

# Caring for Vulnerable Persons During a Heat Wave

## Having a health emergency?

Call 911 and contact your doctor.

Talking to patients during routine visits about how they can prevent heat-related illness can go a long way toward avoiding such illnesses. Simple steps can make a big difference, particularly for high-risk patients. These steps include:

- Staying in cool, air-conditioned places;
- Limiting strenuous outdoor activities; and
- Keeping well hydrated.

Here are some simple steps you can take to help your high-risk patients:

- Identify cool, air-conditioned public places in your community, and tell your at-risk patients about them. This helps them to help themselves when things get too hot at home.
- Tell them about the warning signs of heat stroke, heat exhaustion, or complications of chronic illness that might be triggered by extreme heat. This helps patients recognize when they are in trouble and get assistance if they need it.

While heat-related illness can strike anyone under the wrong circumstances, certain people are at higher risk. Older adults, infants, pregnant or breast feeding women, and those who are sick or overweight are more likely to become ill in extreme heat events.

## Conditions that put people at increased risk during heat waves

Chronic Illness	Heart disease, high blood pressure, diabetes, cancer or kidney disease, alcohol and other substance use, mental illness
Conditions that impair sweating	Heart disease, dehydration, extremes of age, skin disorders (including sunburn, prickly heat and excessive scarring and burns), congenital impairment of sweating, cystic fibrosis, quadriplegia, scleroderma, people taking medications with anti-cholinergic effects
Acute illness	
Impaired activities of daily living	Poor mobility, cognitive impairment
Social factors	Living alone or socially isolated, low socioeconomic status, homelessness
Occupation/recreation	Exercising vigorously in the heat or working in a hot environment

Source: Victoria Australia State Government, 2010

National Weather Service  
<http://www.weather.gov/view/national.php?thumbs=on>

American Red Cross  
<http://oregonredcross.org/index.asp?IDCapitulo=663B0ID44V>

Environmental Protection Agency  
<http://www.epa.gov/>



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## Local Health Departments

Baker .....	541-523-8211
Benton.....	541-766-6835
Clackamas .....	503-655-8430
Clatsop .....	503-325-8500
Columbia .....	503-397-4651
Coos .....	541-756-2020
.....	ext. 510
Crook.....	541-447-5165
Curry.....	541-247-3300
Deschutes.....	541-322-7400
Douglas .....	800-234-0985
Gilliam .....	541-384-2061
Grant .....	541-575-0429
Harney.....	541-573-2271
Hood River .....	541-386-1115
Jackson .....	541-774-8209
Jefferson.....	541-475-4456
Josephine .....	541-474-5325
Klamath .....	541-882-8846
Lake .....	541-947-6045
Lane.....	541-682-4041
Lincoln.....	541-265-4112
Linn.....	541-967-3888
Malheur.....	541-889-7279
Marion.....	503-588-5357
Morrow .....	541-676-5421
Multnomah .....	503-988-3674
Polk .....	503-623-8175
Sherman.....	541-506-2600
Tillamook.....	503-842-3900
Umatilla.....	541-278-5432
Union.....	541-962-8801
Wallowa .....	541-426-4848
Wasco.....	541-506-2600
Washington .....	503-846-8881
Wheeler .....	541-763-2725
Yamhill.....	503-434-7525

V.1.0 revised 08/2011

## Medications and heat waves

Some medications can increase the risk of heat-related illness or may be less effective or more toxic when exposed to high temperatures. Care planning for vulnerable patients during hot weather should include consultation with a health care provider or pharmacist about the use and storage of medications.

## Mechanisms for medication increasing the risk of heat-related illness

Reduced vasodilatation	Beta-blockers
Decreased sweating	Anticholinergics; e.g., tricyclic antidepressants and benztrapine, beta blockers antihistamines, phenothiazines
Increased heat production	Antipsychotic drugs; e.g., risperidone, olanzapine. Stimulants; e.g., amphetamine, cocaine
Decreased thirst	Butyrophenones; e.g., haloperidol and droperidol. Angiotensin-converting enzyme (ACE) inhibitors
Dehydration	Diuretics, alcohol
Aggravation of heat illness by worsening hypotension in vulnerable patients	Vasodilators; e.g., nitrates, calcium channel blockers, other anti-hypertensives
Increased toxicity for drugs with a narrow therapeutic index in dehydration	Digoxin, lithium, warfarin

Source: Victoria Australia State Government, 2010

## Is your practice ready for a heat wave?

Providing a cool waiting room with readily available drinking water puts you and your patients in a good position to deal with a heat wave. Likewise, ensure clinic personnel are protected from heat-related illness with blinds closed to block the sun, water breaks as needed for staff, and a response plan in case power goes out.

**For more information**, see *If You Can't Stand the Heat, Find an Air Conditioner*, the June 7, 2011, issue of the Public Health Division's *CD Summary*, available at <http://healthoregon.org/cdsummary>.

## Helpful documents

[FEMA – First Aid for Heat-Induced Illnesses](#)

[CDC – Personal safety in extreme heat](#)

[New York City Health Department – Heat-related morbidity and mortality information for health care providers \(PDF\)](#)

Healthy Oregon

