



UPDATE

POISON CONTROL PROGRAM

1-800-222-1222

www.PoisonHelp.hrsa.gov



About HRSA

The Health Resources and Services Administration is part of the U. S. Department of Health and Human Services. HRSA is the primary federal agency responsible for improving access to health care services for people who are uninsured, isolated, or medically vulnerable. For more information about HRSA and its programs, visit www.hrsa.gov.

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- **America's Poison Centers play a key role in protecting Americans during the recent peanut butter recall.** As a leader in food safety and public health, PCCs offered expert support during the recent recall of salmonella-tainted peanut products. Poison Centers always experience a sharp increase in calls from the public during such incidents. [continue reading](#)
- **Poison Center experts aim to raise public knowledge about poison prevention,** collaborating with Hollywood, Health, & Society to provide screen writers and producers with accurate health storylines. In the past, HRSA's Division of Transplantation has helped to shape these storylines featured in *Grey's Anatomy*, *Numbers*, and others. [continue reading](#)
- **The Poison Workgroup (PWg) is working to reverse the alarming trend of deaths from prescription pain medication.** With prescription pain medications largely responsible for 26,700 accidental American deaths, PWg aims to increase awareness about the danger of prescription drug and opioid narcotic misuse and abuse. [continue reading](#)

Food Recalls and America's Poison Centers

America's Poison Centers play a key role in keeping the public safe in the event of food recalls. The Centers for Disease Control and Prevention (CDC) estimate 76 million people suffer from food borne illnesses each year in the United States, accounting for 325,000 hospitalizations and more than 5,000 deaths. Poison Centers serve as a primary source of information when the public needs to know which food products are being recalled. More importantly, they can identify the symptoms of a food-borne illness and help manage the appropriate treatment regimen.

Generally, food recalls result from three main causes:

1. The product contains a dangerous pathogen such as salmonella.

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Did You Know?

Older adults are more likely than others to **die from poisonings**. These adults account for 5 percent of possible poisonings but for 16 percent of the deaths.

2. The food package label fails to mention the product contains an allergen (i.e., an ingredient that can cause an allergic reaction in some people).
3. Foreign matter was accidentally introduced into the product during processing (for example, a piece of plastic or metal).

Poison Centers receive regular notices identifying which food products are being recalled. The American Association of Poison Control Centers (AAPCC) also provides member centers with a weekly update that lists all recalled products.

The recent recalls involving salmonella-tainted products made by the Peanut Corporation of America provide a good example of how Poison Centers function. Poison Centers always experience a sharp increase in calls from the public during such incidents. The Poison Centers keep track of the lot number and production date of recalled products to help identify whether it should be discarded, or to help pinpoint the source of a caller's illness.

Poison Centers are staffed by nurses, pharmacists, and physicians who specialize in toxin related illnesses. Staff can quickly identify the cause of an adverse reaction to a food product and provide guidance to callers, as well as fellow health care professionals, on the best way to treat it. Poison Centers are open 24 hours a day, seven days a week, making them the one source the public can always reach with questions about recalled food products.

Patient Safety and Clinical Pharmacy Services Collaborative Hosts Second Learning Session

The Patient Safety and Clinical Pharmacy Services Collaborative (PSPC) hosted its second Learning Session (LS2) December 3-4, 2008 at the Gaylord National Hotel in National Harbor, MD. Sponsored by HRSA's Office of Pharmacy Affairs and Center for Quality, the Collaborative is designed to improve the quality of care for patients by increasing patient safety and improving patient health outcomes through the integration of clinical pharmacy services into primary care. The PSPC consists of 68 teams from around the country engaged in rapid improvements by learning, replicating, testing, and adopting specific leading practices already found to be effective in high performing organizations.

The highlight of LS2 were the presentations of 25 teams who shared their early challenges and successes in integrating their health care systems with clinical pharmacy services and documenting their improved health outcomes. Mark Ryan, PharmD, Director of the Louisiana Poison Control Center (LPCC), was among the team members who presented at LS2. Dr. Ryan and his fellow team members from the David Raines Community Health Center presented their plan to eliminate polypharmacy and raise awareness of the potential for accidental drug overdose due to polypharmacy or other reasons. To that end, the team showcased their *pharmaceutical reconciliation patient form* designed to eliminate duplicate therapies, monitor for potential drug interactions, and facilitate tailored patient counseling. Dr. Ryan's team also discussed efforts to educate patients about the services provided by the LPCC to encourage utilization of the Poison Help Line for medication questions when the clinic is not available.

“Attending the Learning Sessions has provided us with a wealth of new ideas and information that we can use to build on and expand our efforts. We have also been very fortunate to make many new contacts at the sessions,” said Dr. Ryan of his participation in LS2. Other Poison Center directors participating in the Collaborative include Dr. Jess Benson from the New Mexico Poison and Drug Information Center, Dr. Doug Borys from the Central Texas Poison Center, Michele Caliva from the Upstate New York Poison Center, Dr. Barbara Crouch from the Utah Poison Control Center, and Dr. Marsha Ford from the Carolinas Poison Center.

The PSPC will meet again at Learning Session 3 at the Grand Hyatt in Washington, D.C. on May 6-7, 2009. For more information please visit www.hrsa.gov/patientsafety.

Poison Center Experts Collaborate With Hollywood, Health, & Society

As reported last year, the HRSA Poison Control Program (PCP) has partnered with the Centers for Disease Control and Prevention to collaborate on a project with Hollywood, Health, & Society (HH&S). HH&S is a project at the USC Annenberg Norman Lear Center that provides screen writers and producers with accurate and timely information for health storylines.

According to a 2005 Porter Novelli Health Styles survey, over half of regular primetime drama/comedy viewers reported that they learned something about a disease or how to prevent it from a TV show. About one-third of regular viewers said they took some action after hearing about a health issue or disease on a TV show.

Through our partnership with HH&S, the PCP aims to raise public knowledge about poison prevention, the critical role of Poison Center services, the toll free number and the need for more support for Poison Centers at the State and local levels. To that end, the following Poison Center personnel have accepted invitations to serve as poison experts for HH&S consultations.

- **Marsha Ford**, MD, FACEP, FACMT, Carolinas Poison Center
- **Edward Krenzelok**, PharmD, FAACT, DABAT, Pittsburgh Poison Center
- **Steve Marcus**, MD, New Jersey Poison Information and Education System
- **Emilio Saenz**, BS, West Texas Regional Poison Center
- **Stuart Heard**, PharmD, FCSHP, California Poison Control System

The PCP trusts that HH&S will come to rely on these poison experts in the same way that HH&S relies on HRSA's Division of Transplantation (DoT) for accurate information about organ and blood stem cell donation and transplantation. Over the past three years, DoT experts have helped shape accurate storylines featured in *Grey's Anatomy*, *Numbers*, *General Hospital*, and other television programs.

For more information please visit <http://www.learcenter.org/html/projects/?cm=hhs>.

Poison Center Educators Gather in Richmond, Va

Since 2007, HRSA's Poison Control Program (PCP) has supported several regional meetings for Poison Center health educators with assistance from the Poison Center Technical Assistance Resource Center (PC TARC). The purpose of these meetings is to provide educators with a format and agenda conducive to their professional development, programmatic needs, and the broader objectives of the programs they represent. At these meetings, HRSA brings together educators from similar geographic areas in an effort to network, share best practices, and identify resources to bolster their respective poison education programs.

The Mid-Atlantic Educator's Regional Meeting was convened on February 5, 2009 at the Virginia Poison Center (VPC) and featured presentations on *Media Matters*, *Outcome Measurement*, and *Survey Design*. In addition, a focus group session was facilitated by Edelman, the public relations firm that is under contract to assist the PCP with implementation of the Poison Help Campaign. The focus group was designed to elicit feedback about the future direction of the Campaign. Educators also participated in a unique Question & Answer session that was moderated by HRSA PCP Director, Lori Roche.



Mid-Atlantic Educators' Regional Meeting. Names listed from left to right:

Top: Nicholas S., Sue K., Lori R., Donna L., Deborah H-J, Joni B., Paul J., Angel B.

Middle: Denise N., Evelyn W. **Bottom:** Holly W., Gloria J-M, Kristen W., Alexa S., Kimberly C.

To date, 72 US PCC educators have participated in five regional meetings.

For more information, please contact PC TARC at: PCTARC@pire.org.

Poison Workgroup Plans Several Initiatives to Decrease the Prescription Pain Pill Fatalities

Deaths from poisoning have increased dramatically in the United States. In 2005, nearly 26,700 Americans died from an unintended or undetermined-intent poisoning, a nearly four-fold increase over the 6,921 who died in 1990. Prescription pain medications, such as methadone, oxycodone, hydrocodone, morphine, and fentanyl are largely responsible for this alarming increase in drug poisoning death rates.

The Poison Workgroup (PWg)—a group of professionals interested in poison prevention—is working to reverse this alarming trend and increase awareness about the dangers of prescription drug and opioid narcotic misuse and abuse. Formed in 2006 at the State and Territorial Injury Directors Association (STIPDA) Meeting, the PWg includes epidemiologists, toxicologists, prevention specialists, state-based injury experts, poison educators, academics, government officials, and survivors of opioid narcotic abuse. The Health Resources and Services Administration (HRSA) Poison Control Program (PCP) supports the group's conference calls and in-person meetings.

Members of the PWg are working on several prescription pain pill initiatives targeted at consumers, prescribers or policy makers.

- 1. Information Clearinghouse** – PWg members are updating information about 17 public health data sets that contain information on poisoning. This Clearinghouse is intended to be used as a “data guide” by interested parties with limited data knowledge.
- 2. Social Marketing Campaigns** – PWg members are gathering information on successful prescription pain pill prevention marketing campaigns and successful public health initiatives marketed to men aged 35-54 (the group at highest risk for death from opioid narcotics). This information will help communities plan their own effort without starting from scratch.
- 3. Poison Death Review** – The States of North Carolina, New Jersey and Connecticut are reviewing the plausibility of establishing poison death review. A death review is a process that looks at all available information concerning a death and examines areas of prevention that can be improved. Lessons from these States will help determine the efficacy of using poison death review as a means to gain valuable information about opioid abuse and its victims.
- 4. National Poison Prevention Week** – While Poison Prevention Week traditionally focuses on childhood poisoning, this year's proclamation and events also highlighted the dangers of prescription pain pill abuse/misuse. A press event to kick-off the week was held on March 17, 2009 at the National Press Club in Washington, DC and featured a survivor of opioid abuse.
- 5. Prescriber Fact Sheets** – PWg members have developed a general opioid and a methadone specific fact sheet for a prescriber audience. The purpose of the fact sheets is to ensure prescribers understand the problem, who is most at risk, what they can do, and where to go to learn more about the issue.

6. **Outreach to Prescribers** – The prescriber fact sheets will be circulated to doctors, dentists, nurse practitioners, and other health care providers through targeted outreach to professional and trade associations.
7. **A National Forum** – PWg efforts will culminate in a national forum scheduled to occur in November 2009. Between 50-200 policy makers from are expected to come together to better understand this problem, discuss current prevention methods, and develop recommendations that communities, cities, and States can use to curb the problem in their own jurisdictions. The forum may also feature other topics such as the epidemiology of the problem, changes in prescribing practices, and appropriate pain management.

Subcommittees exist for each of the above initiatives and the PWg is open to anyone interested in joining. Any and all documents produced by these efforts will be freely shared with any interested party. If you would like to work with the PWg or would like more information, please send an e-mail to sheppard@pire.org.

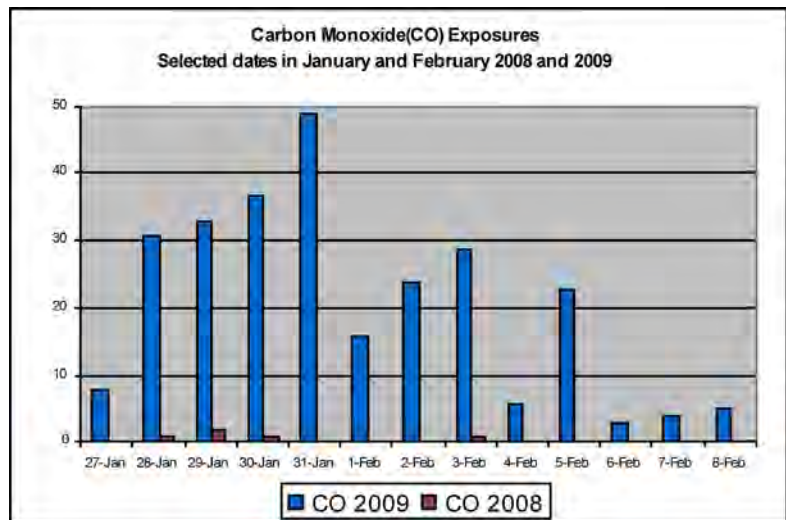
Kentucky Regional Poison Center Provides Critical Services During the State's Worst Ice Storm

On January 27, 2008 a winter ice storm knocked out power to more than 850,000 people including 600,000 people in Kentucky as subfreezing temperatures dropped into the single digits. Unaccustomed to such severe winter temperatures, thousands of Kentucky residents turned to alternative sources of heat and power, such as gasoline powered generators, kerosene heaters and propane gas stoves in attempts to stay warm.

During the weeks that followed the storm and clean-up, the Kentucky Regional Poison Center (KRPC) experienced a significant spike in calls about carbon monoxide and kerosene poisoning exposures—a 400% to 800% increase over previous years. (see Figure 1 for CO exposures) Although half of the KRPC staff lost power in their own homes, the KRPC continued its normal operations and successfully managed these poisoning exposures in addition to managing a 20% call increase (as compared to the previous year) in all poisoning exposures.

The KRPC also worked closely with the Kentucky Department of Public Health (DPH) as the DPH tracked the effects of the storm and directed emergency response efforts. The DPH relied on KRPC data as it was the only source that could be tracked to the city/town and county levels in real-time. Other sources of data (e.g. hospital admission data, coroner's data, and emergency department data) were completely unavailable for some of the worst hit counties or, at best, several days behind.

The collaboration between KRPC and DPH strengthened an already positive relationship and helped save lives in the Kentucky region.



National Poison Prevention Week 2009: March 15-21, 2009

National Poison Prevention Week 2009 was commemorated across the country as communities partnered with local Poison Centers to raise awareness about poison prevention.

In the Nation's Capital, the week was kicked off with a press event at the National Press Club sponsored by the National Poison Prevention Week Council. Featured speakers included Mary Wakefield, Ph.D., R.N., the newly named Administrator of the Health Resources and Services Administration (HRSA). Appointed by President Barack Obama on February 20, 2009, she resigned as Dean of Rural Health at the University of North Dakota School of Medicine and Health Sciences to begin her post at HRSA on March 10. At the press event, Dr. Wakefield highlighted why the Poison Help toll free number, 1-800-222-1222, is such an important resource, stressing the barriers that underserved and hard-to-reach populations face, especially in remote areas.

"Every year at this time, we are reminded that poisonings are preventable. But ultimately, each and every one of us needs to be prepared for prevention," she said.

Dr. Wakefield also announced the release of HRSA's new publication, *Safe Medicine Use & Poison Prevention Tips: A Guide for Older Adults and Caregivers*, that was developed with guidance from several poison control center experts. The brochure can be found on www.poisonhelp.hrsa.gov. Other speakers at the press event included:

- **Kristin Lolmaugh**, the Chair of the Poison Prevention Week Council and Senior Program Manager with the National Safety Council, kicked the event off with sobering data on the increase in poisoning fatalities due to prescription pain pill abuse. She also recognized the winners of the annual poster contest, Daniel Carr of Florida and Aubrey Brown of Oklahoma. Both were treated to a free trip to Washington, DC to honor their art that was used throughout the year to promote the week's events;

- **Kristen Binaso**, Senior Director of Corporate Alliances with the American Pharmacists Association talked about how to properly take, store and dispose of medications to prevent accidental poisoning;
- **Sandy Giffin**, President of the American Association of Poison Control Centers highlighted the history of poison centers, poisonings from the poison center perspective, and outreach and education activities conducted by poison centers;
- **Alan Korn**, Director of Public Policy and General Counsel with Safe Kids Worldwide talked about Carbon Monoxide (CO) as the silent killer and the importance of installing CO detectors in your home;
- **Bob Denniston**, Director of National Youth Anti-drug Media Campaign, White House Office of National Drug Control Policy (ONDCP), highlighted the agency's campaign, "Stop Prescription Drug Abuse," to address the increase in prescription drugs abuse among teenagers and young adults;
- **Phil Bauer**, the parent of a teenager who died in 2004 from abusing prescription medicine shared his family's tragic story and how he has been dedicated to helping others avoid the same fate; and
- **Deborah M. Fanning**, Vice Chair of Poison Prevention Week Council, and Executive Vice President with the Art and Creative Materials Institute, Inc., closed the event with information about identifying and safely using creative and art materials.

For more information about National Poison Prevention Week and the National Poison Prevention Week Council visit www.poisonprevention.org.

HRSA Funded "Taking Your Medicine Safely" Wins Award at the 2009 Joint Annual Meeting of State and Territorial Injury Prevention Directors Association's & CDC Core State Injury Grantees

"Taking Your Medicines Safely: A Community Senior Center Education Program" is the winner of the "Innovative Initiative of the Year" Award from the State and Territorial Injury Prevention Directors Association's (STIPDA). The STIPDA award was announced at the 2009 Joint Annual Meeting of STIPDA & CDC Core State Injury Grantees in National Harbor, Maryland on February 25, 2009. Selected exclusively by members of STIPDA, the "Innovative Initiative of the Year" Award is presented to a STIPDA member who has implemented a unique and creative program or activity that has the potential to substantially decrease injuries and violence in the communities that they serve.

Funded by HRSA's Poison Control Program, "Taking Your Medicines Safely" was developed and evaluated by the Pacific Institute for Research and Evaluation (PIRE). This innovative project was designed to prevent unintentional drug misuse and/or interaction poisonings among seniors and to promote Poison Centers as a resource for medication safety questions. The program was conducted by health educators or senior center personnel and provides seniors with a presentation covering six core concepts: (1) dangers associated with combining prescription and over-the-counter medications with vitamins, supplements, or herbal remedies; (2) patient-provider communications about medicines; (3) medicine information resources; (4) locating and organizing medications; (5) medication management techniques; and (6) Poison Center information.

Attendees of the STIPDA meeting had an opportunity to hear firsthand about the program at the "Preventing Unintentional Poisonings" session where Monique Sheppard Ph.D., from PIRE provided an overview of the "Taking Your Medicines Safely" program. Other panelists included Dr. Len Paulozzi from CDC's National Center for Injury Prevention and Control, who presented on what states are doing to address the non-medical use of prescriptions and Scott Proescholdbell from the North Carolina Division of Public Health who discussed the feasibility of unintentional poisoning death reviews in North Carolina.

Look for a downloadable version of the "Taking Your Medicines Safely" program later this year at www.poisonhelp.hrsa.gov.

Poison Help Campaign Update

The Poison Help campaign has evolved in recent months with the award of the national media campaign to [Edelman](#) made in October 2008. With a breadth of experience in public awareness campaigns, Edelman currently manages the Consumer Health Product Association's *Five Mom's Campaign* and SAMHSA's Center for Substance Abuse and Treatment's *Recovery Month Campaign* among others.

Since the contract award, Edelman has explored potential growth opportunities by connecting directly with Poison Centers through a variety of sources. Feedback has been attained through a questionnaire of Poison Center needs, a focus group of Mid-Atlantic center educators in Richmond, VA and a presentation and discussion at the AAPCC Mid-year meeting in Albuquerque, NM. These meetings and continued feedback from Poison Centers will help determine the campaign's direction for 2009 and beyond.

The overarching objectives for the Poison Help campaign are to:

- Promote the national toll-free number
- Showcase the role of the country's poison control centers
- Alert the general public about poison hazards
- Educate the general public and public health workers about poison prevention

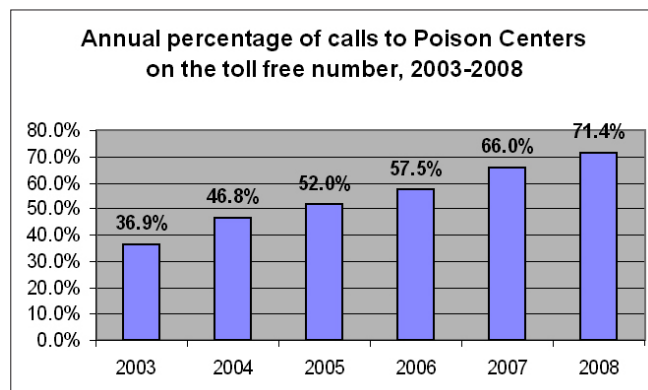
With these objectives in mind, Edelman will be reviewing the feedback gathered in recent months to develop and solidify specific tactics for the campaign. Upcoming changes include modifying and simplifying the existing national campaign Web site, developing an online promotion strategy for the site, launching a companion Spanish language Web site and engaging online with key influencers to broaden the campaign's media reach.

The nation's Poison Centers and the Poison Help number (1-800-222-1222) continue to be important resources for consumers and emergency responders as indicated by the continued increases in call volume on the national help-line (see chart below). However, more can be done to highlight the role each plays in preventing and responding to poison incidents. With support from the AAPCC and guidance from Poison Centers and Edelman, the campaign will continue to look for ways to enhance the general public's awareness and showcase the work of the nation's Poison Centers.

1-800-222-1222 Toll-Free Number Usage Continues to Increase

The HRSA Poison Control Program manages a national 1-800 number that connects callers directly to a nurse, pharmacist, and other poison expert at their local Poison Center free of charge. Poison Centers handle calls 24 hours per day, 7 days per week.

Since 2003, the number of calls that are routed to Poison Centers through the 1-800 number, as a percentage of all calls to Poison Centers, has been steadily increasing. See graphic below.



The CDC Sponsors Two Meetings with a Focus on the Prescription Pain Pill Epidemic

The Centers for Disease Control (CDC) sponsored a series of two meetings at its headquarters in Atlanta this winter to examine the epidemic of prescription pain pill abuse and misuse fatalities. Participants from federal agencies, law enforcement, injury prevention and state and local governments came together to learn more about the public health implications and promising responses to this public health crisis.

The first meeting, **Promising Legal Responses to the Epidemic of Prescription Drug Overdoses in the United States**, was held on December 2-3, 2008. Participants were provided with a broad overview of the epidemiology of fatal drug overdoses to set the stage for discussing the legal responses used by various states, communities and jurisdictions. These responses included prescription drug monitoring programs, doctor shopping statutes, state issued prescription forms, pain clinic legislation and the role of drug courts.

The follow-up meeting, **State Strategies for Preventing Prescription Drug Overdoses**, was held on January 13-14, 2009. The meeting focused on promising strategies that States are using to curb the rapid increase in deaths due to prescription pain pills. Discussion revisited the use of prescription drug monitoring programs and also focused on the role of medical examiner data and the broader utility of epidemiologic surveillance to monitor trends. Other topics included the use of insurance claims to reduce transferal fontanel pharmacy use; the implementation of opioid guidelines for chronic non-cancer pain patients; and the use of naloxone—a non-addictive prescription medication that serves as an antidote to reverse respiratory depression caused by opioid poisoning.

Evaluation of Adverse Drug Reactions Reported to a Poison Control Center Between 2000 and 2007

An evaluation of adverse drug reactions reported to the New Jersey Poison Information and Education System (NJPIES) was published in the March 1, 2009 edition of the American Journal of Health-System Pharmacy. The purpose of the study was to determine the likelihood of hospitalizations caused by adverse drug reactions. The evaluation revealed substantial variation in the probability of hospitalization resulting from adverse drug reactions (ADRs). The drugs most commonly implicated in those hospitalizations reported as having ADRs (in over 5% of all ADRs) were antidepressants, followed by dietary supplements, herbals, homeopathics, sedatives, hypnotics and anti-psychotics. By looking only at those classes of drugs which were frequently reported to NJPIES (over 4.7% of all calls for ADRS), the proportion of these ADRs which resulted in hospitalizations was by far greatest among those exposed to antidepressants.

The study also revealed that those patients who have ADRs after exposure to anticoagulants (58%) were more likely to be hospitalized than if the ADR was after exposure to, for example, stimulant, street drugs (9.4%). The latter substances, however, did not represent high percentages of all reported ADRs even though they are intuitively more likely to require hospitalization. This finding points to a need for further research.

Steven M. Marcus, M.D., Bruce Ruck, Pharm.D., and Alvin F. Chu, Ed.D., M.P.H., of the NJPIES were three of the five authors who collaborated on this study. To access the full article, visit <http://www.ajhp.org/cgi/content/abstract/66/5/481>.

NCSL Highlights Poisoning and Poison Centers for State Legislatures

Working in collaboration with the Poison Control Program, the National Conference of State Legislatures (NCSL) has distributed an informational post card on poisonings and poison control centers to over 2,400 state legislators on health committees and legislative staff interested in health issues. A web version of the postcard is also available on the NCSL website at <http://www.ncsl.org/programs/health/PoisonpostcardFeb09.htm>.

Call for Newsletter Submissions

Are you conducting interesting research on poisoning? Would you like others to know about your poison prevention initiative? Are you engaged in a unique collaboration to educate others about the dangers of poisoning? Send suggestions or article pieces for consideration in the next edition of the Poison Help Update Newsletter to Rebeca Sanchez-Barrett at 301-443-0324 or rsanchez-barrett@hrsa.gov.

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