

INTRODUCTION

Welcome to the first Poison Center & Public Health Collaboration Community of Practice (CoP) Newsletter! With over 200 members from state and local health departments, poison centers, and federal agencies, the Poison Center & Public Health Collaboration CoP is a diverse group of professionals actively involved and interested in poison center and public health collaboration. If there is a particular topic about which you want to hear more, please let us know. We want the CoP group and newsletter to be an open forum for sharing and discussion. Please use our community email list for this interaction.

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HISTORY

Data collected by the nation's 55 poison centers (PCs) are an important tool for all-hazards exposure and illness surveillance. Close collaboration and open communication among local, state, and federal public health partners and PCs is necessary to leverage PC data for public health surveillance.

In 2010, the Council of State and Territorial Epidemiologists, (CSTE), American Association of Poison Control Centers (AAPCC), and the Centers for Disease Control and Prevention's Health Studies Branch spearheaded the creation of the Poison Center & Public Health Collaboration CoP.

Mission: To bolster collaboration between federal, state, and local health agencies and departments and PCs through sharing best practices and facilitating networking between members.

Successes:

- More than **200** public health and poison center professionals have joined
- Steering committee established
- **14** national webinars conducted
- **Six** roundtable discussions at national meetings held
- Special projects focused on supporting partnerships between health departments (HDs) and PCs conducted

CoP Steering Committee

Composed of representatives from PCs, state DOHs, and CDC. The committee sets objectives and provides guidance on the activities and direction of the CoP.

Community Co-Chairs: Jay Schauben & Martha Stanbury

Community Committee members: Melissa Powell; Philip Cavicchia; Patrick Young; Prakash Mulay; Timur Durrani; Maria Mercurio-Zappala; Michele Caliva

Community Facilitators: Rebecca Lyons & Royal Law

UPCOMING EVENTS

Webinar

February 10, 2016—3:30-4:30PM EST

Topic: “Virginia: Department of Health & Poison Center Collaboration in the Spring 2015 Clenbuterol-Adulterated Heroin Outbreak”

Presenters: Brigette Gleason, MD, MPH (Virginia Department of Health) and Kirk Cumpston, DO, FACEP, FACMT (Virginia Poison Center)

Share your Experience!

We'd love to hear about your experiences collaborating with your local PC or DOH on surveillance!

For more details on how you can present a webinar please contact Rebecca Lyons at RLyons@cdc.gov

FEATURED TOPIC

Synthetic cannabinoids are various psychoactive chemicals or a mixture of chemicals that are often sprayed onto plant material, which is then smoked or ingested to achieve a “high.” These products are sold under a variety of names (e.g., “synthetic marijuana,” “spice,” “K2,” “black mamba,” and “crazy clown”) and may be sold in retail outlets as herbal products. Law enforcement agencies have regulated a number of these substances. However, manufacturers of synthetic cannabinoids frequently change the formulation to avoid detection and regulation.

Synthetic cannabinoids (SCs) are featured in this issue because they are associated with local outbreaks of adverse health effects that have occurred across the country. These features highlight collaborations between PCs and public health agencies.

FEATURED ARTICLES: PUBLIC HEALTH & POISON CENTER COLLABORATIONS FOR SYNTHETIC CANNABINOID SURVEILLANCE

STATE & PUBLIC HEALTH COLLABORATION

MISSISSIPPI OUTBREAK

Summary of: Kasper *et. al* (2015). Notes from the Field: Severe Illness Associated with Reported Use of Synthetic Cannabinoids—Mississippi—April 2015. *MMWR* (October 9, 2015).

The largest outbreak of synthetic cannabinoid-associated adverse health events ever recorded was in Mississippi in April 2015. The Mississippi (MS) State Department of Health, with the assistance of CDC, conducted an investigation to characterize the outbreak better, to identify risk factors associated with severe illness, and to prevent additional illnesses and deaths.

Access the full article at:

<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6439a7.htm>

Statewide – PCs 721 reports

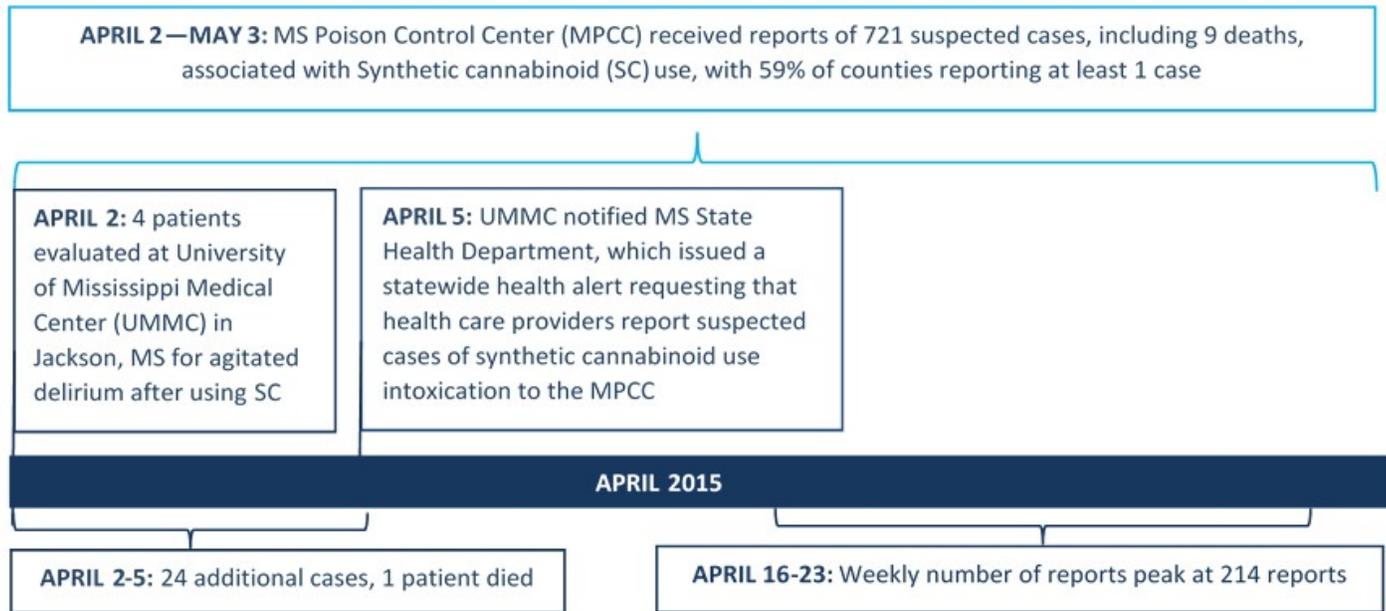
Study-specific – 119 cases seen at UMMC

- Majority male (101/119, 85%)
- Median age 31 (range 14-62 years)

Adverse Health Effects - University of Mississippi Medical Center (N = 119)

- Tachycardia (48/115, 42%)
- Elevated systolic blood pressure (35/115, 30%)
- Aggressive or violent behavior (38/119, 32%)
- Confusion (30/119, 25%)
- Significant associations between previous medical history of mental illness or substance abuse and more severe outcomes

Timeline of MS Outbreak



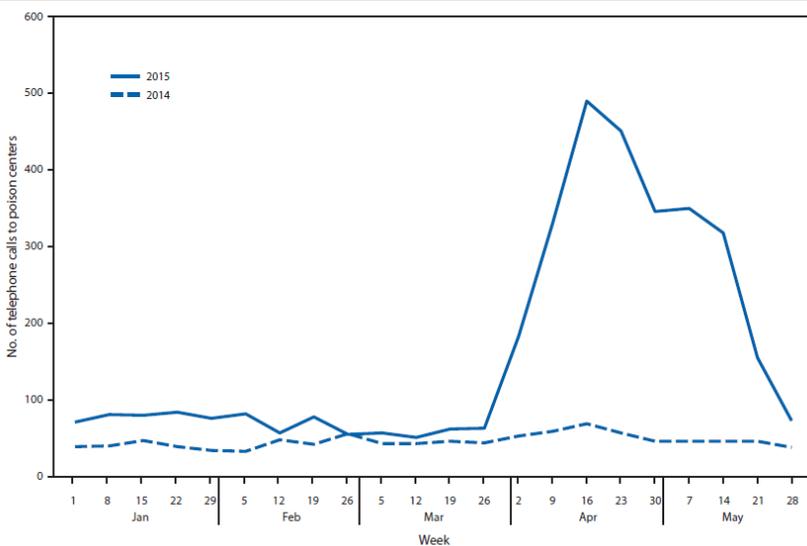
CDC & PC COLLABORATIONS

NATIONWIDE INCREASE

Summary of: Law *et. al* (2015). Notes from the Field: Increase in Reported Adverse Health Effects Related to Synthetic Cannabinoid Use—United States, January-May 2015. *MMWR* (June 12, 2015).

CDC collaborated with American Association of Poison Control Centers (AAPCC) to analyze information from the National Poison Data System on reported adverse health effects nationwide related to synthetic cannabinoid use for the period of January-May 2015. During this period poison centers reported 3,572 calls related to synthetic cannabinoid use, a 229% increase from 1,085 calls during the same period in 2014 (see figure).

Figure. Number of calls to PCs reporting adverse health effects from synthetic cannabinoids, by week



Trends—Nationwide (N=3,572)

- Majority male (2,882, 80.7%)
- Median age 26 (range 7 months to 72 years)
- Common routes of exposure:
 - Inhalation (2,870, 80.3%)
 - Ingestion (698, 19.5%)
- 626 (17.5%) reported use with multiple substances
 - Alcohol (144, 23.0%)
 - Plant Derived Marijuana (103, 16.5%)
 - Benzodiazepines (69, 11.0%)

Adverse Health Effects—Nationwide

- Agitation (1,262, 35.4%)
- Tachycardia (1,035, 29.0%)
- Drowsiness or lethargy (939, 26.3%)
- Vomiting (585, 16.4%)
- Confusion (506, 15%)

Access the full article at:

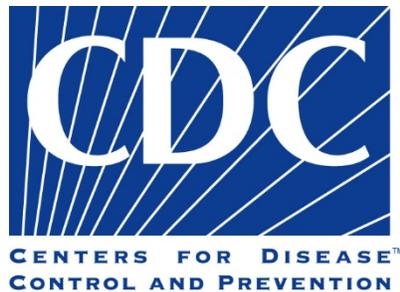
<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6422a5.htm>

For More Information on SCs:

Visit the AAPCC synthetic cannabinoids page, <http://www.aapcc.org/alerts/sythetic-cannabinoids/>

We would like to hear about any experiences your service area or jurisdiction has had responding to increases in synthetic cannabinoid cases and any thoughts you have on how poison centers and public health agencies can partner to improve surveillance of synthetic cannabinoids. Please email your thoughts to Rebecca Lyons at RLyons@cdc.gov.

CoP Partners:



<http://www.cdc.gov/nceh/hsb/>

**American Association of
Poison Control Centers**

<http://www.aapcc.org/>

**Council of State & Territorial
Epidemiologists**

<http://www.cste.org/>

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention
National Center for Environmental Health—Health Studies Branch

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