

Poison Prevention Year-Round Effort

By the American Medical Association
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OUR children are poisoning themselves at the rate of nearly 1,500 a day — and they are doing it while "safely" at home.

Each year, 500 youngsters die from the effects of a startling assortment of poison-packed products that can be found in any home. These are more deaths than are caused by polio, diphtheria, typhoid, scarlet fever and measles combined.

In fact, accidental poisoning at home is the most common emergency encountered by pediatricians, outwanking falls, burns, sudden illness and all the other medical problems common among children.

Public health officials say there is a widespread misconception among parents about what constitutes a poison. As new labor-saving items go on to kitchen shelves, new beauty aids are added to the dresser, and new drugs appear in medicine cabinets, the poison potential goes up.

Doctors themselves have actively organized one of the most important advancements in the drive against self-poisoning — the poison control center. Here the poison centers of thousands of trade name products are cross indexed. A call to any of these centers, located in hospitals across the country, will give a doctor the information he needs.

At the request of the centers themselves, their work has been coordinated by the Department of Health, Education and Welfare which established the National Clearinghouse for Poison Control Centers in Washington.

MEDICINES have a particular attraction. Remedies left within reach of a child usually disappear quickly and account for 47 per cent of all poisonings.

Aspirin, a virtual staple in every home, is by far the favorite. It is the primary cause of poison deaths among children under five, according to a study by Dr. Matilda S. McIntire of the Omaha Poison Control Center. This drug in large doses can knock the delicate body chemistry out of balance causing heart failure, kidney damage or convulsions.

who get among the sleeping pills is not high—probably because of the well publicized dangers. Incurious adults are by far the more frequent victims.

Other potentially deadly medicines frequently pumped from the stomachs of youngsters include oil of wintergreen, digitalis, tranquilizers, liniments, laxatives and strong cough medicines.

Most accidents with medicine result from lackadaisical handling. The dresser top is no place for hair spray, nor is the wash stand a safe place for eye drops. Medicine cabinets are the best place for such things, since they are usually above the reach of children unless your child happens to be an inveterate climber. Then special measures may be required.

Even those parents who keep drugs virtually under lock and key seem to forget that most poisons don't come in small bottles. Household supplies provide children with many of the poisons to which they fall victim.

In the average home there are more toxics stored at floor level in the kitchen than in any other room. A survey completed last year showed that 34 per cent of all poison mishaps occurred in the kitchen.

IF ALL this has you thinking that home is no fit place for a child, you might stop and consider that the outdoors isn't much better.

The growing season specialty offers many hazards, for even the loveliest garden can be a booby trap. "Please Don't Eat the Daisies" should be taken literally. Many ordinary plants are poisonous—rhododendron, foxglove, elephant ear, mountain laurel, oleander leaves, castor beans, wisteria pods—and the use of garden sprays adds a deadly coating to those plants which aren't.

One of the deadliest elements to which children are particularly susceptible is lead. A high incidence of lead poisoning was found in a Chicago neighborhood where youngsters gathered to watch battery cases being burned and inhaled the fumes.

Other cases of lead poisoning frequently stem from eating paint chips and bits of plas-

ter on his crib, newly refinished with lead-based paint by his physician father.

CARBON tetrachloride, fatal if either inhaled or swallowed, was recently suggested as an oven cleaner by a national woman's magazine. The truth is a New Orleans physician pointed out, that working in the confines of an oven with a bag saturated with carbon tetrachloride is courting swift death.

Every minute someone calls a poison center somewhere to ask for help or report a poison mishap. While many of these centers have facilities for treating poison cases, this is not their primary function. The storing of vital information about poisons, antidotes and treatment procedure is.

The poison control center idea was formulated by Dr. Edward Press, a member of the Accident Prevention Committee of the American Academy of Pediatrics. He organized the first center in Chicago in 1953 with the support of state and city health officials, the American Medical Association, the Federal Food and Drug Administration and the National Safety Council.

The plan proved an overwhelming success. Today similar control centers are in operation at more than 470 hospitals throughout the nation.

In Philadelphia, the number of calls to the Poison Information Center is 1,552 a year.

DESPITE these efforts, both Congress and public health officials are well aware that there is no substitute for caution in the home.

Informed, alert parents are the only real bulwark against the creeping increase in child poisonings, which average about a half million yearly, according to Henry L. Verhulst, director of the poison control center clearinghouse.

What parents should know is this:

Cleaning and polishing agents, detergents, shoe polish, cosmetics, waxes, insecticides, paint, turpentine, petroleum-based products, wave lotions, chalk, bleaches, plant foods and sprays, plaster and thousands of similar items all may contain poison.

Too much of virtually any medicine, even ordinary head-

ache pills (medical authorities have a name for it—Pica) underscores the necessity of removing the dangerous paint, often an undercoating applied decades ago and subsequently covered with new paint.

Doctors Cooperate

That section extends from the Delaware to the Schuylkill River and from Vine st. to Lehigh av. And because a large proportion of the city's Negro population is in that area, the fact that non-white victims exceed whites in a ratio of three to one is understandable.

Do doctors serve the requirement that cases of suspected lead poisoning be reported? Milano was asked.

"They have been most cooperative," was his appraisal. "Of course, we occasionally run across a case which was not properly diagnosed as lead poisoning; but on the whole the physicians have done a good job. It's the landlords who make things difficult."

Friends Unit Helps

The accident control division is getting a good assist, also, from another source—the Society of Friends Social Order Committee.

Members of that organization's youth work camp project have volunteered to go into homes where lead poisoning has been contracted and scrape away the death-dealing paint. Then they resurface the areas with a non-poisonous paint.

The amendment will be submitted to the City Law Department, which will develop legal procedures in conformity with the City Charter. It then will be submitted to the Board of Health for approval before it goes into City Council's hopper for action.

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