

PREVENTING HYPOTHERMIA

(Adapted from Morbidity and Mortality Weekly Report, Dec. 11,1998)

Hypothermia is an abnormally low internal body temperature. It develops when body heat is lost to a cool or cold environment faster than it can be replaced. It may also result from a combination of heat loss due to wind exposure (convection), and exposure to a cold environment (radiation). Hypothermia can be a medical emergency and its severity is indicated by the degree to which core body temperature is lowered. Risk for death from hypothermia is related to age, preexisting disease, nutritional status and alcohol and drug intoxication. Social isolation and homelessness, especially in combination with chronic disease, may also add to risk.

Death rates increase with age. The elderly are at highest risk for mortality due to lack of appropriate vasoconstriction in response to cold environments, decreased basal metabolic rate, impaired shivering mechanism and underlying disease. Infants under one year of age are also particularly susceptible. The onset of hypothermia is often insidious. Early signs include shivering, numbness, fatigue, poor coordination, slurred speech, impaired mental state, blueness or puffiness of the skin and irrationality. Morbidity and mortality can be prevented by early recognition of symptoms and prompt medical attention.

Persons who are outdoors for extended periods during cold weather should wear insulated or layered clothing, including headgear that does not retain moisture, maintain fluid and calorie intake, abstain from drinking alcoholic beverages and avoid overexertion and excessive sweating.

Persons who live alone should arrange for a daily check in call with a neighbor, friend or relative. Other preventive measures include; proper home insulation, especially caulking, several warm, loose layers of clothing including hat and scarf, use of extra blankets, nutritious food and adequate non alcoholic fluids and moderate exercise.



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