

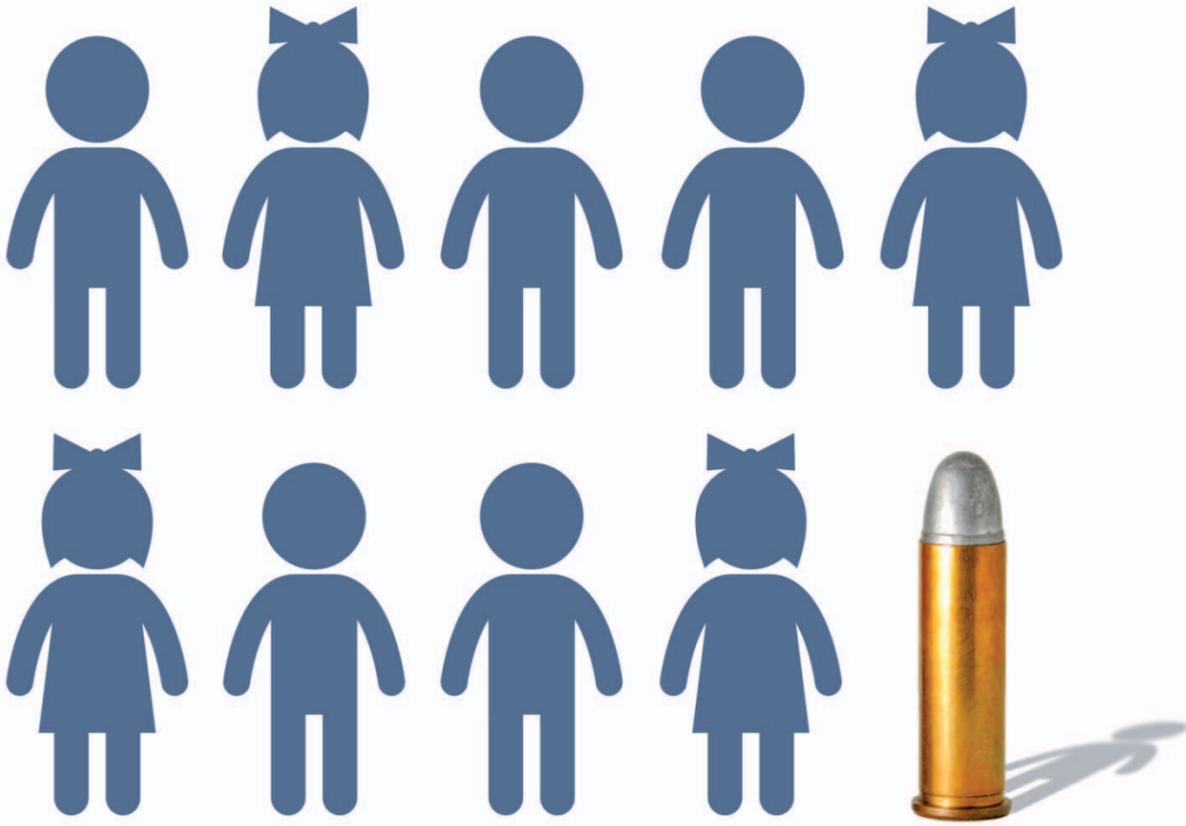
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KIDS WHO DIE: 1 IN 10 KILLED BY GUNS



That's nearly 1,300 children in U.S. each year; thousands more end up in hospitals

By **Melissa Healy** *Tribune News Service*

Handguns and other firearms cause the deaths of more children in the United States each year than the flu or asthma, according to a comprehensive new report on gun violence and kids.

Each day in the United States, an average of 3.5 people younger than 18 are shot to death and another 15.5 are treated in a hospital emergency department for a gunshot wound. Between 2012 and 2014, an average of 1,287 children and adolescents died each year as a result of gun violence, making firearms second only to motor vehicle crashes as a cause of injury-related deaths. Another 5,790 were treated for gunshot injuries in U.S. hospitals.

Here's another way to look at it: In the United States, a gun is the cause of death for more than 1 in 10 children.

The number of child fatalities related to guns is far higher in the U.S. than in any other high-income country. Another study has reckoned that the U.S. accounts for 91 percent of all the firearms-related deaths of children younger than 14 in the world's 23 richest countries.

The new analysis, published last week in the journal *Pediatrics*, represents an unusually comprehensive look at the toll that guns take on children. It draws from federal databases of injuries and deaths, hospital records, and an effort launched in 2003 to track violent deaths and the circumstances surrounding them in at least 17 states so far.

The majority of the nearly 1,300 children killed in gun-related incidents each year are boys ages of 13-17. In homicides,

which represent an average of 53 percent of annual gun-related deaths among children, African-American youths are the most likely victims.

Indeed, African-American children were found to have the highest rates of death-by-firearm — 4.1 per 100,000 between 2012 and 2014 — of any ethnic group counted. That's a major reason why the annual rate of homicide fatalities for African-American children (3.5 per 100,000) was nearly twice as high as the rate for Native American children (2.2 per 100,000). Black children's rate of firearm-related fatalities was four times higher than the rate for Latino children (0.8 per 100,000), and roughly 10 times higher than the rate for white children and Asian-American children (each 0.4 per 100,000).

Between 2010 and 2014, the states with the highest rates of firearm-related homicide among children were largely concentrated across the South (Alabama, Florida, Georgia, Louisiana, Mississippi, South Carolina and Tennessee). Other states near the top of the list included four in the Midwest (Illinois, Missouri, Michigan and Ohio), two in the West (California and Nevada), and three in the Northeast (Connecticut, Maryland and Pennsylvania).

SEE GUNS, A2

1,700 ride for skin cancer research

Bicycling event raises about \$160,000 for MSU studies.

Kate Carlson *kcarlso1@mlive.com*

GRAND RAPIDS — More than 1,700 cyclists took over downtown Grand Rapids Saturday morning during MSU Gran Fondo to benefit skin cancer research.

The large-scale event raised about \$160,172 in online donations that will go toward MSU skin cancer studies and related education programs.

"This research is something that doesn't get funded as often as other things," said Amy Nienhouse, communication manager for Michigan State University College of Medicine. "It's skin cancer, something that can happen to anyone."

Studies being conducted at MSU are helping lead to clinical trials in research, Nienhouse said, and they wouldn't be possible without Gran Fondo funding.

The event has raised more than \$640,000 in its first four years. Each rider is encouraged to raise at least \$50 prior to the ride, which they turn in during packet pick up. Donations are being accepted online until July 10.

Many participants were affected by skin cancer themselves or had a friend or family member affected by the disease, Nienhouse said.

Cyclists biked alone or in teams during the noncompetitive event. They could choose from routes that were 10, 25, 40 or 80 miles.



Above, riders in the 25- and 10-mile rides start Saturday at the MSU Gran Fondo. Below, riders in the 40- and 80-mile ride begin. *Mike Clark, MLive.com*



MLive illustration by *Mitt Klingensmith*

LANSING

'Doctor shopping' by opioid addicts targeted in state bill

David Eggert *The Associated Press*

Doctors would be required to check a prescription database before prescribing painkillers and other powerful drugs under legislation approved Thursday by the Michigan Senate in an effort to target "doctor shopping" by addicts.

The seven bills also would limit the amount of opioids that can be prescribed and require a "bona fide" physician-patient relationship to dispense drugs. The measures, which were sent to the House, are lawmakers' latest attempt to combat a deadly opioid epidemic in a state with the 10th-highest per-capita rate of opioid pain reliever prescriptions in the country. The House will consider them as early as September after a summer recess.

"We have doctors and pharmacies who are willing to prescribe and fill medications for patients with no medical need and patients actively seeking out these types of doctors to illegally obtain prescription medicine," said Sen. Tonya Schuitmaker, a Lawton Republican and sponsor of two bills. "Michigan currently has a system that tracks prescriptions, but many physicians don't use it properly, or even at all."

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Sen. Tonya Schuitmaker

The proposed requirement for health providers to use the recently upgraded Michigan Automated Prescription System would take effect in 2020, with exceptions for inpatient, hospice and oncology care. The electronic database tracks

schedule 2-5 drugs. State officials say improvements to the system have put Michigan at the forefront of prescription drug monitoring technology.

Doctor shoppers are patients who have become addicted to opioids and repeatedly visit physician offices or emergency rooms to get prescriptions. Under the legislation, if doctors did not first obtain and review a patient's prescription history in the database, they could face disciplinary action — such as being ordered to learn about opioid abuse and ultimately losing their license under some circumstances.

Sen. Patrick Colbeck, a Republican from Wayne County's Canton Township, was the lone senator to vote against some of the bills.

"I believe that the best way to go off and mitigate the risk of distributing too many opioids to abusers is to control it at its source, control it at the pharmacy and stop getting in between the doctor and the patient," he said.

Colbeck said the state should better analyze the monitoring database to find "where we have chronic abusers" and "flag those abusers at the point of distribution."

