Announcements

National Campaign to Prevent Falls in Construction — United States, 2013

Each day, on average, two construction workers die in the United States (*1*). In 2010, the 9.1 million construction workers (including self-employed workers) in the United States accounted for 7% of the national workforce (*2*), yet experienced 17.1% of fatal work-related injuries (*2*). In 2011, the rate of fatal injuries in construction was the second highest of any U.S. industry (*3*). Within the industry, falls at construction sites are the leading cause of death, accounting for 35% of deaths among private sector construction workers (not including government or self-employed workers) in 2011 (*1*); most of these deaths were attributed to falls from roofs, scaffolds, and ladders (*2*). Deaths and injuries from falls represent a major, persistent, yet preventable public health problem. Safe construction requires both skilled workers and responsible employers.

CDC's National Institute for Occupational Safety and Health has engaged the construction sector through a government/labor/management partnership, representing state and federal government agencies, professional organizations, trade associations, labor organizations, and private industry. The goal, in part, is to develop a national campaign aimed at construction contractors, onsite supervisors, and workers to address and reduce falls, fall-related injuries, and fall-related fatalities among construction workers. On Workers' Memorial Day, April 28, 2013, a national information and media campaign will be launched again through this partnership.

References

1. Bureau of Labor Statistics. Census of Fatal Occupational Injuries (CFOI)—current and revised data. Washington, DC: US Department of Labor, Bureau of Labor Statistics; 2012. Available at http://www.bls.gov/iif/oshcfoi1.htm#2011.
2. CPWR—The Center for Construction Research and Training. The construction chartbook. 5th ed. Silver Spring, MD: CPWR; 2013. Available at http://www.cpwr.com.
3. Bureau of Labor Statistics. Economic news release: census of fatal occupational injuries summary, 2011 (preliminary results). Washington, DC: US Department of Labor, Bureau of Labor Statistics; 2012. Available at http://bls.gov/news.release/cfoi.nr0.htm.

Amyotrophic Lateral Sclerosis (ALS) Awareness Month — May 2013

May is Amyotrophic Lateral Sclerosis (ALS) Awareness Month. ALS, also known as Lou Gehrig's disease, is a progressive, fatal, neurodegenerative disorder of both the upper and lower motor neurons. Persons with ALS usually die within 2–5 years of diagnosis. The etiology of ALS is not well understood, and currently there is no cure.

In October 2010, the federal Agency for Toxic Substances and Disease Registry (ATSDR) launched the National ALS Registry to collect and analyze data regarding persons with ALS in the United States. The main goals of the registry are to determine the incidence and prevalence of ALS within the United States, characterize the demographics of those living with ALS, and examine the potential risk factors for the disease. The registry uses data from existing national databases, including the Centers for Medicare and Medicaid Services and the U.S. Department of Veterans Affairs, as well as information provided by persons with ALS through a secure online web portal, available at http://www.cdc.gov/als. At the web portal, registrants can take brief online surveys regarding potential risk factors for the disease.

To achieve the registry's goals, ATSDR is collaborating with the ALS Association (http://www.alsa.org), Muscular Dystrophy Association (http://www.als-mda.org), Les Turner Foundation (http://www.lesturnerals.org), and other organizations to make all persons with ALS and their families aware of the opportunity to register in the National ALS Registry. When sufficient data have been gathered to provide a representative picture of persons with ALS, ATSDR will begin analyzing the data and providing deidentified information so that researchers can gain a better understanding of the disease.

In addition to enrolling persons with ALS, ATSDR also has undertaken various initiatives to help strengthen the registry. These include implementing active surveillance activities to help evaluate the completeness of the registry in three states and eight metropolitan areas, funding a bioregistry feasibility study to link potential specimen data collected (e.g., blood, saliva, and tissue) with existing registry surveys, and funding external research on ALS risk factors and burden of disease. Additionally, ATSDR has launched a new research notification mechanism that puts researchers directly in contact with registry enrollees who are interested in taking part in new clinical trials and epidemiologic studies. Additional information regarding these initiatives and the National ALS Registry is available at http://www.cdc.gov/als.