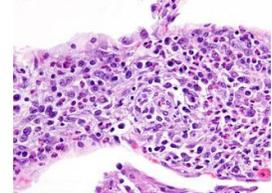


# *Just the Facts...*

## **Acute Eosinophilic Pneumonia (AEP) and New Onset Smoking**

### **What is acute eosinophilic pneumonia?**

- Acute eosinophilic pneumonia (AEP) is an inflammation of the lungs characterized by eosinophilia.
- Eosinophilia is the presence of an abnormally high number of eosinophils (a type of white blood cell).
- Eosinophilia is a sign of inflammation in the body.
- Often, AEP rapidly leads to acute respiratory distress syndrome which is a life-threatening condition that causes lung swelling and fluid build-up in the air sacs of the lungs.



### **Who is getting AEP?**



- From March 2003 - January 2007, AEP occurred among 31 U.S. military members in the Central Command (CENTCOM) area of operations; of these, two died from complications of AEP.
- During this period, AEP also occurred among 8 U.S. military members outside of the CENTCOM area of operations; of these, two died from complications of AEP.

### **What causes AEP?**

- Despite ongoing investigation, the cause of AEP among these service members remains unclear.
- Most cases have occurred among those who recently started tobacco smoking, re-started smoking, or greatly increased their smoking during deployments or training exercises.



## Are there other risks to smokers while deployed?

- Tobacco users get more training injuries, have more cold weather injuries, have longer healing times and more sick call visits.
- Nicotine reduces steadiness and hand-eye coordination – therefore, strength, endurance and stamina suffer.
- Lighting up can give away a unit's position and tobacco use decreases night vision.
- Although some people smoke to stay awake, nicotine actually causes sleep disturbances and increases your risk for fatigue.

## How can I prevent AEP?

- Don't smoke! Avoid smoking, especially non-smokers who are just starting to smoke and current smokers who are increasing tobacco use during deployments or training exercises. Those who want to quit smoking should contact their local combat stress control team to enroll in a class.
- Use cravat or dust mask to reduce dust inhalation.
- Use wet mopping instead of dry sweeping when cleaning dust in living and work areas.
- Stay hydrated.
- Wash hands frequently.
- Seek medical care immediately if you have fever, chills and cough, especially if you have trouble breathing.

### **For more information:**

USACHPPM Technical Guide 273, Diseases of Tactical Importance to CENTCOM: <http://chppm-www.apgea.army.mil/news/TG273OCTOBER2005FINAL.pdf>

Armed Forces Institute of Pathology: <http://www.afip.org/Departments/hot-topics/pneumonia/>

Walter Reed Army Institute of Research: Clinical Practice Guideline for the Management of Pneumonitis/Pneumonia in CENTCOM AOR:  
[http://usachppm.apgea.army.mil/Documents/CENTCOM\\_Pneumonia\\_CPG.pdf](http://usachppm.apgea.army.mil/Documents/CENTCOM_Pneumonia_CPG.pdf)

[Acute Eosinophilic Pneumonia among US Military Personnel Deployed in or Near Iraq](#), Vol. 292, No. 24, December 22/29, 2004 *Journal of the American Medical Association*, (Abstract)

[Severe Acute Pneumonitis Among Deployed U.S. Military Personnel --- Southwest Asia, March--August 2003](#), Vol. 52, No. 36, September 12, 2003, *Morbidity and Mortality Weekly Report*