

Community Health Review

Wyoming

Providing insight into the public health issues that impact your community



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Births and Deaths

Hamilton County Public Health facilitates the collection of birth and death data in the community. This information is used for the issuance of birth and death certificates, but it is also a valuable tool for measuring the health status of your community. This information was used to identify the occurrence of adverse birth outcomes and associated risk factors. These are outlined in Table 1 and include low-weight births, preterm births, medical risk factors during pregnancy, and teen births. Listed below are selected 2009 birth statistics for your community.

Number of Births: 65
 Birth Rate: 8 per 1000 residents
 Number of Girls: 31
 Number of Boys: 34

Table 1. Adverse Birth Outcomes and Associated Risk Factors in Wyoming, Hamilton County, Ohio, and the United States

	Wyoming (2009)	Wyoming (2006-2008)	Hamilton County*	Ohio*	US**
Number of Births	65	202	11,373	144,568	4,131,019
Adverse Birth Outcomes					
Low birth weight (<2500 grams)	7.7%	4.0%	10.1%	8.6%	8.2%
Pre-term births (<37 weeks)	9.2%	7.4%	14.0%	12.1%	12.2%
Risk Factors					
Medical risk factors during pregnancy	44.6%	36.6%	36.2%	28.4%	-
Mother's age (<20 yrs)—teen births	0%	4.0%	11.1%	10.8%	10%
Mother's age (>34 yrs)	27.7%	28.7%	11.8%	11.6%	14.2%

The health issues facing a community are often reflected in local mortality rates and primary causes of death. The mortality rate for your community is shown in Table 2 below; rates for Hamilton County, Ohio and the United States are provided for comparison. Years of Potential Life Lost (YPLL), a measure of premature and possibly preventable death, is also included in Table 2. The YPLL is calculated by summing all years of life lost under the age of 75. The standardized mortality ratio (SMR), also presented in Table 2, is a health indicator for a community that reflects expected versus observed mortality. An SMR greater than 100% is an indicator of higher than expected death in a community. The primary causes of death of residents in your community are depicted in Figure 1 below.

Table 2. Death Statistics in Wyoming, Hamilton County, Ohio and the United States

	†Wyoming (2009)	†Wyoming (2006-2008)	Hamilton County*	Ohio*	US***
Number of Deaths	46	135	7,505	107,062	2,423,712
†Death rate (per 1000 residents)	5.5	5.4	9.3	9.3	8.0
Years of Potential Life Lost	132	779	-	-	-
Standardized Mortality Ratio	59%	55%	-	-	-
Infant Deaths	0	2	113	1,109	-

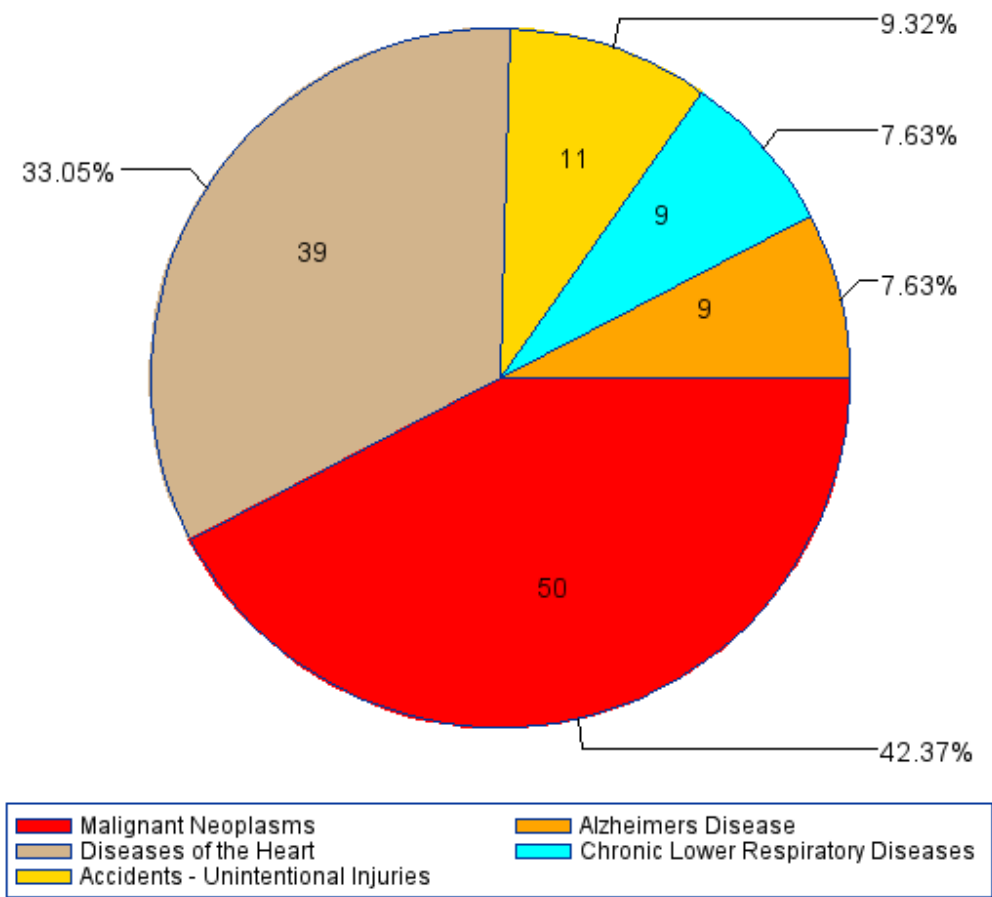
*Ohio Department of Health Vital Statistics (2009)

**National Vital Statistics Reports, Volume 59, Number 3, December 21, 2010 (Preliminary Data for 2009)

***National Vital Statistics Reports, Vol. 58, No. 19, May 20, 2010 (Final Data for 2007)

† Rates derived from less than 20 events are considered unreliable for statistical comparison.

Figure 1. Primary Causes of Death in Wyoming, Ohio — 2006-2009



Not Classified: 29 deaths

Injury

Injury, a largely preventable and predictable health outcome, is a pressing public health issue in Hamilton County. According to the Centers for Disease Control and Prevention, “injury is a leading killer in all 50 states”.¹ Injury remains a leading cause of death in Hamilton County and non-fatal injuries contribute to an even larger community burden in terms of populations affected and healthcare costs. By examining injury trends, Hamilton County Public Health can identify emerging problems and help support community initiatives to prevent injury. Injuries are described by mechanism, or what caused the injury such as a fall or motor vehicle accident. The prevalence and mechanisms of injury rates can vary by community and populations within the community.

The most common mechanisms of injury in Hamilton County are falls, motor vehicle accidents, and struck by/against*. The 2008-2009 age-specific rates of these injuries in your community and the county are displayed in Table 3. Over a two year period (2008-2009), there were 921 injuries in your community that resulted in emergency department visits, hospitalizations, or deaths. Death was the result of two injuries while all other injuries were non-fatal (Table 4). Figure 2 displays injury trends observed from 2004 to 2009 for the abovementioned mechanisms of injury.

Table 3. Top Three Mechanisms of Injury in Wyoming and Hamilton County, 2008-2009

Mechanism of Injury	Age Group	Wyoming Rate (2008-2009) <i>(per 1,000 residents)</i>	Hamilton County Rate (2008-2009) <i>(per 1,000 residents)</i>
Falls	0-19 years old	63.1	68.4
	20-64 years old	17.8	39.8
	65 or greater	70.4	112.2
Motor Vehicle Related	0-19 years old	9.0	17.3
	20-64 years old	9.7	24.2
	65 or greater	4.2	8.6
Struck by/against*	0-19 years old	47.4	53.1
	20-64 years old	14.5	27.2
	65 or greater	8.4	9.5

Table 4. Injury Related Deaths, Wyoming, 2004-2009

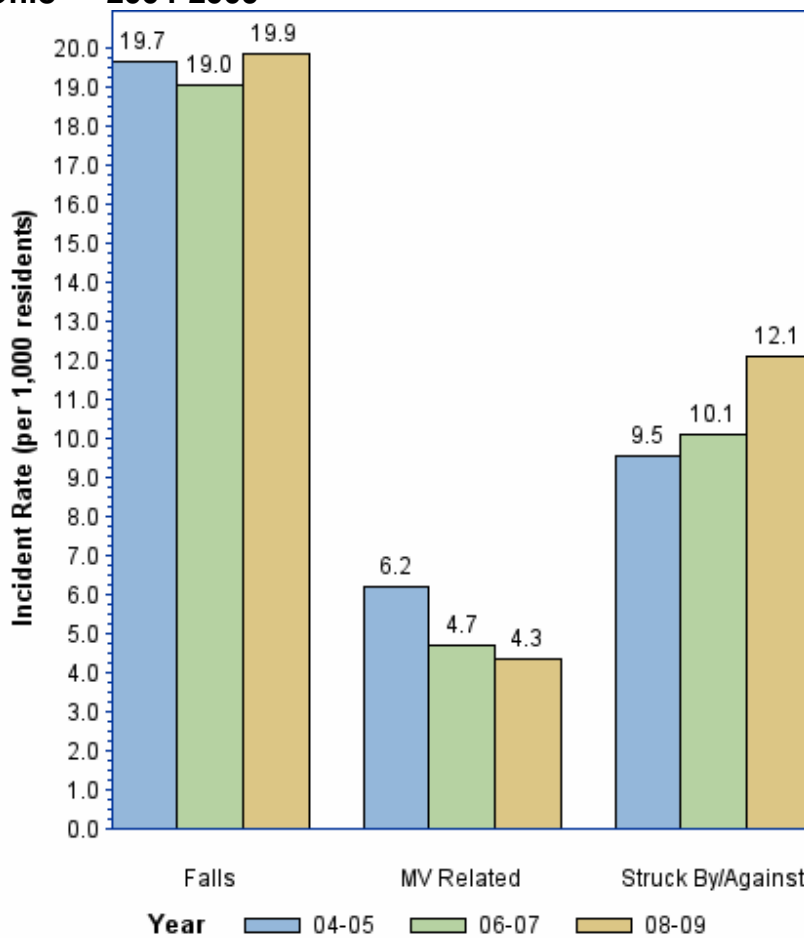
Mechanism of Injury	Year Group			Total
	2004-2005	2006-2007	2008-2009	
Fall	2	6	1	9
Firearm	1	0	0	1
Motor Vehicle Related	0	1	0	1
Poisoning	1	1	1	3
Suffocation	3	0	0	3
Total	7	8	2	17

* Injury resulting from being struck by (hit) or crushed by a human, animal, or inanimate object or force other than a vehicle or machinery; injury caused by striking (hitting) against a human, animal, or inanimate object or force other than a vehicle or machinery.

Reference:

¹Centers for Disease Control and Prevention, National Center for Injury Prevention and Control, Division of Injury Response. (2010). Core Violence and Injury Prevention Program (Core VIPP). Retrieved June 2, 2011 from <http://www.cdc.gov/injury/stateprograms/index.html>

Figure 2. Injury Rate for the Top Mechanisms of Injury by Year Group in Woodlawn, Ohio — 2004-2009



Note: Falls, motor vehicle related, and struck by/against were the top mechanisms of injury for Hamilton County. Injury rates in these categories for each municipality were calculated for each year. Years were aggregated into 2-year groupings. The rate displayed is the mean of the 2 year group.

Communicable Disease

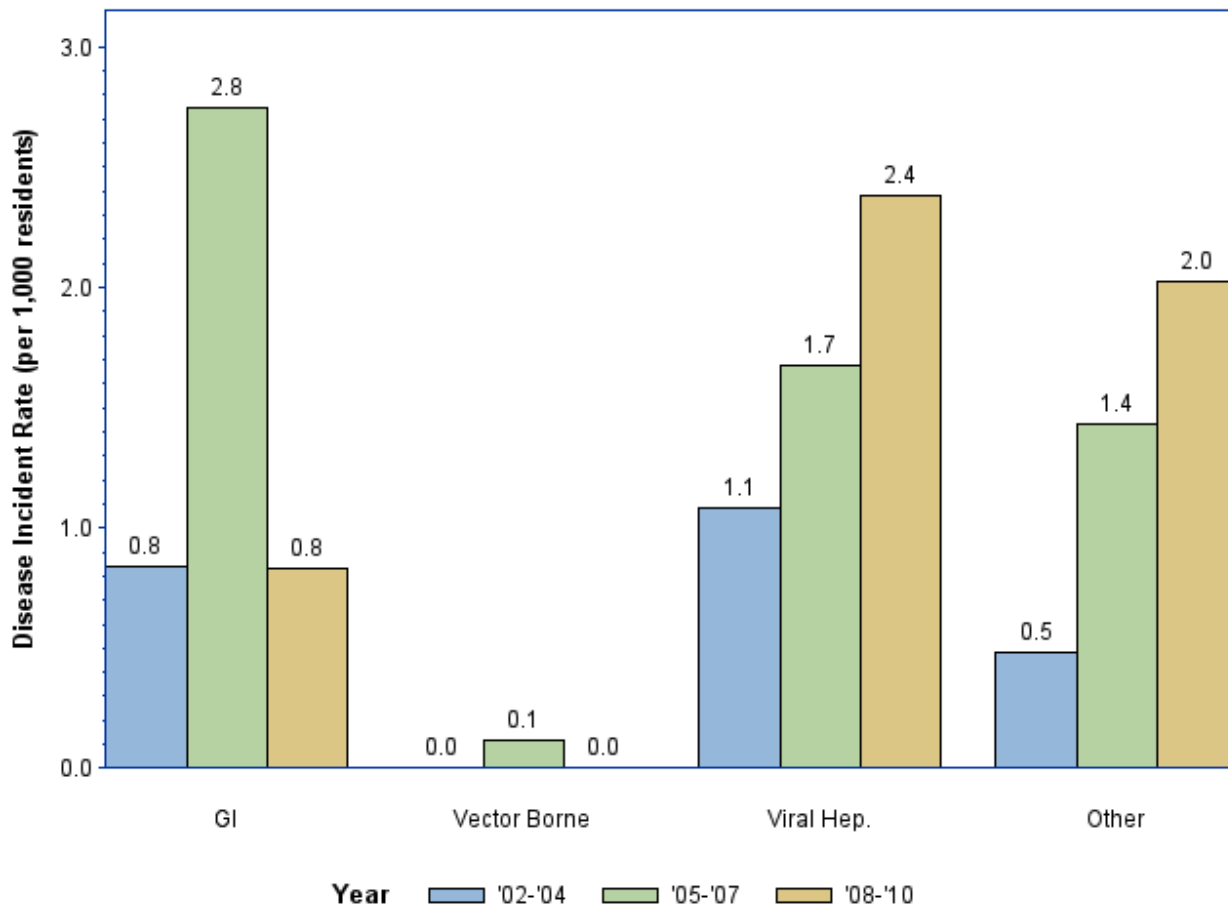
Communicable diseases are caused by several types of infectious agents that can be spread to humans and, therefore, present a threat to public health. These diseases often cause serious illnesses and some have the potential to compromise our food and water supplies resulting in community outbreaks. Traditionally, these diseases are transmitted by person-to-person contact, contaminated food or water, and/or contact with insects and animals that harbor disease. Hamilton County Public Health tracks these diseases daily in order to investigate sources of infection, detect trends, educate the public, and implement control measures and policies to prevent spread. Below is an overview of the reportable communicable diseases that affected your community during the nine year period between 2002-2010 (Table 5, Figure 3).

Table 5. Communicable Disease Statistics in Wyoming and Hamilton County, Ohio, 2002-2010

	Incidence Rate 2002-2004 <i>(per 1,000 residents)</i>		Incidence Rate 2005-2007 <i>(per 1,000 residents)</i>		Incidence Rate 2008-2010 <i>(per 1,000 residents)</i>	
	Wyoming	Hamilton County	Wyoming	Hamilton County	Wyoming	Hamilton County
GI	0.9	0.8	2.8	2.9	0.8	1.4
Vector Borne	0.0	0.1	0.1	0.2	0.0	0.2
Viral Hepatitis	1.1	4.0	1.7	4.6	2.4	3.8
STI	-	-	-	-	5.9	23.0
Other	0.5	1.2	1.4	2.0	2.0	2.4

Notes: Disease Type is comprised of diseases that normally fall into one of the following four categories: Gastrointestinal Diseases (GI), Animal/Vector-borne Diseases, Viral Hepatitis, Sexually Transmitted Infections (STI), and Other. Incidence Rate was omitted (-) for years in which no data were available. Years were aggregated into 3-year groupings. Rates shown are rounded to the nearest tenth for presentation.

Figure 3. Reportable Communicable Diseases by Disease Type and Year Group in Wyoming, Ohio — 2002-2010



Notes: Disease Type is comprised of diseases that normally fall into one of the following four categories: Gastrointestinal Diseases (GI), Viral Hepatitis, Animal/Vector-borne Diseases, and Other. Disease Types for which no data is displayed indicates zero incidences. Years were aggregated into 3-year groupings.

* For questions pertaining to this report, please contact the Division of Epidemiology and Assessment at (513) 946-7924.

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