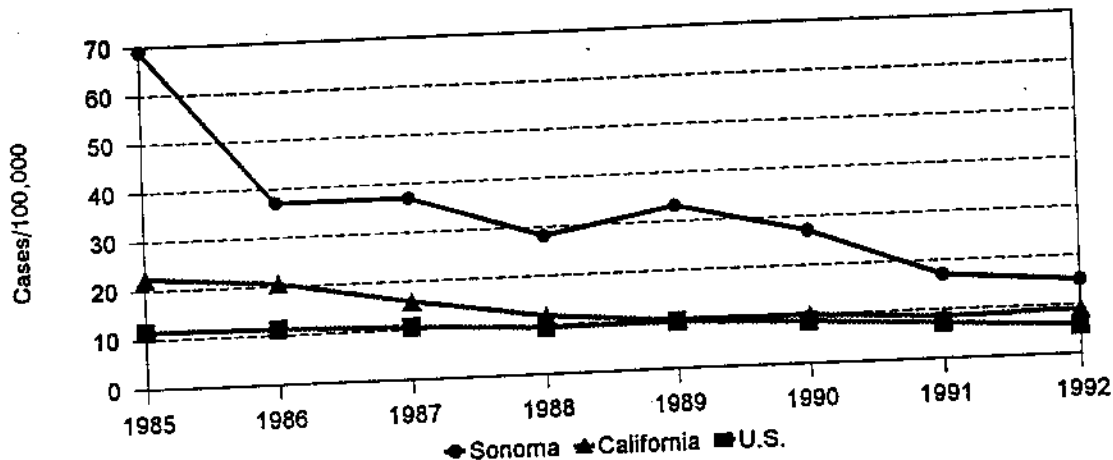
- 81 cases of HAV were reported in 1993, 51% in males; 65% in White non-Hispanics; 25% in Hispanics.
- Hepatitis A is a common viral disease spread by the fecal-oral route (poor hygiene, contaminated food or water).
- Outbreaks of hepatitis A have occurred periodically in Sonoma County, and result in higher case rates than the State as a whole, for those years. Foodborne outbreaks occurred late in 1985 and early 1986 causing higher Sonoma County rates. In 1989 multiple cases occurred in a low income communal living residence.

Hepatitis A In Sonoma County Reported Cases By Age Group 1993



Source: Sonoma County Public Health Department and State of California Department of Health Services.

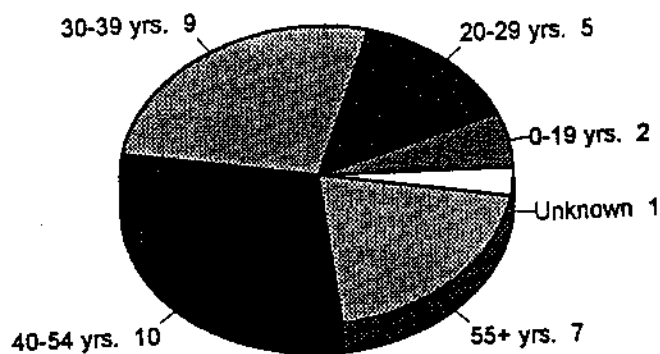
Sonoma County Hepatitis B Reported Cases per 100,000 Population 1985-1992



Source: SCPHD Morbidity Reports.

- The acute and chronic consequences of hepatitis B virus (HBV) infection are major health problems in the United States. The estimated 1 million - 1.5 million persons with chronic HBV infection in the United States are potentially infectious to others. In addition, many chronically infected persons are at risk of long-term sequelae, such as chronic liver disease and primary hepatocellular carcinoma. Each year approximately 5,000 of these persons die from chronic liver disease.
- HBV infection is a surrogate marker for HIV infection potential in a population, since it can be spread similarly.
- In 1993, 34 cases of acute hepatitis B were reported with 79% in White non-Hispanics; and 82% in males. Eighty-one cases of chronic hepatitis B were also reported.

Acute Hepatitis B In Sonoma County Reported Cases by Age Group 1993



Intestinal Infections¹
Cases per 100,000 Population Based On Three Year Average,
1990-92

	Sonoma	California
Amebiasis	6.5	4.7
Campylobacter	31.3	23.0
Giardiasis	33.8	25.2
Salmonella	14.6	18.8
Shigella	8.3	17.2

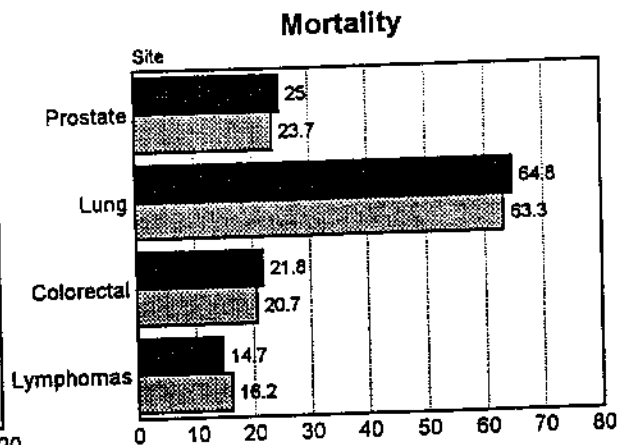
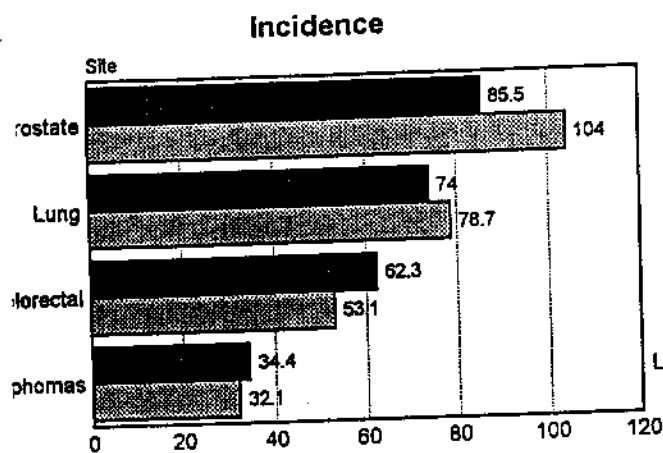
- Proportionately more cases of amebiasis, giardiasis, and campylobacteriosis are reported in Sonoma County, compared to the State as a whole. However, there have been no recent common-source large scale food-borne or water-borne outbreaks involving these infections.

Source: Sonoma County Health Department.
 State of California, Department of Health Services, Morbidity Reports.

¹Diseases which mainly affect the gastrointestinal tract, and are usually acquired through poor hygiene, or ingestion of contaminated food or liquid.

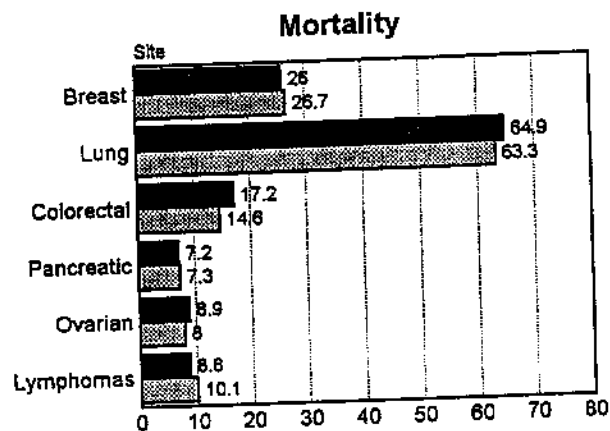
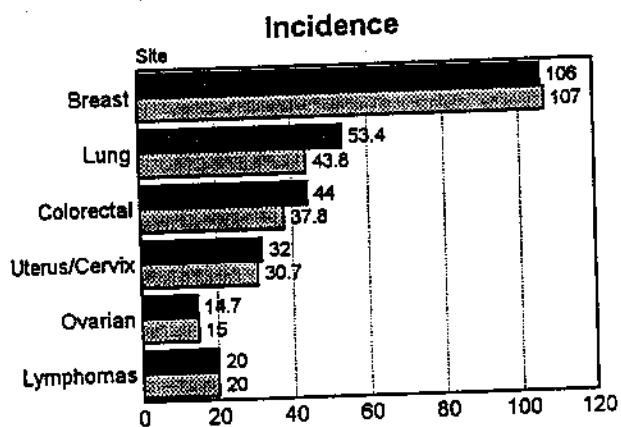
Cancer Incidence And Mortality **Leading Causes, Sonoma County vs California** **Average Annual Age-Adjusted Rate per 100,000 by Gender** **1988 - 1990**

Male



■ Sonoma County ▨ California

Female



- Colorectal cancer in men and women, and lung cancer in women occur at notably higher rates in Sonoma County, compared to the state as a whole.

Source: Cancer Incidence and Mortality by Race/Ethnicity in California, 1988-90,
 Cancer Surveillance Section, California Department of Health Services, March 1993.

Leading Causes of Death, Sonoma County Residents by Age Group 1992

Leading Causes of Death, Sonoma County Residents by Age Group 1992								
Cause	Total Deaths	Age of Decedent						
		Under 1	1-4	5-14	15-24	25-44	45-64	65+
Diseases of the Heart	941	0	0	0	0	21	115	805
Malignant Neoplasms	866	0	1	2	7	36	199	621
Cerebrovascular Disease	274	0	0	0	1	3	21	249
Unintentional Injuries	125	1	5	7	19	40	22	31
Chronic Obstructive Pulmonary Disease	180	0	0	0	1	4	17	158
Pneumonia & Influenza	134	0	0	0	0	3	9	122
Chronic Liver Disease & Cirrhosis	57	0	0	0	0	12	21	24
Suicide	63	0	0	1	3	22	17	20
Diabetes Mellitus	43	0	0	0	0	1	12	30
AIDS	90	0	0	0	1	63	26	0
Homicide	10	0	0	1	2	3	2	2
Conditions Originating in the Perinatal Period	14	14	0	0	0	0	0	0
Congenital Anomalies	21	12	0	1	2	3	1	2
SIDS	3	3	0	0	0	0	0	0
All Other	548	5	1	5	10	39	47	441
Total	3,369	35	7	17	46	250	509	2,505

- Infant deaths are primarily due to conditions originating in the perinatal period such as respiratory distress, prematurity, and congenital anomalies.
- For persons age one year to 24 years, unintentional injuries (vehicular accidents, drownings, falls, etc.) are the leading cause of death.
- AIDS is the leading cause of death in the 25 to 44 year old age group. Unintentional injuries, neoplasms, suicide and disease of the heart follow in that order.
- Malignant neoplasms became the leading cause of death by age 45, with heart disease second. This order is reversed at age 65 and beyond.
- Authorities indicate that most of the leading causes of death are preventable through changes in lifestyle, diet, substance use, safety practices; and by improvements in environment, socioeconomic conditions, and responsible behavior.

Leading Causes of Death, Sonoma County Residents
Crude Death Rate, 1988-90 Average
(Deaths per 100,000 Population)

Cause of Death	Sonoma	California
Heart Disease	252.8	238.1
Malignant Neoplasms	212.6	166.0
Cerebrovascular Disease	75.1	54.1
Unintentional Injuries	38.6	36.4
Pneumonia & Influenza	41.5	33.9
Chronic Obstructive Pulmonary Disease	39.7	33.4
AIDS	16.7	14.4
Chronic Liver Disease & Cirrhosis	11.9	13.9
Suicide	17.2	13.2
Diabetes Mellitus	11.6	11.7
Homicide	4.8	11.5

- Crude death rate is higher in Sonoma County for diseases/conditions which are influenced by aging. There is a greater proportion of older people locally.

Age Adjusted and Age Specific Death Rates
(Deaths Per 100,000 Population)

Age Group	Sonoma County	California
Age Adjusted Death Rate (3 Year Average 1988-90)	737.6	739.1
Age Specific Death Rates (3 Year Average 1988-1990)		
Under 5	179.1	240.3
5 to 14	20.3	21.7
15 to 24	88.7	110.6
25 to 34	135.3	158.7
35 to 44	219.5	227.7
45 to 54	404.1	440.6
55 to 64	1,077.1	1,036.6
65 to 74	2,569.7	2,340.0
75 to 84	5,779.0	5,497.0
Over 84	13,964.5	15,191.9

- Local age-specific death rates are lower than the state average for age groups less than 55 years old, and for those over age 84, and slightly higher from age 55 to 84.

Source: CDHS Health Data Summaries for California Counties, 1992.

Sonoma County Groundwater Quality Issues

Area of County	Bacteriol.	Inorganics & General Minerals					Organics (Volatile)		Water availability problems (WA)
	Shallow groundwater (GW)	Iron (Fe)	Manganese (Mn)	Sulfate (SO ₄)	Nitrate (NO ₃)	Boron (B)	Trichloroethylene (TCE)	Gas/Diesel (G&D)	
Petaluma (W)					X				
Sonoma (SE, SW)						X			
Kenwood	X						X	X	
Santa Rosa (S, SW)			X						
Rohnert Park			X						
Colati			X						
Sebastopol (S,W,N)		X	X	X					
Graton	X	X	X	X					
Forestville	X	X	X	X					X
Bodega		X	X						X
Freestone		X	X						X
Occidental									
Russian River		X	X						
Windsor			X						
Healdsburg		X	X						X
Cloverdale									

- Problems reflect general conditions, with exception of organics, which are isolated incidents.
- Coastal areas and western foothills of Sonoma County experience water availability problems.

Source: Environmental Health records. Contact: Ron Addis

**Sonoma County Division of Environmental Health
Permit Applications by Type**

Type	86-87	87-88	88-89	89-90	90-91	91-92	92-93
Food Facilities	1,762	1,794	1,914	2,004	2,054	2,569	2,868
Small Quantity Hazardous Waste Generators				522		30	1,019
Large Quantity Hazardous Waste Generators					10	189	60
Land Use	630	528	563	515	344	384	350
Medical Waste Facilities					110	43	151
Organized Camps					19	19	19
Public Pool Facilities	352	389	376	390	410	611	596
Public Water Systems	560	604	630	622	644	267	251
Septic Systems	2,220	2,118	2,339	1,993	1,914	3,764	4,259
Solid Waste Disposal				151	164	420	110
Underground Storage Tanks	533	611	1,298	1,278	1,050	205	156
Monitoring Wells			411	863	599	503	899
Water Wells	728	536	713	715	564	508	418

**Hazardous Material Incidents
Responses by Year**

86-87	87-88	88-89	89-90	90-91	91-92	92-93	Total
43	22	23	25	16	22	26	177

