

STATISTICAL NEWS

PA Department of Health ♦ Bureau of Health Statistics and Research ♦ Vol. 29 No. 1 ♦ January 2006

More Changes Planned for EpiQMS Web Tool

Additional Data and New Features Will Improve Online System

EpiQMS, the Bureau of Health Statistics and Research's interactive health statistics web tool has recently been updated with 2004 population estimates and 2004 mortality data for Pennsylvania. In addition, we have added a new feature and have plans to incorporate more datasets as well as additional changes that will provide users with an even more comprehensive tool for accessing and analyzing health statistics on-line.

EpiQMS (Epidemiologic Query and Mapping System) was added to the Health Statistics web pages in September, 2003. It is an interactive web tool for health data users to create customized data tables, charts, maps, county assessments, and county profiles of birth, death, cancer incidence, behavioral risk, and population statistics on-line. Data are available as far back as 1990 for most datasets.

The latest available enhancement to EpiQMS is the addition of trend line charts to the County Assessment modules for the birth, death, and cancer datasets. In the county assessment screen, users are presented with three simple menus

The latest available enhancement to EpiQMS is the addition of trend line charts to the County Assessment modules...

along with instructions/steps to follow in order to create data tables that show the results of significance testing at the 95% confidence level. Through the menu selections, users are able to output any specific county rates/ratios/percentages that are significantly higher, significantly lower, or not significantly different than the corresponding state statistic. Within this data table, a "Show Trend" button is available for each statistic that is output. Clicking on the "Show Trend" button will produce a trend line chart, for the corresponding statistic, based on all three-year summary periods available through EpiQMS.

Staff are also working on future changes to EpiQMS that will include the following.

Goto Page 5 or click here...

2004 Final Death Data Now Available

Top 20 Causes Show Heart Disease & Cancer Down; Alzheimer's Up

The number of deaths for Pennsylvania residents dropped from 128,890 in 2003 to 126,602 in 2004. This is the fourth consecutive year that the annual number of deaths declined among residents.

The Table on page 4 lists the top 20 causes of deaths. The following causes had decreases between 2003 and 2004.

- Heart disease
- Cancer
- Stroke
- Chronic lower respiratory disease
- Diabetes mellitus
- Influenza & pneumonia
- Chronic liver disease & cirrhosis
- In Situ/benign/uncertain neoplasms
- Perinatal conditions
- HIV disease

The following causes had increases between 2003 and 2004.

- Accidents
- Nephritis
- Septicemia
- Alzheimer's disease
- Suicide
- Parkinson's disease
- Essential hypertension/HRD
- Homicide
- Atherosclerosis
- Congenital malformations

Goto Page 4 or click here...

To access the 2004 data, go to www.health.state.pa.us/stats and click on Vital Statistics...

INSIDE THIS ISSUE

New Birth Certificate Data Highlighted – WIC Food 2

2005 Pocket Guide of PA/County Data Released 5

Data-Driven Management Implemented 6

HP2010 Objectives: Healthy Weight and Obese Adults 7

DEPARTMENT OF HEALTH

*Edward G. Rendell, Governor
Calvin B. Johnson, M.D., M.P.H.
Secretary of Health*

New Birth Certificate Data Highlighted – WIC Food

Revised Certificate Asks, "Did Mother Get WIC Food During Pregnancy?"

This is the second of a series of articles appearing in *Statistical News* that focuses on the new data items collected via the 2003 revisions to the certificate of live birth. The revised certificate now contains the question, "Did mother get WIC food for herself during this pregnancy?"

First, what is WIC? The Pennsylvania WIC (Women, Infants, and Children) Program is committed to improving the health of lower income-eligible pregnant women, new mothers, and children by providing nutrition education, breastfeeding support, healthy foods, and referrals to health and social programs during the critical stages of fetal and early childhood development. The goal of the WIC Program is to decrease the risk of poor birth outcomes and to improve the health of the children during the critical stages of growth and development. To achieve this goal, WIC receives federal funding from the United States Department of Agriculture. The WIC Program is administered by the Pennsylvania Department of Health, Bureau of Family Health, Division of WIC. For more information on WIC, go to www.health.state.pa.us.

The 2003 revisions to the birth certificate now collect data concerning a mother's participation in the WIC program. The following statistics look at that data.

...younger mothers were much more likely to obtain WIC food during pregnancy than older mothers.

A direct relationship between the age of the mother and whether or not she received WIC food can be observed in Table 1 (page 3). In 2003, younger mothers were much more likely to obtain WIC food during pregnancy than older mothers.

Among all residents who gave birth in 2003, 35.8 percent answered yes to the question, "Did mother get WIC food for herself during this pregnancy?" The percentages were much higher for mothers under the age of 25. Mothers under the age of 15 had the highest percentage of mothers who answered yes (76.0 percent), followed closely by mothers between the ages of 15-19 (75.8 percent). A sharp decline in percent of women who received WIC food can be observed by comparing the age groups 20-24 and 25-29 (59.6 and 31.4 percent, respectively). Mothers under the age of 25

Both Hispanic and black mothers had significantly higher percentages than the state percentage of 35.8.

accounted for 56.9 percent of all resident births to mothers who received WIC food during pregnancy and 31.1 percent of all resident births in 2003.

The bar chart below investigates the 2003 WIC food status by the mother's race/ethnic category for the state. In 2003, mothers of Hispanic origin had the highest percentage of live births to mothers that received WIC food during pregnancy (71.1 percent). The next highest percentage was to black mothers (63.1 percent). Both Hispanic and black mothers had signifi-

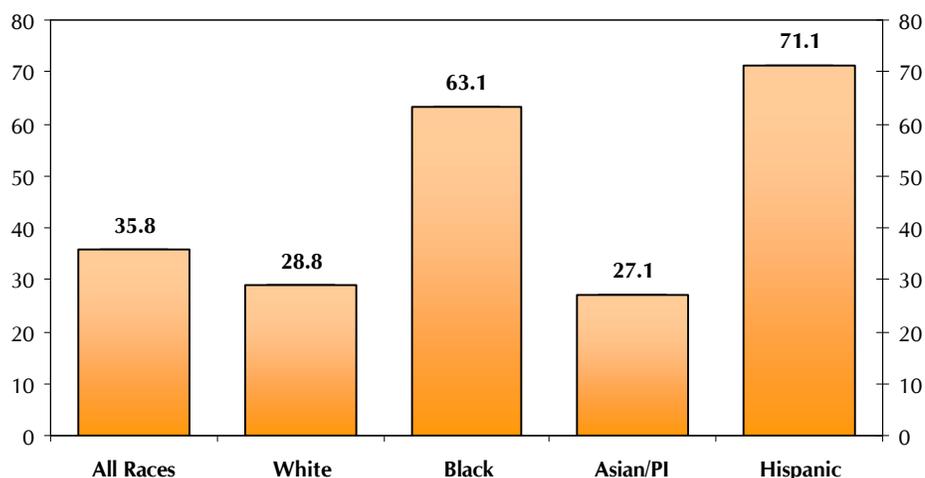
cantly higher percentages than the state percentage of 35.8. Conversely, white and Asian/Pacific Islander mothers were lower than the state, 28.8 and 27.1 percent, respectively.

Chart 2 on page 3 displays the percentage of mothers who smoked during pregnancy by their WIC food response. In 2003, mothers who did receive WIC food had a much higher percentage of smokers (30.7), compared to mothers who did not receive WIC food (11.3).

Additional analysis of the 2003 birth data showed that a higher percentage (9.3) of low birth weight babies were to mothers who received WIC food, compared to mothers who did not receive WIC food (7.3 percent). Just over 75 percent of the mothers who received WIC food also received prenatal care

Go to Page 3 or click here...

Chart 1
Percent of Live Births To Mothers Who Received WIC Food During Pregnancy by Race/Ethnicity, Pennsylvania Residents, 2003



NOTES: Unknown WIC food response excluded in calculations. Hispanics can be of any race.

New Birth Certificate Data...

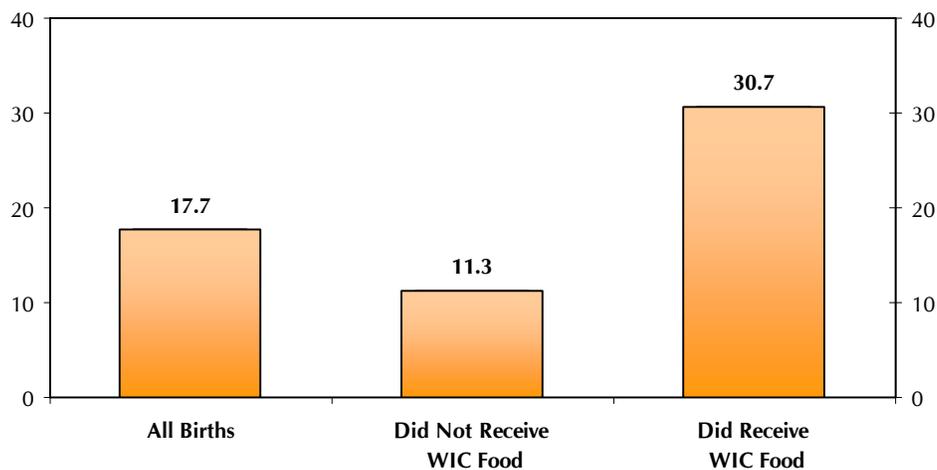
during the first trimester. Among mothers who did not receive WIC food, that percentage was much higher at 85.6 percent. However, the percentage of mothers who

did not receive any prenatal care during pregnancy was slightly lower among those who received WIC food, 1.0 versus 1.4 percent.

Look for additional articles highlighting new data items from the birth certificate in future issues of *Statistical News*. After more review and evaluation, the

new data items will eventually be incorporated into our regular reports. If you have any questions concerning this article, contact the Bureau at 717-783-2548.

Chart 2
Percent of Mothers Who Smoked During Pregnancy by WIC Food Response
Pennsylvania Residents, 2003



NOTE: Unknown smoking status excluded in calculations.

Table 1
Number and Percent* of Live Births by Mother Receiving WIC Food and
Age of Mother, Pennsylvania Residents, 2003

Age of Mother	Total Births	Did Mother Get WIC Food for Herself During This Pregnancy?				
		Yes		No		Unknown Number
		Number	Percent	Number	Percent	
All Ages	145,485	48,055	35.8	86,130	64.2	11,300
Under 15	234	165	76.0	52	24.0	17
15-19	12,912	9,233	75.8	2,951	24.2	728
20-24	32,168	17,936	59.6	12,169	40.4	2,063
25-29	38,568	11,183	31.4	24,414	68.6	2,971
30-34	38,505	6,138	17.4	29,095	82.6	3,272
35-39	18,862	2,713	15.9	14,381	84.1	1,768
40-44	3,815	600	17.6	2,816	82.4	399
45 & Older	180	20	13.4	129	86.6	31
Unknown	241	67	35.3	123	64.7	51

* Percent of total live births for each specified age group.

NOTES: Unknown ages included in total. Unknown WIC food response excluded in percent calculations.

2004 Final Death Data Now Available

A notable change from 2003 to 2004 is that Alzheimer's disease went from the 9th most frequent cause of death in 2003 to the 7th most frequent in 2004. One other data highlight is that the number of infant deaths for Pennsylvania residents fell from 1,060 in 2003 to 1,026 in 2004.

A large volume and variety of data tables with 2004 mortality statistics, including data for all counties and municipalities in Pennsylvania, have been added to the Bureau of Health Statistics and Research web pages.

To access the 2004 data, go to www.health.state.pa.us/stats and click on **Vital Statistics** and then select **Birth and Death Statistics, 1990-2004**. The 2004 mortality data are also available

**A notable change...
is that
Alzheimer's disease
went from the 9th
most frequent
cause of death in 2003
to the 7th
most frequent
in 2004.**

on the Bureau's interactive web tool, EpiQMS. (See page 1 of this issue to read an article about current and future enhancements to EpiQMS.)

Each year when a new birth, death or cancer incidence annual data file is finalized and released, staff in the Bureau of Health

Statistics and Research create and update thousands of pages of numerous cross tabulations that are used to respond to the many data requests we receive every year. These data tables are created in PDF file format (requires the Adobe Reader software) and are added to the Health Statistics web pages to provide all data users with an abundant variety of health statistics.

Examples of mortality data available at this web page include deaths by age, sex, race and cause for all counties and municipalities. There are also statistics available on specific ICD codes, month of death, method of disposition, and autopsy status. In addition, there are separate data tables on infant deaths and suicides.

Health data users can now easily access the latest available single-year (2002 for cancer incidence, 2003 for births, and 2004 for deaths) and five-year summary (1998-2002 for cancer incidence, 1999-2003 for births and 2000-2004 for deaths) data tables. In most cases you will find what you are looking for since these data tables have helped us answer most of our requests for birth, death and cancer statistics in the past.

We also have some additional tables that are not available on the website. These data tables are very large files, which are not efficient for accessing on-line. Contact the Bureau at 717-783-2548 for more information about the availability of these files.

Top 20 Leading Causes of Death Pennsylvania Residents, 2004 and 2003

2004	Rank	2003	
Total Deaths	126,602	Total Deaths	128,890
Heart Disease	36,063	Heart Disease	37,805
Malignant Neoplasms	29,218	Malignant Neoplasms	29,601
Cerebrovascular Disease	7,731	Cerebrovascular Disease	8,180
Chronic Lower Respiratory Disease	5,952	Chronic Lower Respiratory Disease	5,980
Accidents	5,091	Accidents	4,921
Diabetes Mellitus	3,562	Diabetes Mellitus	3,705
Alzheimer's Disease	3,258	Nephritis/Nephrotic Syn/Nephrosis	2,992
Nephritis/Nephrotic Syn/Nephrosis	3,051	Influenza/Pneumonia	2,974
Influenza/Pneumonia	2,915	Alzheimer's Disease	2,932
Septicemia	2,476	Septicemia	2,452
Intentional Self-Harm (Suicide)	1,397	Intentional Self-Harm (Suicide)	1,330
Chronic Liver Disease & Cirrhosis	1,064	Chronic Liver Disease & Cirrhosis	1,158
Parkinson's Disease	1,014	Parkinson's Disease	1,000
Essential Hypertension/HRD	963	Essential Hypertension/HRD	943
InSitu/Benign/Uncertain Neoplasms	744	InSitu/Benign/Uncertain Neoplasms	766
Assault (Homicide)	679	Assault (Homicide)	666
Perinatal Conditions	563	Perinatal Conditions	622
Atherosclerosis	552	Atherosclerosis	549
HIV Disease	458	HIV Disease	463
Congenital Malformations	414	Congenital Malformations	395

2005 Pocket Guide of PA/County Data Released

Convenient Brochure Unfolds to Reveal Over 5,000 Numbers and Rates

The Bureau of Health Statistics has updated the annual brochure "Pocket Guide of Pennsylvania and County Health Statistics". This edition is the sixth year the brochure has been published.

This small brochure contains over 5,000 numbers and rates. The 2005 edition contains various demographic data (population, income, unemployment, etc.) and statistics on births, deaths, disease incidence, cancer, hospitals, nursing homes, drug and alcohol treatment facilities, behavioral health risk factors, HMO enrollment, and personal care homes for Pennsylvania

Such a variety of health data allows the user to easily compare many different health status and other indicators among counties, and between the state and the rest of the country.

and all 67 counties. In addition, there are comparative figures for Pennsylvania and the United States on selected birth, death, disease, cancer incidence and mortality, abortion, and behavioral health risk statistics.

Many of the statistics that appear in this brochure also appear in other Bureau statistical reports, but have been assembled together in this publication for quick reference. Such a variety of health data allows the user to easily compare many different health status and other indicators among counties, and between the state and the rest of the country. The brochure is small, and when folded, fits conveniently into a shirt pocket or purse.

The "Pocket Guide" is only available in hard copy format. Please note that this publication is not accessible on our web site.

If you would like to receive a copy of this updated brochure, please contact the Bureau of Health Statistics and Research at 717-783-2548.

For additional health data, please visit the Health Statistics web pages at www.health.state.pa.us/stats/. More detailed statistics can be obtained from our other publications or cross tabulations, most of which focus on a particular type of data.

The "Pocket Guide" is only available in hard copy format.

Continued from Page 1...

More Changes Planned for EpiQMS Web Tool

- Add Hispanic cancer incidence data to the cancer dataset (only available for 2002+).
- Add Infant Death dataset (state and county levels).
- Add Reported Resident Teen Pregnancy dataset (state and county levels).
- Add Sexually Transmitted Diseases (STD) dataset (state and county levels).
- Add new statistics to the birth dataset based on 2003 revisions to the Certificate of Live Birth.
- Add Other Communicable Diseases dataset (state and county levels).
- Add more menu selections to the County Assessment modules for birth, death and cancer datasets.
- Add button for automatic download of a data table.
- Add button for automatic printing (special format, not just a screen shot) for tables, charts, maps, and county assessment modules.
- Add county/regional maps module for the BRFSS dataset (will require combining some county boundaries).
- Change map pallet options to include only 5 colors each and add a gray-scale option.
- Add a multi-dataset County Assessment selection that allows users to output selected statistics from all EpiQMS datasets.
- Change the County Profile modules to allow outputting of data from all datasets.
- In the Map modules, have a window open, when a user clicks on a county outline, that displays the corresponding county statistics for all available years.

future editions of *Statistical News* and be sure to periodically check the Health Statistics web pages to begin using the enhancements.

Bureau of Health Statistics and Research staff are available to conduct an on-line demonstration or presentation of EpiQMS for your office, meeting or conference, as well as provide hands-on training. Please contact the Bureau at 717-783-2548 to discuss the availability of these customer services.

To access EpiQMS, click on the EpiQMS logo below or go to www.health.state.pa.us/stats and click on the EpiQMS logo.



Data-Driven Management Implemented

"Are Pennsylvanians getting healthier as a result of Department of Health program efforts?"

What is data driven management?

Pennsylvania's Secretary of Health, Dr. Calvin Johnson, has promoted and adopted a data-driven management system for the Department of Health. The Department's system is based on proven systems first implemented by the New York City Police Department (known as CompStat) and adapted for ef-

fective uses by the Philadelphia Police Department, Baltimore city government, the Pennsylvania Department of Public Welfare (known as PeopleStat), and many other government organizations throughout the country.

The Department of Health's system involves periodic data presentation and discussion meetings of all offices and programs with Dr. Johnson and other executive staff. The objective is to

present program-related data and define exactly how management decisions have been made (or can be made) using data effectively.

Such a data driven management system will foster better communication between Department program management staff and executive staff and ultimately help us to answer the question, "Are Pennsylvanians getting healthier as a result of Department program efforts?"

Below is some more specific information on why the system was implemented, how it works, and some recent results. If you have any questions about the Department's Data-Driven Management System, please contact the Bureau of Health Statistics and Research at 717-783-2548 or send us an e-mail from our web pages at www.health.state.pa.us/stats.

Why?

- To foster better use of data by Department of Health staff in planning, managing, and evaluating their public health programs.
- To improve communications on data and management issues within the Department of Health, especially between program offices and the executive office.
- To improve data quality and ensure that data needed for management decision-making in the Department of Health are available.
- Program staff from each office will be assembled to ensure that program data are presented as representative of program management efforts to determine need, track progress, and evaluate results.

How?

Each major office or program will be contacted by the Bureau of Health Statistics and Research to meet and discuss the process and what it means to them. Training will be provided by Health Statistics staff to office/program staff. The teams assembled will work together to develop slides for the data presentation and talking points for each slide. Efforts will be coordinated with related projects, such as strategic plans, Healthy People 2010, SHIP (State Health Improvement Plan), budget measures, and other specific program measures or benchmarks.

The presentation slides can contain only data tables or charts, utilizing a geographic drill down approach (U.S., state, county, district, city, neighborhood, client/provider) whenever possible. Office/program staff will present their results to executive staff for discussion.

Results

A pilot presentation was conducted with the Bureau of Communicable Diseases, addressing the AIDS, Immunization, and STD programs on January 31, 2005. The Bureaus of Managed Care (Certification and Quality Review) and Drug and Alcohol Programs (Prevention, Treatment, Program Monitoring, Fiscal, Training) have presented to the Secretary since then. Presentations will be scheduled soon with the Bureau of Emergency Medical Services (Workforce, Training, Ambulance Licensing, Patient Care), the Division of Chronic Disease Intervention (Obesity, Cancer Control, Heart Disease/Stroke, Healthy Woman Project, STEPS) and the Bureau of Health Planning (Primary Health Care Practitioners Program and SHIP). In the near future, we hope to have all major Department programs and offices participate at least once every year.

Update: Healthy People 2010 Objectives

Focus Area 19 - Nutrition and Overweight

19-01 - Increase % healthy weight adults (ages 20+)......HP2010 Target: 60%

19-02 - Reduce % obese adults (ages 20+)......HP2010 Target: 15%

Healthy Weight Adults:

The percent of healthy weight adults (ages 20+) has not changed much between 2000 and 2004 according to the Pennsylvania Behavioral Risk Factor Surveillance System (BRFSS) annual sample survey of adults in the state. Among all adults, the percentages ranged from 40 in 2000 to 37 in 2004 (and 2001).

The percentages of healthy weight adults were much lower for non-Hispanic blacks (23 in 2004) and males (30), compared to non-Hispanic whites (39) and, especially, females (45). Figures for Hispanics had large fluctuations with the highest (40) in 2001 and the lowest (27) in 2003, due to small sample sizes.

The HP2010 goal is set for 60 percent. No trends were observed among any of the groups shown and it is unlikely for any of them to achieve this goal.

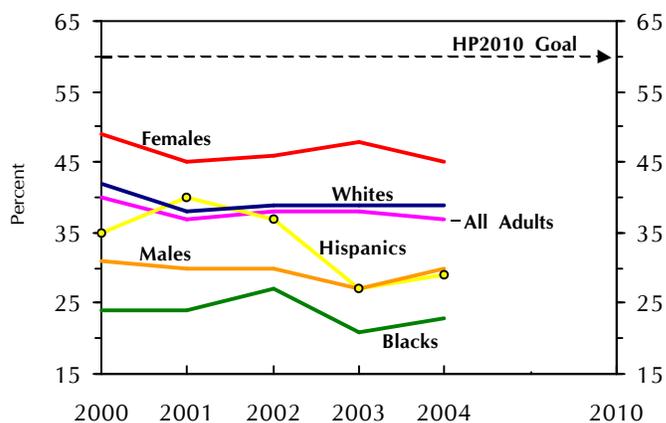
Obese Adults:

In contrast to the healthy weight percentages, the percentages of obese adults in Pennsylvania between 2000 and 2004 do show a trend. Unfortunately, it is a bad trend with percentages for all adults and by race and sex on the increase. In 2004, 25 percent of adults were considered obese, up from 22 percent in 2000.

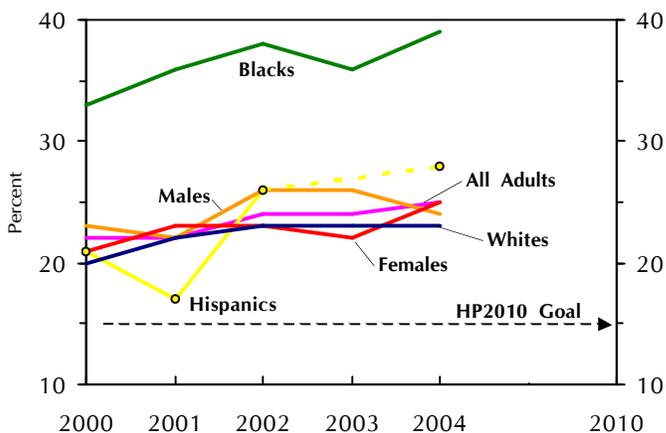
The percentages for non-Hispanic black adults were consistently and significantly higher than for non-Hispanic whites, males, and females—39 percent in 2004, compared to 23 percent for whites, 24 for males, and 25 for females. The percentages for Hispanic residents are difficult to interpret due to the small sample sizes for this group.

The Healthy People 2010 goal is set for 15 percent. In Pennsylvania, we are getting farther away from this goal each year.

Percent Healthy Weight Adults Ages 20+ By Race/Ethnicity and Sex, Pennsylvania 2000-2004



Percent Obese Adults Ages 20+ By Race/Ethnicity and Sex, Pennsylvania 2000-2004



Percent Healthy Weight and Obese Adults Ages 20+ By Race/Ethnicity and Sex, Pennsylvania 2000-2004

	2004	2003	2002	2001	2000
Healthy Weight					
All Adults 20+	37±2	38±2	38±1	37±2	40±2
Non-Hispanic Whites ...	39±2	39±2	39±1	38±2	42±2
Non-Hispanic Blacks	23±6	21±7	27±5	24±7	24±6
Hispanics*	29±10	27±12	37±7	40±14	35±13
Males	30±2	27±3	30±2	30±3	31±3
Females	45±2	48±3	46±2	45±3	49±2
Obese					
All Adults 20+	25±1	24±2	24±1	22±2	22±2
Non-Hispanic Whites ...	23±1	23±2	23±1	22±2	20±2
Non-Hispanic Blacks	39±6	36±8	38±5	36±7	33±7
Hispanics*	28±11	DSU	26±8	17±12	21±11
Males	24±2	26±3	26±2	22±2	23±3
Females	25±2	22±2	23±1	23±2	21±2

NOTES: ± denotes 95% confidence interval. *Hispanics can be of any race. DSU = data statistically unreliable (small numbers).

HP2010 State and County Data on the Web

To access the Department of Health's web page of Healthy People 2010 statistics for the state and counties, go to www.health.state.pa.us/stats. The latest available statistics as well as trend data are shown. You can view data for the state, all counties, a specific demographic element (age, sex, race, etc.) or just for a specific county. Complete data sets for the state and counties can be downloaded. There is also a link to the national HP2010 web site.

***Statistical News** is published bimonthly by the Bureau of Health Statistics and Research, Pennsylvania Department of Health, 555 Walnut St., 6th Floor, Harrisburg, PA, 17101. Please write, telephone (717-783-2548) or FAX (717-772-3258) us if you have any questions regarding the contents of this newsletter. Visit the Health Statistics section of the Department's web site at www.health.state.pa.us/stats to access additional health statistics and reports.*

The Department of Health is an equal opportunity provider of grants, contracts, services and employment.



Click on the EpiQMS logo above to access our interactive health statistics web site.

H106.830P