

## NATIONAL POISON PREVENTION WEEK

### National Poison Prevention Week is March 19-25, 2017

Poisoning is the #1 cause of injury-related death in the United States. The third week in March each year is designated as National Poison Prevention Week, a week dedicated to raising awareness about the burden of poisoning in the U.S. and highlighting specific ways to prevent it.

#### Be Prepared

Be prepared for poisoning emergencies by programming the Poison Help line in your phone today. Calls are free, confidential, and answered by experts 24/7/365.

1-800-222-1222

#### Practice Safe Storage Habits

Ideally, the following things should be stored up, away, and out of sight of children and in their original containers. Alternatively, keep these substances in cabinets secured with child-resistant locks. *Keep in mind that there is no such thing as a 100% child-proof lock or container.*

- ❖ All medications and pharmaceuticals, including over-the-counter medicines, vitamins, and supplements
- ❖ Tobacco and e-cigarette products, especially liquid nicotine
- ❖ Alcohol
- ❖ Laundry and cleaning supplies
- ❖ Pesticides and insect repellents
- ❖ Button batteries, such as those found in musical greeting cards, key fobs, etc.
- ❖ Oils and lubricants, including fragrance oils, tiki torch oils, engine oil, etc.
- ❖ Personal care products, especially contact lens disinfectants and hand sanitizers
- ❖ Other chemicals

## **Read and Follow Labels and Directions**

Make a habit of reviewing the label on any potentially hazardous substance or product prior to use, especially before administering medications. Take care to follow not only usage directions, but the directions provided for safe storage and disposal.

## **Detect Invisible Threats**

Install carbon monoxide detectors in your home.

## **Prepare Food Safely**

Practice safe food preparation and handling to avoid food poisoning.

*This information was gathered from the American Association of Poison Control Center web site: <http://www.aapcc.org/>*

*Check out their ALERTS page for more information including statistics on exposures and managed cases:*

- *E-Cigarettes and nicotine (390 exposures just in Feb 2017)*
- *Laundry detergent packets (1,558 exposures in 2017 in kids 5 years of age or younger)*
- *Food and Mushroom poisoning (Almost 31,000 cases managed in 2015)*



# Poison Center Data Snapshot - 2014

Overview of the 2014 Annual Report of the American Association of Poison Control Centers' National Poison Data System<sup>1</sup>

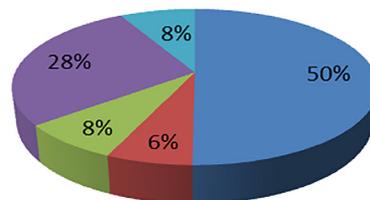
Poisoning is the leading cause of injury-related death in the U.S.<sup>2</sup> In 2014, there were 56 poison centers serving 323 million people, nationwide. Poison centers managed 2.9 million cases, about 2.2 million of which were about people coming into contact with dangerous or potentially dangerous substances. These types of cases are called exposures.\*



## WHO?

**Who calls the poison center?** Anyone can experience a poison emergency. Poison centers take calls from and manage cases about people of all ages, and can provide help in 150 languages. In 2014, just under half of exposure cases managed by poison centers involved children younger than six, but as in previous years, many of the more serious cases occurred among adolescents and adults.

### Age Distribution of Human Exposures



■ Young children (<6) ■ Older children (6-12) ■ Teens (13-19)  
 ■ Adults (20-59) ■ Older adults (60+)

From Table 3A of the 2014 AAPCC NPDS Annual Report - Age and Gender Distribution of Human Exposures. Excludes unknown age categories. N=2,056,697

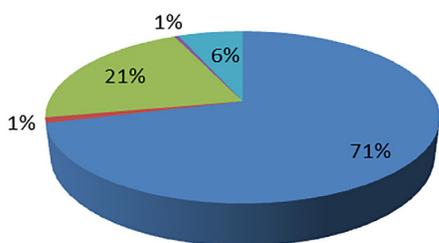
Someone called a poison center about every 11 seconds in 2014.

**When someone calls the poison center, who answers the phone?** Poison center cases are managed by medical experts – doctors, nurses, and pharmacists who have extensive training in poison prevention and treatment.

## WHAT?

**About what kinds of things do people call the poison center?** In 2014, 57% of human exposures involved medications, or pharmaceuticals. Other exposures were to household products, plants, mushrooms, pesticides, animal bites and stings, carbon monoxide, and many other types of nonpharmaceutical substances.

### Site of Caller for Human Exposures



■ Residence ■ Workplace ■ Health care facility ■ School ■ Other/unknown

From Table 2 of the 2014 AAPCC NPDS Annual Report - Site of Call and Site of Exposure, Human Exposure Cases. N=2,165,142



21% of exposure calls to poison centers came from health care facilities. That means that even hospital clinicians rely on the experts at poison centers!

## WHEN?

### When do people call the poison center?

Experts answer calls to the poison center 24 hours a day, 7 days a week, every day of the year. Similar to previous years, in 2014 higher call volumes were observed in the warmer months.

## WHERE?

**Where do the most poison exposures occur?** In 2014, 91% of human exposures occurred at a residence, but they can also occur in the workplace, schools, outdoors, and anywhere else! About 68% of the 2.2 million exposures reported to poison centers were treated at the exposure site, saving millions of dollars in medical expenses. In fact, poison centers save Americans more than \$1.8 billion every year in medical costs and lost productivity!<sup>3</sup>



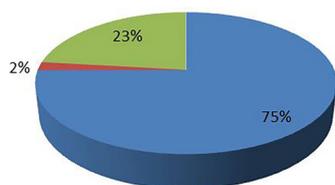
Over 27,000 exposures took place at a school. However, fewer than 10,000 calls to poison centers were made from schools.

## WHY?

**Why do people call the poison center?** People call the poison center when they think someone may have been exposed to something that could hurt them. People also call the poison center for information about medications, pesticides, chemicals, bites and stings, carbon monoxide, and many other topics. In 2014, almost 80% of exposures involved people who swallowed a substance. However, people were also exposed through the lungs, skin, eyes, and in other ways. Most poison exposures were unintentional (79%). Poison centers also received calls about medication side effects, substance abuse, malicious poisonings, and suicide attempts.

Poison Center Case Types

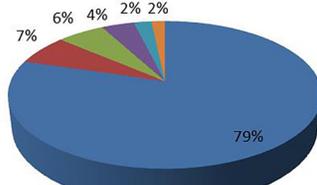
■ Human exposures ■ Animal exposures ■ Information & confirmed nonexposures



As reported in the abstract of the 2014 AAPCC NPDS Annual Report. N = 2,890,909 closed encounters.

Route of Exposure

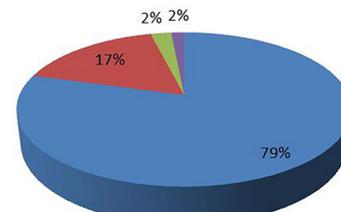
■ Ingestion ■ Dermal ■ Inhalation/nasal  
■ Ocular ■ Bite/sting ■ Other/unknown



From Table 9 of the 2014 AAPCC NPDS Annual Report - Route of Exposure for Human Exposure Cases. N=2,277,006

Reason for Exposure

■ Unintentional ■ Intentional ■ Adverse Reaction ■ Unknown/Other



From Table 6A of the 2014 AAPCC NPDS Annual Report - Reason for Human Exposure Cases. N=2,165,142

## Top 10 Exposure Substances by Age Category

All Human Exposures	Pediatric (≤ 5 years) Exposures	Adult (20 years +) Exposures
Analgesics 13%	Cosmetics/Personal Care Products 15%	Analgesics 16%
Cosmetics/Personal Care Products 9%	Household Cleaning Substances 11%	Sedative/Hypnotics/Antipsychotics 14%
Household Cleaning Substances 9%	Analgesics 10%	Antidepressants 9%
Sedative/Hypnotics/Antipsychotics 7%	Foreign Bodies/Toys/Misc. 7%	Cardiovascular Drugs 8%
Antidepressants 5%	Topical Preparations 6%	Household Cleaning Substances 8%
Antihistamines 5%	Vitamins 5%	Alcohols 6%
Cardiovascular Drugs 5%	Antihistamines 4%	Anticonvulsants 5%
Foreign Bodies/Toys/Misc. 5%	Pesticides 3%	Pesticides 5%
Pesticides 4%	Gastrointestinal Preparations 3%	Bites and Envenomations 4%
Topical Preparations 4%	Plants 3%	Antihistamines 4%

Data from the 2014 AAPCC NPDS Annual Report

From Table 17A. N = 2,165,422 human exposures      From Table 17C. N = 1,031,927 pediatric exposures      From Table 17D. N = 825,009 adult exposures

### To locate your local poison center call 1 (800) 222-1222 or visit aapcc.org.

The American Association of Poison Control Centers (AAPCC) maintains the National Poison Data System (NPDS). Developed in 1983, NPDS contains more than 60 million poison exposures managed over the telephone by U.S. poison centers. NPDS is the only comprehensive, near real-time poisoning surveillance database in the U.S.

\* DISCLAIMER: The term "exposure" means someone has had contact with the substance in some way; for example, ingested, inhaled, absorbed by the skin or eyes, etc. Not all exposures are poisonings or overdoses. The American Association of Poison Control Centers (AAPCC; <http://www.aapcc.org>) maintains the national database of information logged by the country's regional Poison Centers (PCs) serving all 50 United States, Puerto Rico, the District of Columbia, and territories. Case records in this database are from self-reported calls; they reflect only information provided when the public or healthcare professionals report an actual or potential exposure to a substance (e.g., an ingestion, inhalation, or topical exposure, etc.) or request information/educational materials. Exposures do not necessarily represent a poisoning or overdose. The AAPCC is not able to completely verify the accuracy of every report made to member centers. Additional exposures may go unreported to PCs and data referenced from the AAPCC should not be construed to represent the complete incidence of national exposures to any substance(s).

<sup>1</sup> Mowry JB, Spyker DA, Brooks DE, McMillan N, Schauben JL. 2014 Annual Report of the American Association of Poison Control Centers' National Poison Data System (NPDS): 31st Annual Report. Clin Toxicol (Phila). 2015

<sup>2</sup> Warner M, Chen LH, Makuc DM, Anderson RN, Miniño AM. Drug poisoning deaths in the United States, 1980-2008. NCHS Data Brief. 2011 Dec;(81):1-8.

<sup>3</sup> The Lewin Group, Inc. Final Report on the Value of the Poison Center System. 2012. <http://bit.ly/1ANfdnt>