



NEW YORK CITY DEPARTMENT OF
HEALTH AND MENTAL HYGIENE
Ashwin Vasani, MD, PhD
Commissioner

2022 Health Alert #17: Extreme Heat Event August 4 and 5, 2022: Help Prevent Heat-Related Deaths

Please distribute to all clinical staff in primary care, family medicine, geriatrics, internal medicine, psychiatry, pharmacy and emergency medicine.

August 4, 2022

Dear Colleagues,

A heat advisory is in effect for Thursday, August 4 and Friday, August 5, with heat indices forecasted to be over 100 on Thursday and in the upper 90s on Friday.

Extreme heat is the deadliest type of extreme weather. It can cause hyperthermia and worsen existing medical conditions and mental health problems. Structural racism and the resulting social and economic inequities increase the risk of heat stress for Black New Yorkers, who are twice as likely to die from heat as White New Yorkers. Most people who die of heat stroke in New York City did not have or use air conditioners and were overcome by heat in their homes. Fans do not provide sufficient cooling during extreme heat. Air conditioning (AC) is the most effective protection.

Recommendations for Providers:

- Remind people to use AC during extreme heat and limit outdoor activity. Suggest setting ACs to 78°F or “low cool” to provide comfort, save on electricity bills, and conserve energy.
- Encourage people who do not have or use AC to visit others with AC or a cooling center, even for a couple of hours. Call 311 or go to maps.nyc.gov/oem/cc to find a cooling center.
 - Remind people to continue seeking cool spaces after the heat advisory ends, as un-air-conditioned homes can remain dangerously hot for a few days after outdoor temperatures drop.
- Review medications that may impact thermoregulation with patients.
- Engage caregivers and other support networks to help friends, family and neighbors to stay cool.
- Discuss symptoms of heat-related illness and risk of exacerbating chronic health conditions.
- Advise increased fluid intake when medically appropriate. Recommend self-monitoring, such as bodyweight measurement, to monitor hydration for patients with health conditions sensitive to fluid balance or using medications that can impair thermoregulation or cause dehydration.

People at greatest risk do not have or use AC and have one or more of the following factors*:

- Chronic health conditions (cardiovascular/renal disease, respiratory conditions, obesity, diabetes)
- Mental health problems including but not limited to depression, anxiety, and schizophrenia
- Dementia, cognitive difficulty, difficulty with self-care, or difficulty thermoregulating
- Use of diuretics, anticholinergics, psychotropics, or any medications affecting thermoregulation
- Substance use disorder or excessive alcohol consumption
- Social isolation or limited mobility.

*Older adults (age ≥ 60) are more likely to have one or more of these factors.

Immediately report deaths where heat exposure is suspected as a direct or contributing cause to the New York City Office of Chief Medical Examiner at 212-447-2030.

Sincerely,

Carolyn Olson

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