



FACTS ABOUT CHILDHOOD POISONING

Children are at significantly greater risk than adults for accidental poisoning, because they are smaller, have faster metabolic rates and are less able physically to handle toxic chemicals. In addition, natural curiosity and their desire to put everything in their mouths increase their poisoning risk.

- In 2002, 100 children ages 14 and under died as a result of accidental poisoning. Children ages 4 and under accounted for more than 57 percent of these deaths. The poisoning death rate among children ages 14 and under declined 19 percent from 1987 to 2002.
- In 2003, more than 89,330 children ages 14 and under were treated in hospital emergency rooms for accidental poisoning. Nearly 80 percent of these injuries were to children ages 4 and under.
- Nearly 90 percent of all poison exposures occur in homes.
- Children ages 5 and under are at greatest risk for nonfatal poisoning, accounting for the majority of all poisoning exposures.
- African-American children ages 14 and under have a poisoning death rate nearly twice that of white children.

Among children ages 5 and under, 60 percent of poisoning exposures are by non-pharmaceutical products such as cosmetics, cleaning substances, plants, foreign bodies and toys, pesticides, art supplies and alcohol; 40 percent are by pharmaceuticals.

- Of the oral prescription drugs ingested by children ages 4 and under, 23 percent belong to someone who does not live with the child; 17 percent belong to a grandparent or great-grandparent.
- Child-resistant packaging of prescription medications is effective in reducing the poisoning mortality rate among children ages 4 and under. Child resistant packaging contributed to a 45 percent reduction in child poisoning deaths among children ages 4 from 1974 through 1992.

Each year, an estimated seven children ages 14 and under are fatally poisoned by exposure to carbon monoxide (CO), a colorless, odorless gas, in non-fire-related incidents.

- The majority of CO exposures occur in the northern and midwestern states during the winter months, and the most common source of residential, non-fire CO-related poisoning is unvented supplemental heaters.
- Half of CO poison deaths could be prevented by a CO detector.
- Alaska, New Jersey, New York, Rhode Island, Vermont, West Virginia and some local jurisdictions have passed legislation requiring the use of CO detectors in some homes. Texas enacted legislation that requires the installation of CO detectors in certain childcare facilities.

Ingesting dust from deteriorating lead-based paint is the most common cause of lead poisoning among children.

- It is estimated that 890,000 children ages 1 to 5 have blood lead levels high enough to affect intelligence, growth and development.
- Children ages 1 to 2 are at the greatest risk from lead poisoning.
- Children are more likely to suffer elevated blood lead levels if they are low-income, receiving Medicaid, living in large metropolitan areas or living in older housing.
- In the 15 years following intensive efforts to reduce lead in consumer products such as gasoline and paint, a nearly 80 percent decline in elevated blood lead levels among children ages 1 to 5 was observed.

Each \$1 spent on poison control center services saves \$7 in medical spending.

- In 2003, more than 1.2 million accidental poisonings among children ages 5 and under were reported to U.S. poison control centers.
- Calls to poison control centers peak between 4 p.m. and 10 p.m. and during warmer months.
- Poison control centers are cost-effective and economical because 76 percent of their cases are resolved over the telephone, avoiding unnecessary emergency room visits, ambulance use, hospital admissions and treatment delays.
- When used under medical advice, activated charcoal can reduce the likelihood of severe poisoning, decrease the costs of a poisoning incident and prevent the need for a hospital emergency room visit.
- The Poison Control Center Enhancement and Awareness Act of 2000 provided funding to establish a national toll-free phone number for poison control center services (1-800-222-1222), implement a national educational campaign and financially stabilize regional poison control centers.