The pages that follow contain information critical to protecting the health of your patients and the citizens of Colorado.

HAN ADVISORY

Number of pages including cover: 4

Subject: Advisory - Screen youth for vaping and counsel as appropriate

Message ID: 11/7/2018 8:45:00 AM
Recipients: HAN Community Members.
From: TRI-COUNTY HEALTH DEPARTMENT
Adams, Arapahoe and Douglas County, Colorado

Recipient Instructions: Tri-County Health Department is forwarding you the attached HAN. You may have already received this broadcast if you are on the CDPHE distribution list, however, we wanted to ensure you did not miss this important information. No response is required.

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You have received this message based upon the information contained within our Health Alert Network Notification System. If you have a different or additional e-mail or fax address that you would like us to use, or if you have additional questions, call 720-200-1477.

Categories of Health Alert Network Messages:
Health Alert: Conveys the highest level of importance; warrants immediate action or attention.
Health Advisory: Provides important information for a specific incident or situation; may not require immediate action.
Health Update: Provides updated information regarding an incident or situation; unlikely to require immediate action.
Info Service/Public Health Brief: Provides general information that is not necessarily considered to be of an emergent nature.

You may download a copy of this HAN from the TCHD website at http://www.tchd.org/259/Health-Alert-Network
HEALTH ALERT NETWORK BROADCAST
MESSAGE ID: 11022018 15:00
FROM: CO-CDPHE
SUBJECT: HAN Advisory – Screen youth for vaping and counsel as appropriate
RECIPIENTS: Local Public Health Agencies
RECIPIENT INSTRUCTIONS: Local Public Health Agencies - Please forward to pediatricians, adolescent medicine physicians and family medicine physicians

HEALTH ADVISORY | Screen youth for vaping and counsel as appropriate | Nov. 2, 2018
Health care providers: Please distribute widely in your office

Key points
- One in four Colorado youth report they use nicotine-containing vapor products (Juuls, e-cigarettes); Colorado is No. 1 in the country for youth vaping.
- Teens who vape are at higher risk for nicotine addiction, the adverse effects of nicotine on developing brains, and cigarette use.
- Colorado data show youth who vape also are more likely to engage in other high-risk behaviors, including substance use and risky sexual behaviors.
- In addition to screening for tobacco use, ask patients specifically about vaping, counsel on vaping and nicotine, and consider screening teens who vape for associated high-risk behaviors (substance use and risky sexual behaviors).

Background information
Colorado leads the nation in youth use of vapor products; one in four Colorado teens in the most recent CDC Youth Risk Behavior Survey reported they vape. Most vapor products (e-cigarettes, JUUL) contain nicotine, sometimes at high percentages. Most vape products sold in convenience stores contain nicotine, even if it is not indicated on the label.¹ A single Juul “pod” delivers 5 percent nicotine, about the same as is in an entire pack of cigarettes.

E-cigarettes are the second most tried substance among Colorado youth. Youth who vape expose their developing brains to nicotine, putting them at risk of addiction, mood disorders, lowered impulse control and decreased attention and learning ability.² A 2018 National Academies of Sciences report shows teens who vape are more likely to start smoking cigarettes or cigars. While most teens know smoking cigarettes is unhealthy, fewer realize vapor products are dangerous, and some don’t realize they are consuming nicotine. 63 percent of youth responding to a 2017 survey said they did not know JUUL contains nicotine.³

Youth who vape are also more likely to engage in other risky behaviors. The 2017 Healthy Kids Colorado Survey shows that among current vape users:

- 57 percent binge drank alcohol one or more days in the past 30 days, compared to 5.6 percent of non-users.
- 26 percent had taken prescription pain medication without a prescription, compared to 7.1 percent of non-users.
- 51 percent used marijuana in the past 30 days, compared to 7.6 percent of non-users.
- 14.2 percent used cocaine at least once in their life compared to 1.4 percent of non-users.
- 45.1 percent had sex with one or more partner in the last three months, compared to 14.6 percent of non-users.

**Recommendations / guidance**

- Screen all youth, parents and caregivers for e-cigarette use and exposure. Ask *specifically* about vaping (e-cigarette, Juul use) in addition to screening for tobacco use, because youth may not necessarily associate tobacco with vaping.
- Counsel children and adolescents about the dangers of nicotine on developing brains, and clearly communicate that tobacco product use in any form, including vapor products, is unsafe.
- Educate parents and caregivers who use e-cigarettes about the importance of safe storage practices and protecting youth from secondhand and thirdhand aerosol exposure.
- For adolescent patients who vape:
  - Refer youth to developmentally appropriate tobacco treatment, such as behavioral coaching offered through the Colorado QuitLine (https://www.coquitline.org/en-US/Just-Looking/Health-Professional/How-to-Refer-Patients), which serves clients 12 and up. Youth in Colorado may voluntarily seek support for substance use treatment, including tobacco treatment, without parental consent.
  - Consider screening and counseling patients for other high-risk behaviors, including alcohol, drugs, and sexual behaviors that may put them at higher risk for sexually transmitted diseases or pregnancy.
- Build your team’s capacity to address the issue of youth vaping. A team-based approach can ensure patients are appropriately screened, counseled, and referred to treatment.

**Information and resources**

- CDC web page on e-cigarettes: https://www.cdc.gov/tobacco/basic_information/e-cigarettes/index.htm
- CDC screening and treatment recommendations for sexually transmitted diseases https://www.cdc.gov/std/tg2015/specialpops.htm#adol

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