



N.C. Department of Health and Human Services

Approach to Monitor Adverse Health Outcomes and Environmental Hazards Related to Natural Gas Extraction in North Carolina

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Background

- 2008: NC Geological Survey identifies state's Triassic-era shale rock formations as potential gas resource
- 2014: State adopts rules for regulatory program for shale gas extraction activities
- 2015: Began accepting permit requests for drilling for natural gas
- Currently, shale gas extraction activities halted



Aims

- Describe potential impact of natural gas extraction on human health in North Carolina
- Identify populations at risk
- Monitor health outcomes and environmental hazards prospectively and report findings to local and state partners



Approach

- Integrate available data from national and statewide sources
- Prioritize outcomes related to worker safety and health of surrounding communities
- Develop a health risk and health outcome baseline
- *Compare data collected after initiation of activities to baseline data
 - Or can compare to cities and counties with no activity



Questions (cont'd)

- Acute injury/illness
 - Does rate of injuries (slips, trips, falls) among workers increase where these activities take place?
 - Does rate of injuries from burns, respiratory or cardiovascular events increase (in communities near affected areas)?
 - Is there an increase in injuries related to motor vehicle accidents (state, county, city)?



Questions (cont'd)

- Environmental hazards
 - Is there an increase of toxic substance incidents in areas where these activities take place?
 - Do these incidents occur in or near areas with vulnerable populations?
 - Is there an increase in level of contaminants in private domestic well water?



Acute Injury/Illness

- North Carolina Disease Event Tracking and Epidemiologic Collection Tool (NC DETECT)
 - Statewide web-based surveillance system
 - Managed by NC Division of Public Health and UNC-CH's Carolina Center for Health Informatics
 - Maintains data for:
 - All hospital emergency departments in NC
 - Pre-hospital events (i.e., EMS)
 - Carolinas Poison Center



Acute Injury/Illness

- Data collected:
 - Date and time of event
 - Location (e.g., county, city, hospital)
 - Age and gender of patient
 - Dispatch complaint (EMS)
 - Diagnosis and injury codes (ED)
 - Exposure (Poison Center, track by substance)
 - Disposition (proxy for severity of visit)
 - Payer source (e.g., worker's compensation)



Acute Injury/Illness

- Potential outcomes to monitor:
 - Slips, trips, and falls
 - Burns/chemical exposures
 - Injuries due to motor vehicle accidents
 - Workers and injury to other drivers
 - Respiratory events (e.g., asthma)
 - Cardiovascular events (e.g., heart attacks)
 - Non-specific symptoms (e.g., breathing difficulty, headache)



Toxic Substance Incidents

- Application of National Toxic Substance Incidents Program (NTSIP) for North Carolina
 - Established in 2010 by ATSDR
 - Builds on Hazardous Substance Emergency Events Surveillance (HSEES) program
 - Active from 1990 to 2009
- Surveillance to monitor acute toxic substance incidents and their public health impact



Toxic Substance Incidents (cont'd)

- Incident defined as uncontrolled or illegal acute emergency release that meets Program's eligibility criteria
 - Criteria based on toxicity of chemical and amount released
- Incidents identified from example sources:
 - US Department of Transportation
 - NC Emergency Management
 - Media reports
 - Local health departments



Toxic Substance Incidents (cont'd)

- Program collects detailed information for each incident
 - Date, time, and location of incident
 - Responsible party
 - Specific toxic substance(s) released
 - Amount released
 - Type of event (fixed facility vs. transport)
 - Number of persons injured and evacuated
 - Severity of injury
 - Response to incident



Private Wells for Drinking Water

- Working with NC State Laboratory of Public Health to develop data-sharing mechanism
- Also, opening dialogue with Laboratory on existing capacity to test for contaminants that may be found in water from gas extraction



Strengths/Limitations

- Strengths
 - Application of approach of existing programs and their data sources
- Limitations
 - Specific chemicals used
 - Mixed exposures
 - Exposures from multiple routes



Conclusion

- Assist local health departments to identify driving factors that may affect severity and frequency of adverse health outcomes and toxic substance incidents



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