

Alabama Poison Center



2008 Annual Report

In 2008, the Alabama Poison Center received nearly 40,000 calls. Over 18,000 calls involved Human Exposures, and 2,000 calls were concerning Animal Exposures. Figure 1. The remaining 48% of the calls were for information only. This represents calls from the 67 counties of Alabama, and the surrounding bordering states. Figure 3.

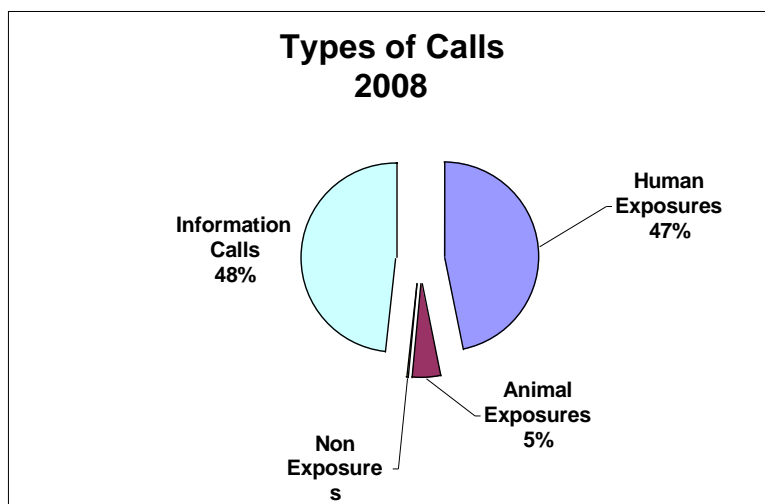


Figure 1

Information calls may involve questions about environmental or occupational concerns, teratogenic questions, or may be a request for a poison prevention presentation or materials. Over 6% of the callers were concerned about their medications, or have questions about the safety of mixing medications. Nearly 89%, however, were people that requested to have a medication(s) identified, including law enforcement officers, healthcare providers caregivers. Figure 2.

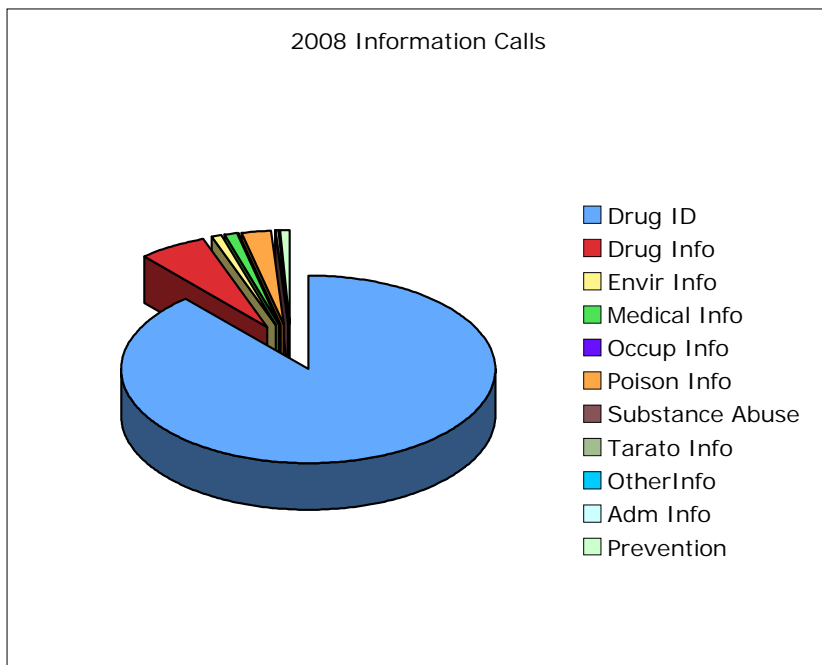


Figure 2

Reason:

People call the poison center for a wide number of reasons. Exposures are either unintentional, intentional, an adverse reaction, or for some “other” reason.

Unintentional exposures include environmental exposures, occupational exposures, therapeutic drug errors, misuse of a substance, bites and stings, or food poisoning. Unintentional exposures account for 85% of all human exposures. Therapeutic errors, where the wrong medication was given, a medicine was mistakenly given twice, or a medicine was given to the wrong patient, account for 10.5% of the total exposures alone.

Intentional exposures, either suspected suicide, misuse or abuse account for 12.5 %of all exposures.

Other exposures due to contamination, tampering, malicious use, or from withdrawal account for 0.5% of all exposures. Unknown reason accounts for 0.008%.

Adverse Reactions to food, drugs, chemicals or other substances account for 1.8 % of the exposures.

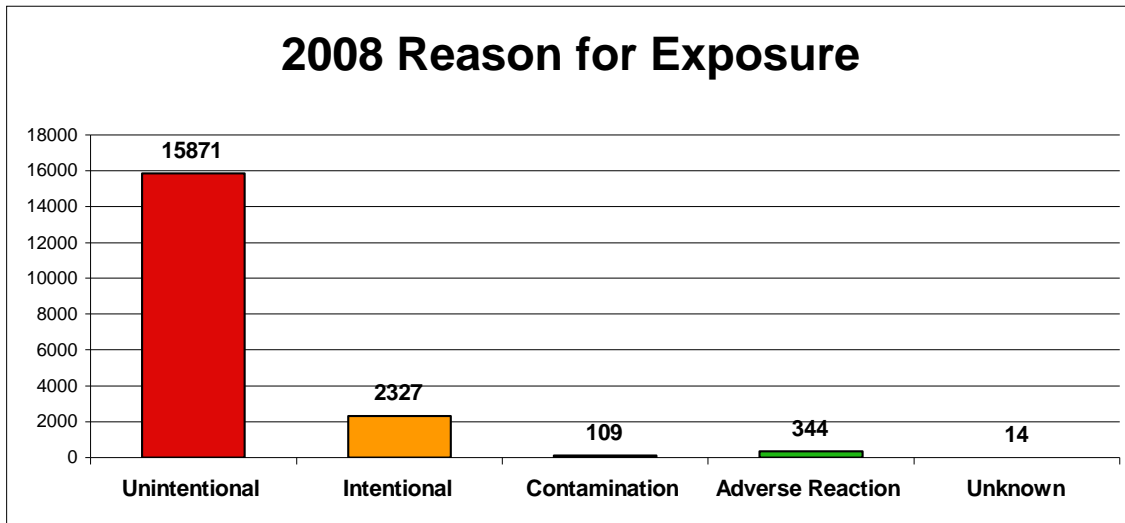
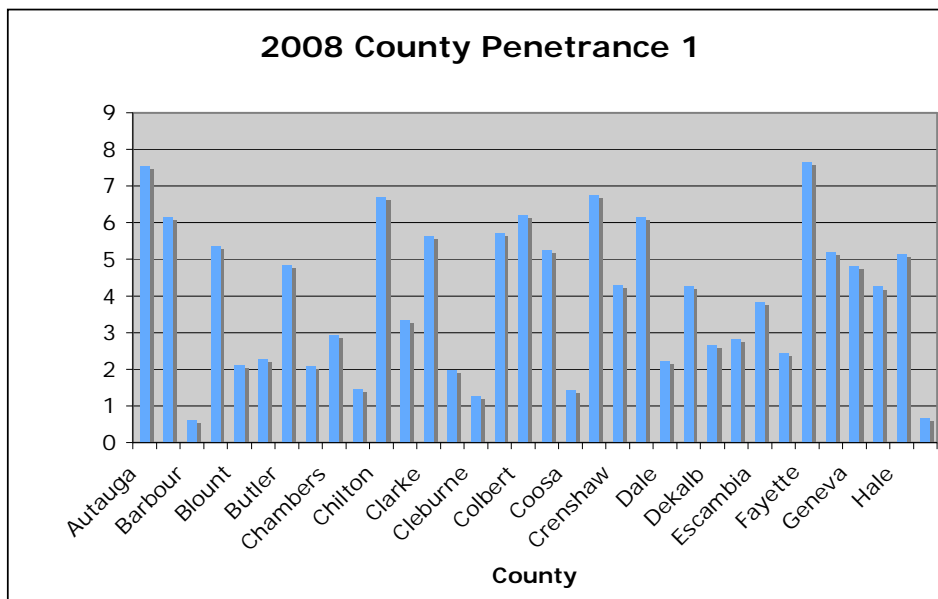


Figure 3

Calls by County

The APC received calls from all 67 counties in Alabama. The following chart demonstrates utilization from each county based in the demographic area. Penetrance is used to demonstrate utilization only (number of human exposures per 1000 population). Calls from outside Alabama are excluded.



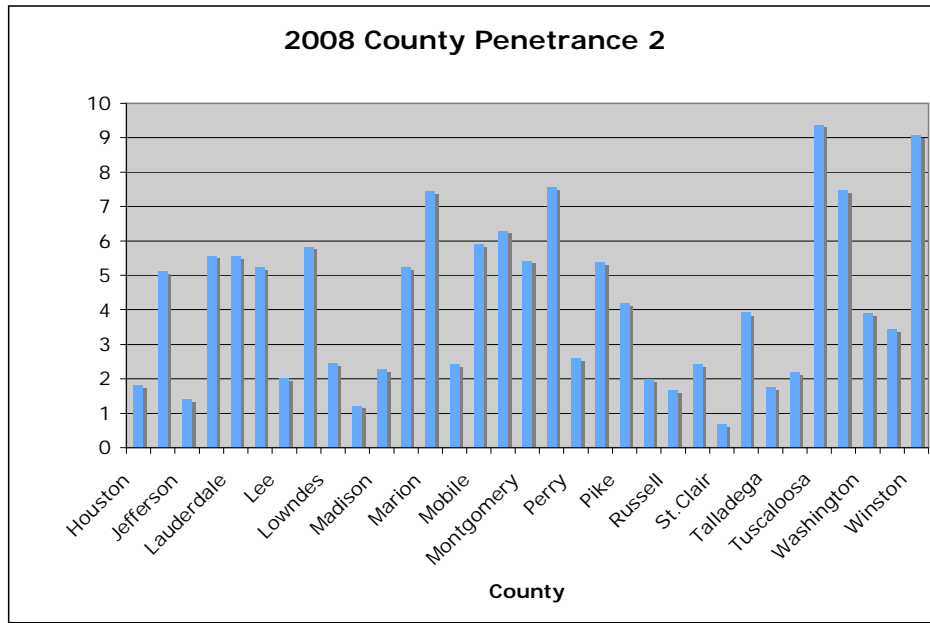
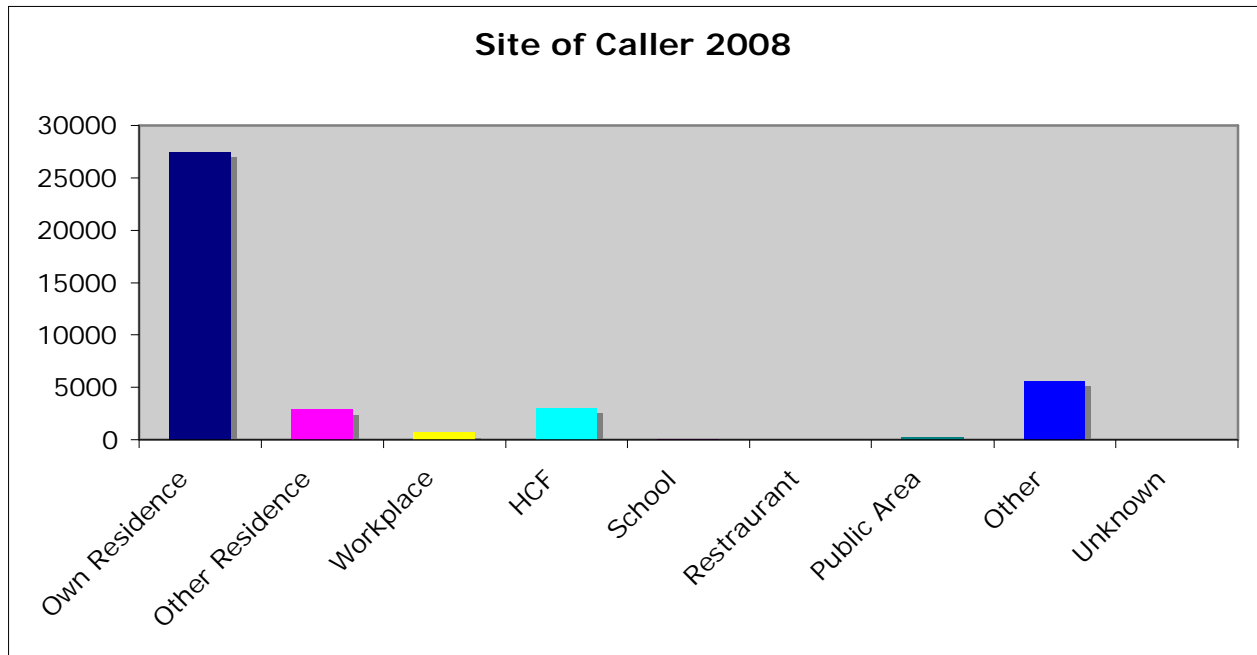


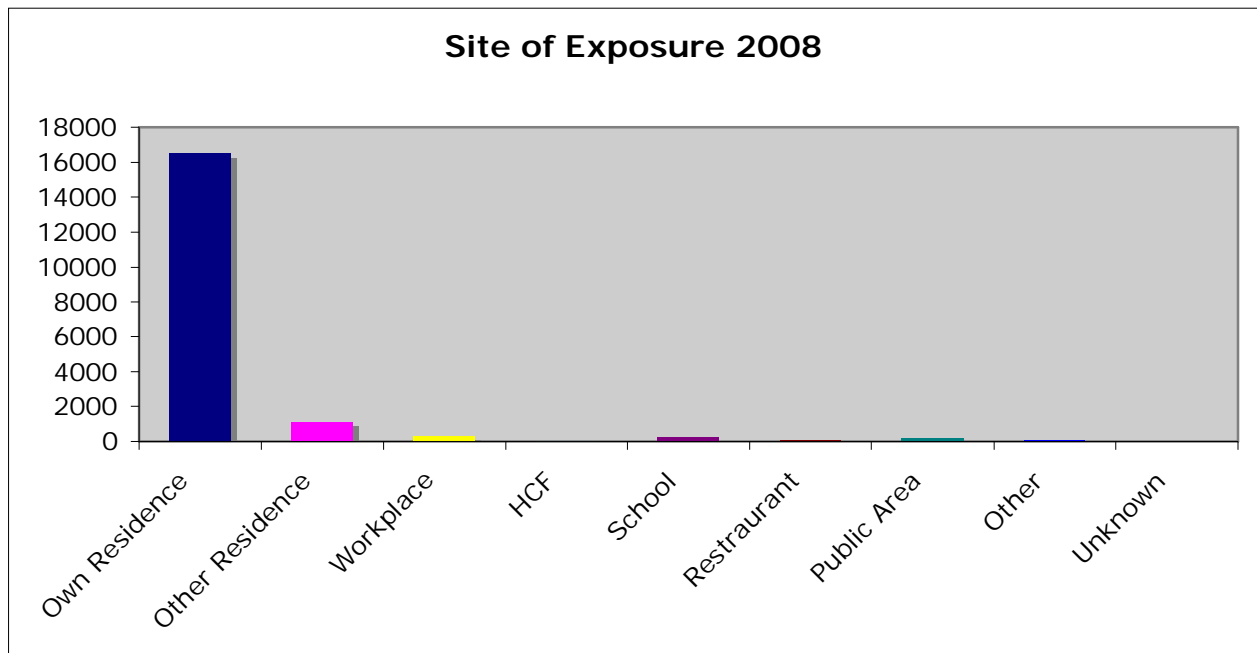
Figure 4

Site of Caller and Site of Exposure:

Of all calls reported to the APC in 2008, 68.76% called from the own home. Calls from someone else's residence occurred 7.14% of the time, and 1.6% of the calls to the APC came from someone at work. Fourteen percent of the calls came from "other" such as a cell phone, an ambulance, one's vehicle, or a healthcare facility that does not have a physician in attendance.



The same definitions for the site of caller pertain to the site of exposure. Over 88% of all human exposures occurred at home. Six percent happened at someone else's home, 1.74% occurred at work, and only 1.4% occurred at school.



Chronicity:

The chronicity of an exposure describes whether it was a single, repeated or continuous exposure over what period of time. Acute is less than eight hours, chronic is longer than eight hours, and an acute-on-chronic exposure is a single exposure that was preceded by a continuous, repeated, or intermittent exposure occurring over a period exceeding eight hours. Figure 5

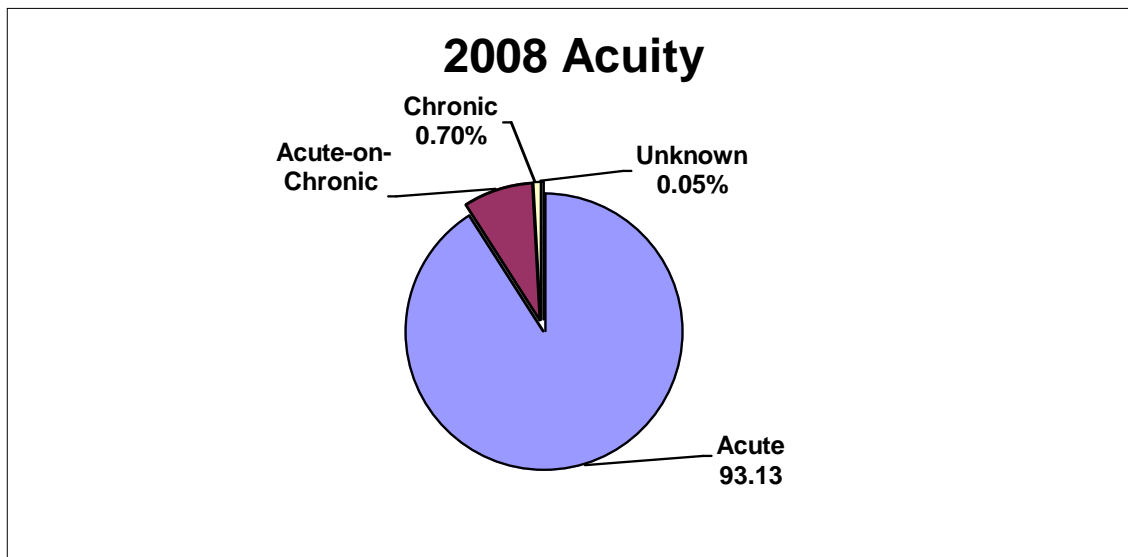
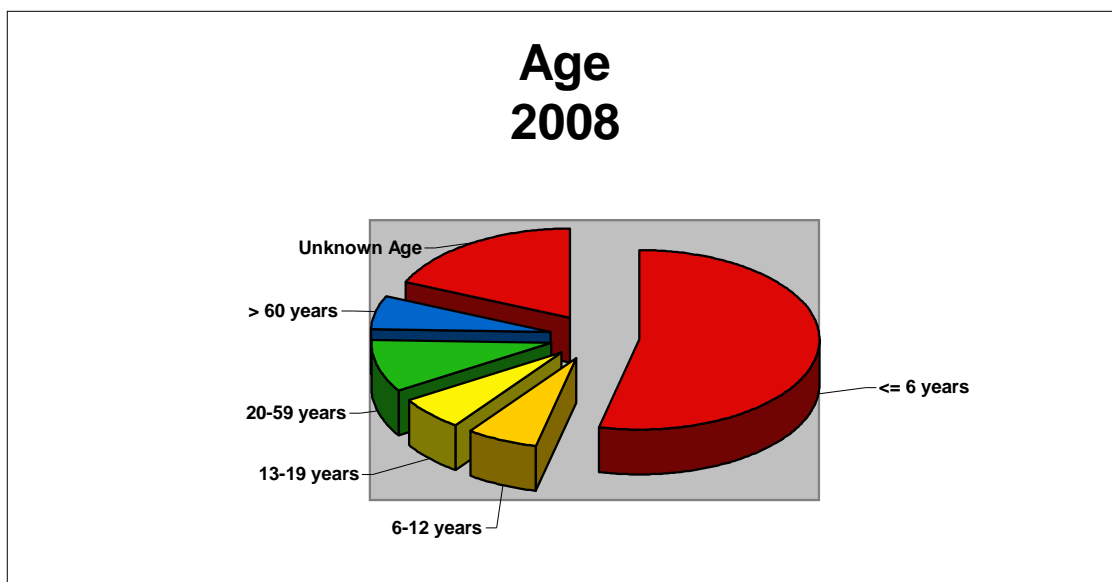


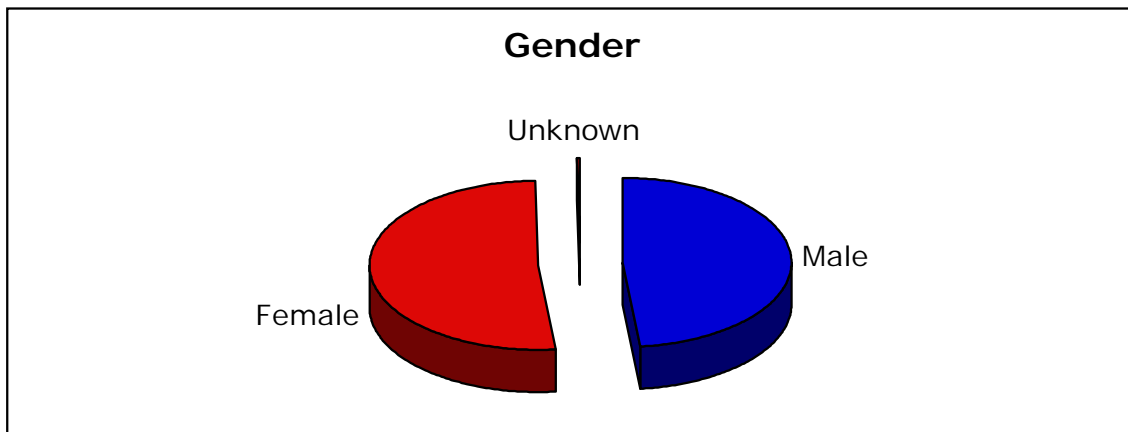
Figure 5

Age and Gender:

More than 53 percent of the human exposures involve children under the age of 6, as shown in the diagram below.

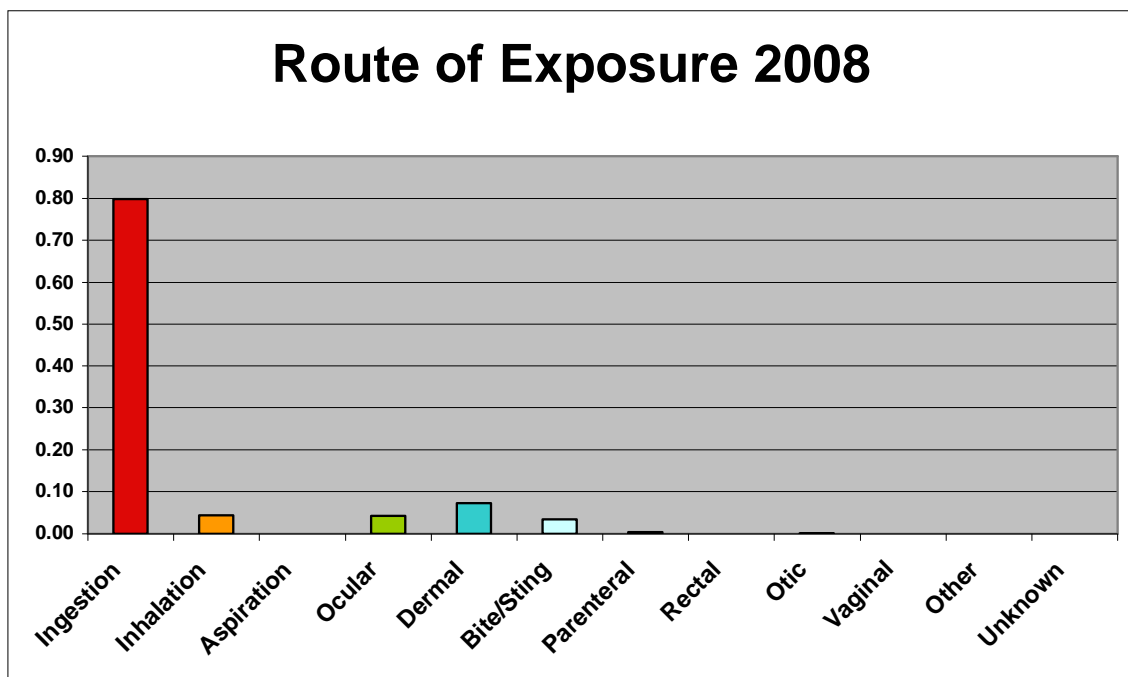


Concerning gender, 48.4 % of the exposures occurred in males, and 51.4 % in females. The remainder 0.23 % were unknown.



Route:

Most exposures, nearly 80%, occur by ingestion. Aspiration occurred during swallowing in 0.03% of the cases. The dermal route, 7.25%, was the second most common route of exposure.



Substances:

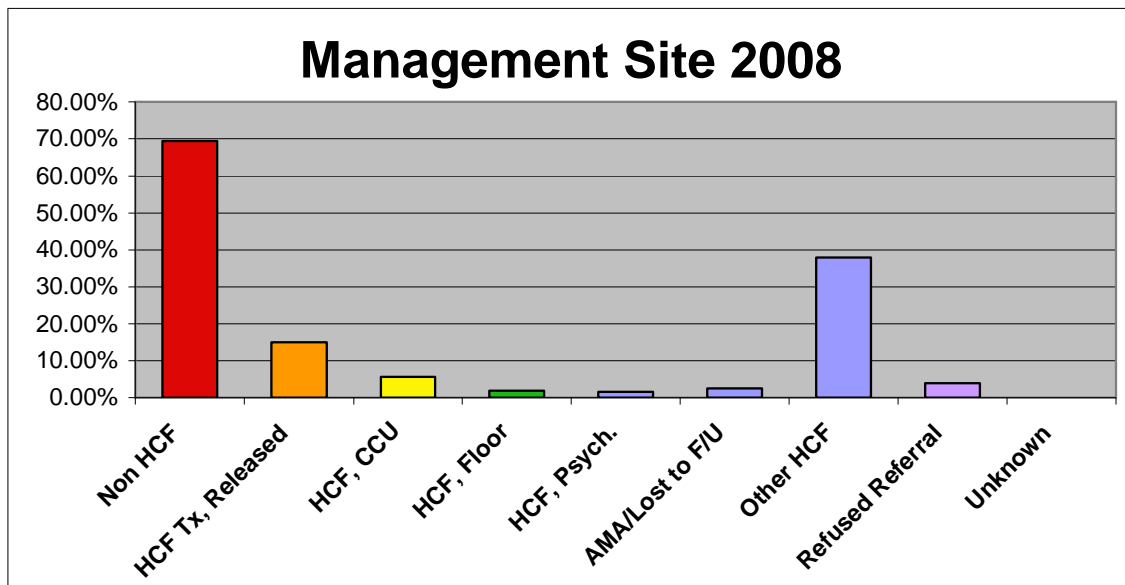
The most common products involved in poisoning exposures may be categorized as drugs and non-drugs. A patient may be exposed to more than one substance. Of all exposures reported to the APC, 69.75% cases involved drugs, 29.33% were non-drug related calls, and 0.93% were unknown substances.

- NON-DRUG SUBSTANCES**
- Bites and Stings
 - Cosmetics
 - Cleaning agents
 - Toys, Foreign bodies
 - Insecticides
 - Food poisoning
 - Plants and Mushrooms
 - Deodorizers
 - Air Fresheners
 - Laundry Products
 - Hydrocarbons

- DRUG SUBSTANCES**
- Cold and Allergy
 - Acetaminophen
 - Sedatives
 - Psychotherapeutics
 - NSAIDS
 - Antibiotics
 - GI
 - Stimulants
 - Vitamins, Iron
 - Antiseptics

Management Site:

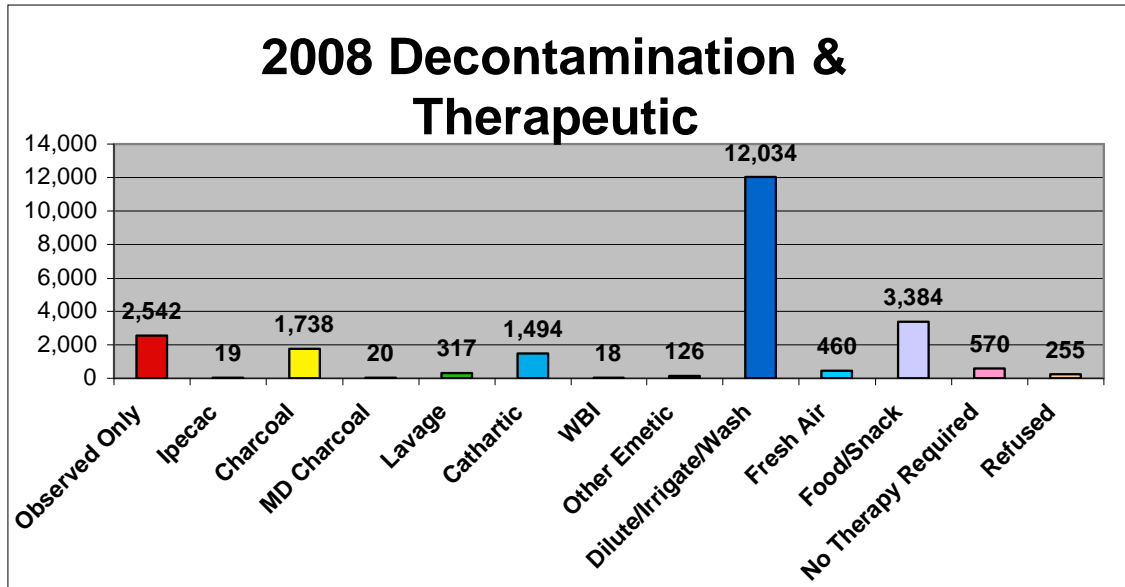
In 2008, 69.41 percent of all poisoning cases were safely managed at home. In efforts to help curtail unnecessary healthcare costs and reserve ER resources for emergencies in Alabama, the poison center can manage many exposures at home and provide valuable follow calls too. Calling the Alabama Poison Center saves lives and saves money.



Decontamination:

Giving something to drink treated over 61% of the exposures, washing, or irrigated. Food or snack was used to treat 17.26 % exposures.

Over 13.6% of the cases did not require any treatment and was only observed.



Medical Outcome:

The APC saves lives! The effectiveness of the poison center is most noted in the patient outcomes. Nearly 55% of all exposures had no effect. Early intervention may help reduce the likelihood of severe toxicity, however suicide attempts often are delayed in getting reported for many hours. In 2008, there were 10 cases (0.05%) that resulted in death; in all of these cases the reason was intentional.

