



**Public Health Department**

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## Health Advisory

To: Butte County Clinicians and Health Care Providers

From: Andy Miller, M.D. (signed original on file)

Date: December 2, 2019

Re: E-Cigarette and Vaping Associated Lung Injury (EVALI)

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### **PURPOSE**

BCPHD urges providers to report cases of E-Cigarette and Vaping Associated Lung Injury (EVALI) (also known as Vaping-associated Pulmonary Injury (VAPI)).

### **BACKGROUND**

As of **November 20, 2019**, 2,290\* cases of e-cigarette, or vaping, product use associated lung injury (EVALI, also referred to as vaping associated pulmonary injury or VAPI) have been reported from 49 states, the District of Columbia, and 2 U.S. territories. Forty-seven of these cases resulted in death. No infectious etiology has been found. The lung injuries sustained are consistent with chemical injury.

Among the 166 California cases (as of Nov 19, 2019):

- 63% are male
- Median age is 27 yrs (age range 14 – 70 yrs)
- 42% required ICU admission
- 28% required mechanical ventilation
- 2% (4 patients) died
- 82% reported using THC containing products; 10% reported only nicotine products
- Most, but not all, reported obtaining vaping products from informal sources, including illicit street vendors, pop-up shops, social contacts, or retailers that could not be located and/ or verified as licensed.

### **SUSPECT CAUSATIVE AGENTS**

Vitamin E acetate, which might be used as an additive in THC containing vaping products, has been implicated as one possible cause of EVALI. However, CDC does not yet have sufficient evidence to rule out other chemicals as also being causal agents for EVALI. Many different substances and product sources remain under investigation, and the cause may not be limited to only one chemical agent.

## **REPORTING**

Due to the ongoing threat to public health posed, BCPHD is asking healthcare providers to promptly report all suspected cases of EVALI within one day of identification by calling the BCPHD at (530) 552-3929 or by submitting a Confidential Morbidity Report electronically or by fax to (530) 538-5387. BCPHD requests providers report upon first suspicion of EVALI and not wait until the diagnosis has been confirmed.

## **CLINICAL MANAGEMENT**

Health care providers are urged to ask about the use of e-cigarette, or vaping, products when evaluating patients with respiratory symptoms (cough, chest pain, and shortness of breath), gastrointestinal symptoms, or constitutional symptoms (e.g., fever, chills, and weight loss). All patients with compatible symptoms and a vaping history should be assessed for EVALI according to the CDC algorithm [Update: Interim Guidance for Health Care Providers for Managing Patients with Suspected E-cigarette, or Vaping, Product Use–Associated Lung Injury — United States, November 2019 | MMWR](#).

If EVALI is suspected, [a detailed history](#) of the substances used, the sources of products, duration and frequency of use, and the devices used and how they are used should be obtained, as outlined in [Update: Interim Guidance for Health Care Providers for Managing Patients with Suspected E-cigarette, or Vaping, Product Use–Associated Lung Injury — United States, November 2019 | MMWR](#) and [Fact Sheet for Evaluating and Caring for Patients with Suspected EVALI](#). EVALI remains a diagnosis of exclusion. Prompt recognition of EVALI in a patient will help to ensure optimal clinical management.

## **ONGOING INVESTIGATIONS**

As the investigation into EVALI continues, CDC and FDA are expanding the range of available laboratory testing to support health departments in evaluating possible cases of EVALI. Prompt reporting of cases will facilitate public health case investigation, including patient interview and collection of requested vape samples. Your diligence in identifying and reporting suspect EVALI cases is greatly appreciated.

### **Resources:**

- Update: Interim Guidance for Health Care Providers for Managing Patients with Suspected E-cigarette, or Vaping, Product Use–Associated Lung Injury — United States, November 2019. [Update: Interim Guidance for Health Care Providers for Managing Patients with Suspected E-cigarette, or Vaping, Product Use–Associated Lung Injury — United States, November 2019 | MMWR](#)
- Fact Sheet for Evaluating and Caring for Patients with Suspected EVALI. [https://www.cdc.gov/tobacco/basic\\_information/e-cigarettes/severe-lung-disease/healthcare-providers/pdfs/evaluating-caring-evali-patients.pdf](https://www.cdc.gov/tobacco/basic_information/e-cigarettes/severe-lung-disease/healthcare-providers/pdfs/evaluating-caring-evali-patients.pdf)
- CDPH: Weekly EVALI Update, California. <https://www.cdph.ca.gov/Programs/CCDPHP/Pages/EVALI-Weekly-Public-Report.aspx>

### **Categories of urgency levels:**

**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