

Cannabis and Health

Module 11: Neurocognitive/Brain Disorders Part I

Lecture 2: Epidemiology of MS, Epilepsy, Traumatic
Brain Injury

Epidemiology of MS

- 400,000 people in the U.S. and about 2.5 million people worldwide are diagnosed with MS
- Onset is typically between the age of 20 and 40
- Women 2x more likely to be diagnosed than men
- Prevalence is higher Northern European and northern North American regions (~ 30 per 100,000)
- Prevalence has been increasing over time (maybe because people are living longer)

Epidemiology of Epilepsy

- Epilepsy affects at least 50 million people worldwide
 - one of the most common neurological diseases
- Affects approximately 2.3 million U.S. adults
- Nearly 80% of people with epilepsy live in low- and middle-income countries
- About 75% of people with epilepsy in low- and middle-income countries do not get the treatment they need
- Up to 10% of people worldwide have one seizure during their lifetime
 - At least 2 unprovoked seizures are needed to diagnose epilepsy

World Health Organization: <https://www.who.int/news-room/fact-sheets/detail/epilepsy>

Epidemiology of Epilepsy

- The estimated proportion of general population with active epilepsy at a given time is between 4 and 10 per 1000 people.
- Studies in low- and middle-income countries suggest that the proportion is much higher, between 7 and 14 per 1000 people
- Globally, an estimated 2.4 million people are diagnosed with epilepsy each year

Comorbidities and Complications of Epilepsy

- Mood disorders
 - anxiety and depression are common
- Headache, migraine, other types of pain
- Sleep disorders
- Neurocognitive disorders
- Cardiovascular conditions (high blood pressure, stroke)
- Respiratory conditions (asthma, chronic bronchitis)
- Metabolic disorders
- Inflammatory disorders (arthritis, dermatitis)

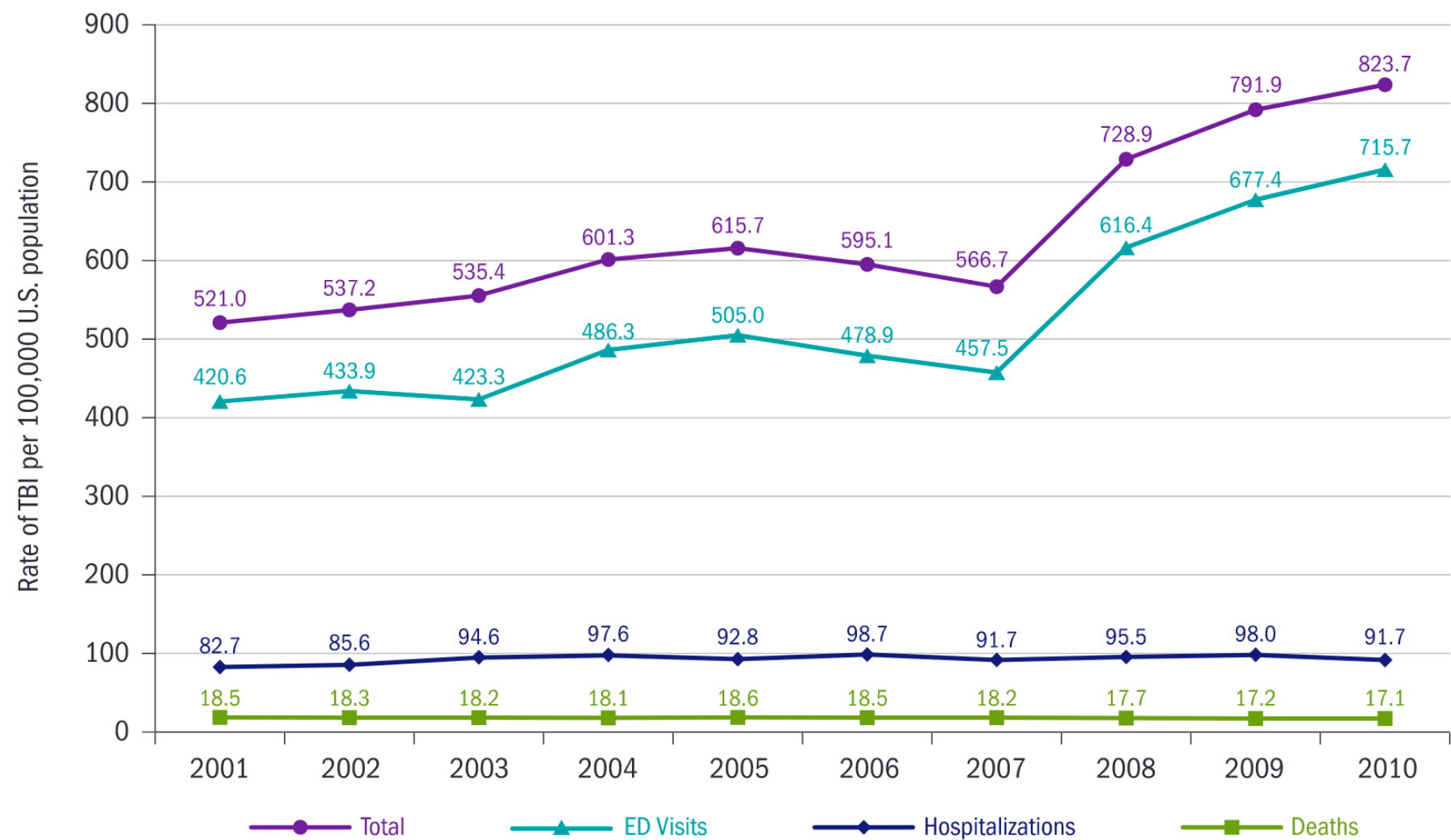
Epilepsy: Some Known Risk Factors

- Causes of epilepsy not completely understood, but risk factors include:
 - Babies who are born small for their age
 - Babies who have seizures in the first month of life
 - Bleeding into the brain
 - Serious brain injury or lack of oxygen to the brain
 - Brain tumors Infections of the brain
 - Stroke resulting from blockage of arteries
 - Cerebral palsy
 - Conditions with intellectual and developmental disabilities
 - Family history of epilepsy or fever-related seizures
 - Alzheimer's disease (late in the illness)
 - Autism spectrum disorder

Epidemiology of TBI in the United States

- In 2010, the CDC estimated that TBIs accounted for ~2.5 million ED visits, hospitalizations, and deaths in the U.S.
 - 87% treated and released from EDs
 - 11% hospitalized and discharged
 - 2% died
- These numbers underestimate occurrence of TBIs
 - Don't account for people who did not receive medical care, had outpatient or office-based visits, or received care at the VA
- Dept. of Defense data: from 2000 through 2011
 - 235,046 service members (or 4.2% of people who served in the Army, Air Force, Navy, and Marine Corps) were diagnosed with TBI

Figure 1. Annual age-adjusted rates of TBI-related Emergency Department (ED) visits, hospitalizations, and deaths—United States, 2001–2010



Epidemiology of TBI in the United States

- Children 0–4 years, adolescents 15–19 years, and adults 75 years older are most likely to have TBI-related ED visit or be hospitalized for TBI
- Adults 75 years older have highest rates of TBI-related hospitalizations and deaths among all age groups
- Leading causes of non-fatal TBI in the U.S. are falls (35%), motor vehicle-related injuries (17%), and strikes or blows to the head (17%)
- Leading causes of TBI-related deaths are motor vehicle crashes, suicides, and falls

Public Health Impact of TBI

- Estimates indicate that 3.2–5.3 million people in the U.S. are living with TBI-related disability
- Adolescents and adults with moderate or severe TBI more than twice as likely to die 3.5 years after injury
- Among adolescents and adults who received rehabilitation for TBI, 2/10 will have died at 5 years post-injury, and nearly 4/10 will have declined in function

Public Health Impact of TBI

- TBI can adversely affect a person's quality of life
 - cognitive, behavioral/emotional, physical effects that affect interpersonal, social and occupational functioning
- TBI can negatively affect families
 - caregiver distress, depression, and deterioration of family functioning after TBI
- TBI can negatively effect communities and the economy
 - Impaired community participation
 - Difficulty securing/maintaining employment
 - High medical costs for some people with TBI

Co-morbidities and Complications of TBI

- seizures
- sleep disturbance
- fatigue
- infections
- neurodegenerative disease
- neuroendocrine dysregulation
- psychiatric disorders
 - depression, anxiety, substance use disorders
- chronic pain or headache

Factors Influencing TBI Outcomes

- type and severity of TBI
- medical care received
- age
- pre-injury functioning
- socioeconomic status
- social support
- caregiver and family functioning
- access to rehabilitation services
 - lack of specialty providers
 - lack of financial resources
 - level of insurance coverage

Conclusions

- MS impacts about 2.5 million people worldwide and women are 2.5x likely to have MS
- Epilepsy impacts about 2.4 million people worldwide
- CDC estimates that TBI involve in over 2.4 million hospital ED visits per year in the U.S. alone