

Trend Shows Guns Gaining On Motor Vehicles as Cause of Death from Injuries

Firearms soon may exceed motor vehicles as the leading cause of death from injury in the United States, if recent trends persist, according to the National Center for Health Statistics (NCHS) (1).

NCHS is the Federal Government's principal vital and health statistics agency. NCHS data systems cover the health field from birth to death, including overall health status, lifestyle and exposure to unhealthy influences, the onset and diagnosis of illness and disability, and the use of health care. NCHS is part of the Public Health Service's Centers for Disease Control and Prevention.

Firearm Mortality Increasing

In 1991, more Americans were killed by guns than by motor vehicles in six States and the District of Columbia. By early in the next decade, the number of deaths nationwide from firearm-caused injuries could overtake those from motor vehicle injury. Firearm deaths include gun-related homicides, suicides, and unintentional deaths.

In the three States with the largest populations, firearms already are the leading cause of injury-related death. Nationwide, the cross-over has already occurred among those ages 25-34 years, with firearms causing more deaths among that age group than any other category of injury (see figure). There were more firearm-related deaths than motor vehicle deaths in California, New York, Texas, Louisiana, Nevada, Virginia, and the District of Columbia, in 1991. In Maryland, the numbers of firearm and motor vehicle deaths were identical in 1991; in Michigan, motor vehicle deaths exceeded deaths from firearms by 1 percent.

Nationwide, firearm mortality has been increasing while motor vehicle mortality has been declining. In 1991, 43,536 people died as a result of injuries sustained during motor vehicle crashes, and 38,317 people died as the result of firearm-related injuries. Among firearm deaths, 47 percent

were homicide, 48 percent were suicide, and 4 percent were classified as unintentional deaths. The national motor vehicle crash death rate declined by 10 percent, while the death rate from firearms increased by 14 percent in the period 1985-91. The trends accelerated in 1988-91.

A new NCHS report examines injury deaths for the nation and by State in detail for race and ethnic groups in 1990-91 (1). A related article from NCHS and CDC's National Center for Injury Prevention and Control appears in "Morbidity and Mortality Weekly Report," with comments on the trend and proposed means for firearm death prevention (2).

The increase in the firearm death rate during the late 1980s and 1990s reverses an earlier pattern. From 1980 through 1985, firearm mortality decreased by 11 percent. Motor vehicle mortality was already on a downward trend, declining 18 percent in 1980-85. Projecting from an analysis of data for the period 1968-91, researchers at CDC estimated that firearm deaths could exceed motor vehicle deaths nationwide by the year 2003. Using only recent years, 1988-91, the cross-over could occur by the mid-1990s.

Recent increases in firearm mortality have been greatest among adolescents and young adults. During 1988-91, the firearm death rate for those 15-24 years of age increased by 40 percent, and for those 25-34 years, the rate was up 8 percent. The firearm death rate was only 10 percent lower than the motor vehicle death rate for those 15-24 years, and the firearm death rate exceeded the motor vehicle rate for the 25-34-year age group.

Data Users Conference

The 1994 biennial NCHS Data Users Conference will be held July 20-22 at Bethesda, MD. The conference will present future health issues, new technologies, and data users' expectations for the future. The theme is "NCHS: Gateway to Future Health Information." The keynote address will be given by Bruce McConnell, Chairperson of the Government Information Working Group of the Information Infrastructure Task Force, a key group

in the development of the so-called information superhighway. The conference will include workshops, plenary sessions, exhibits, and demonstrations intended to further understanding and use of NCHS electronic data products.

Forty-two workshops in the 3-day conference will present specific data files and topics of current interest, such as health reform, health of the elderly, human immunodeficiency virus infection, minority group health concerns, and technology advances. The conference also is a forum for NCHS to learn more about current and potential data users and their needs, with group discussions to help NCHS staff members understand user needs. Data users may attend an overview session on NCHS data before the workshops. The conference is intended for experienced as well as first-time data users.

Exhibits will provide demonstrations of new NCHS electronic data products, such as data on diskette and CD-ROM. NCHS staff members will provide information on systems and will assist users in obtaining electronic and printed products.

Special software will be demonstrated that is designed to enhance States' capacity to monitor progress toward the Healthy People 2000 objectives. Software is designed to facilitate data input, data analysis, data storage and retrieval, data transfer to and from local health departments, and online inventories of data sources.

Special sessions will focus on data from specific NCHS data systems, confidentiality issues, the role of the NCHS research and methodology program, and pitfalls in designing survey questions. Users can obtain information on the vital statistics system in the session "Vital Registration Along the Superhighway."

Statistical Export and Tabulation System (SETS) is a software program created by NCHS to provide a cost-effective and efficient means of accessing and manipulating NCHS data on CD-ROM. SETS will be demonstrated in a separate workshop. SETS can be used with data from other sources, as well.

No registration fee is charged, but advanced registration is required by

June 24. The NCHS conference manager is Barbara Hetzler, NCHS, 6525 Belcrest Rd., Room 1100, Hyattsville, MD 20782; tel. (301) 436-7122.

Emergency Department Visits

Most visits to hospital emergency departments are not for emergencies, according to results of the first national survey of hospital emergency departments. Americans made almost 90 million visits to hospital emergency departments in 1992; 55 percent of those visits were nonurgent. The survey found that the elderly had the highest rate of visits to emergency departments in 1992. For every 100 persons 75 years of age and older, 56 visits were recorded. The next highest visit rate was for those 15-24 years of age, who had the highest rate of nonurgent visits.

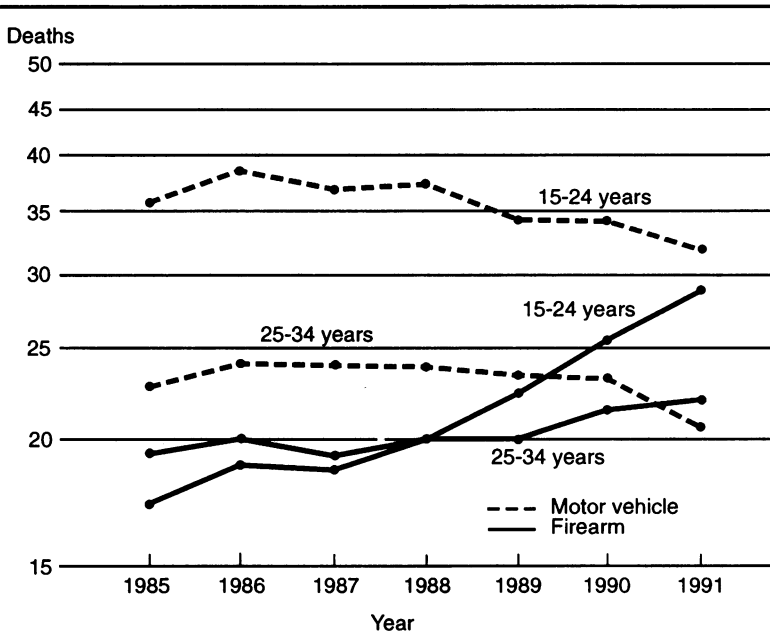
The visit rate for black Americans was significantly higher than for the white population overall. Differences were noted for all age groups, except for those 75 years and older.

Government was the most frequent source of payment for emergency care, covering a total of 42 percent of all visits. Medicaid was the expected source of payment for 23 percent of visits and Medicare for 15 percent. Private or commercial insurance accounted for 36 percent.

Results show that 59 percent of visits were made for illness and 35 percent for injury. The most frequently recorded illness was otitis media, or ear infection, accounting for more than 3.1 million visits. The most frequently recorded injury was head wound, with 2.6 million visits.

Almost 31.6 million visits to hospital emergency departments were made for injury. Teenagers and young adults had the highest rate of injury-related visits; males had higher rates than females. Accidental falls (7.6 million) were the most frequently specified cause of injury. Motor vehicle-related injuries (4 million) were next, followed by intentional injuries, including homicide (1.6 million). The newly presented data (3) cover the care provided in emergency departments of non-Federal, short-stay hospitals. A forthcoming report will profile care received in outpatient departments, the other setting for health care that is included in the National Hospital Ambulatory Medical Care Survey.

Firearm and motor vehicle crash death rates per 100,000 population 15-24 and 24-34 years of age, United States, 1985-91



SOURCE: Reference 1.

Conference on Records and Statistics

The newly published proceedings of the 1993 biennial Public Health Conference on Records and Statistics (4) includes abstracts of 128 plenary and workshop presentations. The conference emphasized the importance of data in the nation's disease prevention and health promotion policy, particularly data support and measurement issues for major goals of Healthy People 2000, such as to increase the span of health life, reduce health disparities, and improve access to preventive services. Sessions focused on the health of special groups, such as minorities, children, and the aged; major concerns, such as nutrition, injury, and disability; and methodology issues, such as race and ethnicity, linkage, and confidentiality. The conference linked prevention and health reform issues and dealt with the measurement of the quality, cost, access, and effectiveness and outcomes of health care.

—SANDRA SMITH, NCHS Public Affairs Officer

NCHS publications and assistance in obtaining printed and electronic data products are available from NCHS, Data Dissemination Branch, Room

1064, 6525 Belcrest Rd., Hyattsville, MD 20782; tel. (301) 436-8500.

Copies of the Proceedings of the 1993 Conference on Records and Statistics are available from NCHS Conference Management Staff, OPEP, Room 1100, 6525 Belcrest Rd., Hyattsville, MD 20782.

References

1. Fingerhut, L., Jones, C., and Makuc, D.: Firearm and motor vehicle injury mortality—variations by state, race and ethnicity: United States, 1990-91. Advance Data from Vital and Health Statistics, No. 242. DHHS Publication No. (PHS) 93-1250. Centers for Disease Control and Prevention, National Center for Health Statistics, Hyattsville, MD, 1994.
2. MMWR Morb Mortal Wkly Rep 43: 37-42, Jan. 28, 1994.
3. McCaig, L.: National Hospital Ambulatory Medical Care Survey: 1992 emergency department summary. Advance Data from Vital and Health Statistics, No. 245. DHHS Publication No. (PHS) 93-1250. Centers for Disease Control and Prevention, National Center for Health Statistics, Hyattsville, MD, 1994.
4. Proceedings of the 1993 Public Health Conference on Records and Statistics: toward the year 2000—refining the measures. DHHS Publication No. (PHS) 94-1214. Centers for Disease Control and Prevention, National Center for Health Statistics, Hyattsville, MD, 1994.