



## HEALTH UPDATE 224

### Enhance Awareness for Pulmonary Illness Associated with Vaping

**TO:** West Virginia Healthcare Providers, Hospitals and Other Healthcare Facilities

**FROM:** Matt Christiansen, MD, MPH, State Health Officer, West Virginia Department of Health, Bureau for Public Health

**DATE:** October 22, 2024

**LOCAL HEALTH DEPARTMENTS:** Please distribute to community health providers, hospital-based physicians, infection control preventionists, laboratory directors, and other applicable partners

**OTHER RECIPIENTS:** Please distribute to association members, staff, etc.

#### Background

E-cigarette or vaping product use–associated lung injury (EVALI) is a severe pulmonary illness associated with the use of e-cigarettes or vaping products. EVALI was first identified in late 2019 when the Centers for Disease Control and Prevention (CDC), the Food and Drug Administration (FDA), along with state and local health departments investigated a nationwide outbreak of the disease. Reported cases had a high hospitalization rate and were primarily among adolescents and young adults. EVALI was primarily linked to the vitamin E acetate additive in tetrahydrocannabinol (THC)-containing vaping products. Cases of EVALI began to decline in early 2020, in part, due to rapid public health action to promote public awareness of the disease.

However, EVALI is still a public health concern for West Virginia considering the state’s high rate of e-cigarette and vaping use. The West Virginia Bureau for Public Health encourages healthcare providers to consider EVALI as a differential diagnosis when treating patients with severe pulmonary symptoms who report a history of vaping.

#### Clinical Presentation and Evaluation

Symptoms of EVALI mimic an acute respiratory illness with symptoms including shortness of breath, fever, cough, fatigue and gastrointestinal symptoms (nausea, vomiting, abdominal pain, and diarrhea). Other symptoms may include weight loss, dizziness and chest pain. Symptoms may worsen over a period of days or weeks before admission to the hospital. On hospital admission, most patients are febrile, tachycardic and hypoxic. Symptoms may result in hospitalizations lasting multiple weeks with some patients requiring mechanical ventilation. Clinicians should ask patients who report pulmonary symptoms about vaping. Consultation with pulmonologists should be considered when treating patients who have pulmonary symptoms and report a history of vaping. Because symptoms are similar to those with an infection, a thorough evaluation for infectious diseases should be conducted.

If vaping is suspected as the etiology of a patient’s illness, it is important to inquire what type of product as well as if the patient is using commercially available devices and/or liquids; sharing products (devices, liquids, refill

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pods and/or cartridges) with other people; reusing old cartridges or pods (with homemade or commercially bought products) or heating the drug to concentrate it and then using a specific type of device to inhale the product (i.e., “dabbing”).

### **Recommendations for Healthcare Providers**

1. Patients with severe pulmonary illnesses of unknown etiology should be asked about e-cigarette or vaping use. Those patients with a history of e-cigarette or vaping should be further evaluated for EVALI.
2. Educate Patients:
  - Not to use THC-containing e-cigarette, or vaping, products, particularly those from informal sources such as friends, family members, or from in-person or online dealers.
  - Patients should not modify or add any substances to e-cigarette, or vaping, products that are not intended by the manufacturer.
  - Adults using e-cigarette, or vaping, products as an alternative to cigarettes should not go back to smoking. Provide patient education on tobacco cessation options.
  - Youth, young adults, and pregnant women should never use e-cigarette or vaping products.
3. When treating patients with severe pulmonary symptoms who report a history of vaping, consider consultation with a pulmonologist and rule out common infectious and non-infectious etiologies.

For more information, contact the West Virginia Bureau for Public Health, Office of Epidemiology and Prevention Services (OEPS), at (304) 558-5358 or Division of Tobacco Prevention at (304)-352-6007

### **Resources**

Health Effects of Vaping: <https://www.cdc.gov/tobacco/e-cigarettes/health-effects.html>.

Interim Guidance for Health Care Providers for Managing Patients with Suspected EVALI: [https://www.cdc.gov/mmwr/volumes/68/wr/mm6846e2.htm?s\\_cid=mm6846e2\\_w](https://www.cdc.gov/mmwr/volumes/68/wr/mm6846e2.htm?s_cid=mm6846e2_w).

The E-cigarette or Vaping Product Use–Associated Lung Injury Epidemic: Pathogenesis, Management, and Future Directions: An Official American Thoracic Society Workshop Report: <https://pmc.ncbi.nlm.nih.gov/articles/PMC9819258/>.

West Virginia Division of Tobacco Prevention: <https://dhhr.wv.gov/wvdtpp/Pages/default.aspx>.

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