



# GEORGIA POISON CENTER

2013

ANNUAL REPORT

1-800-222-1222  
[www.georgiapoisoncenter.org](http://www.georgiapoisoncenter.org)

Our mission is to provide high quality poison center services to healthcare professionals and residents of Georgia. It is our goal to provide prompt and accurate poison information to those who access our services.

We continuously strive to:

- Educate residents of Georgia in the areas of poison prevention and first-aid.
- Educate health-care professionals in the areas of clinical toxicology, poisoning epidemiology, poison prevention, toxicological diagnosis and care.
- Provide stable and continuous delivery of quality poison center services to Georgians.

**Poisonings are the second leading cause of unintentional deaths due to injury in the United States.**

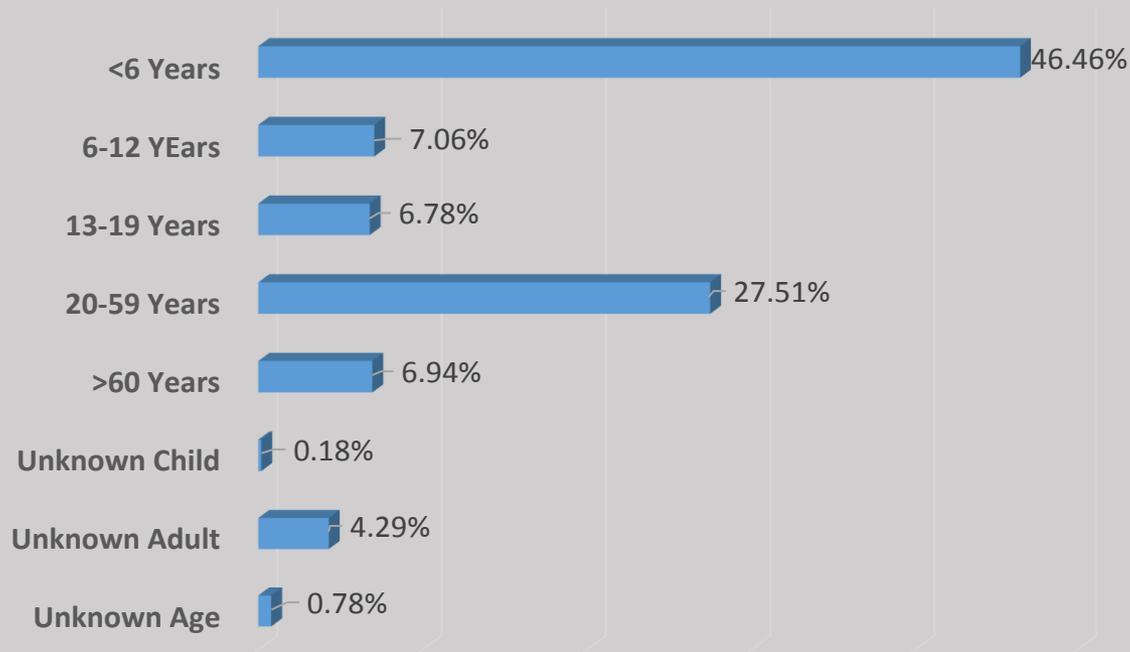
In 2013, the Georgia Poison Center received 87,446 calls.

We had a total of 72,198 human exposure calls and 15,248 requests for information and animal exposures.





## AGE



Of our 72,198 human exposure calls, nearly half of them involved children less than 6 years of age. Pediatric accidental poisonings continue to represent a significant proportion of calls to the GPC. Children ranging from one to two years of age make up nearly 30% of all exposure calls.

Pediatric exposures usually involve substances that are readily accessible and commonly found at home. In young children particularly, personal care products (such as cosmetics, dental products, shampoo and perfume) are the most frequent sources of exposure, while analgesics (pain killers) fall in second place (even though analgesics are reported most commonly in adults).

## GENDER

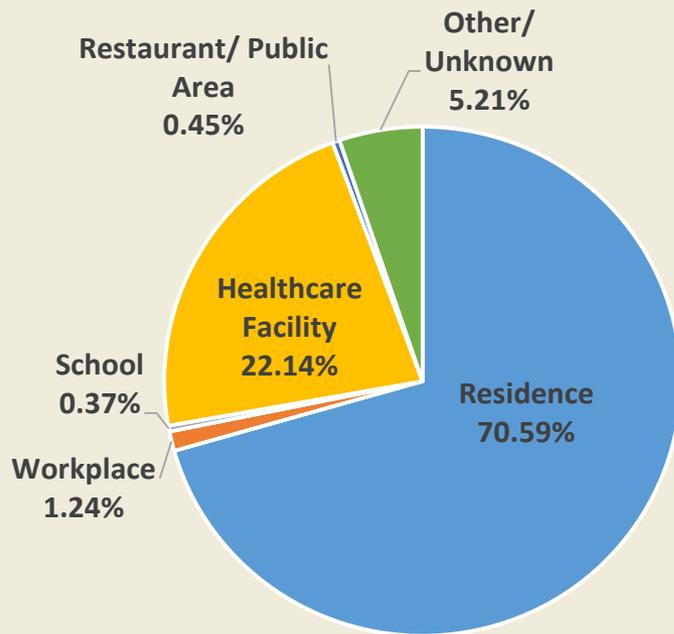
Poisonings can happen to anyone.

48 percent of our exposure calls occurred in males.

52 percent of our exposure calls occurred in females.



## SITE OF CALLER



Most calls to the Georgia Poison Center come from a home. But we also handle many other situations. Parents call the GPC when they believe their child was exposed to a toxic substance. Seniors call us when they fear they may have made an error in taking their medication. Doctors, nurses, and pharmacists from all practice settings call us for treatment advice on drug or poison related cases.

## GPC MANAGES PATIENTS SAFELY AT HOME

A call to the Poison Center provides a rapid, individualized, cost-effective answer to poison exposures, and often avoids expensive trips to the Emergency Department or doctor's office. The cost of the Poison Center is paid by State and Federal dollars in recognition of the utility of the Poison Center.

Most of the cases handled at the GPC can be effectively managed at home with treatment advice and instruction regarding symptoms of concern. All of our calls are handled by highly trained, experienced, and dedicated health professionals (such as doctors, nurses, and pharmacists).

SITE OF EXPOSURE	NUMBER	PERCENT
Managed At Home	46,393	64.3%
Managed in Healthcare Facility	23,216	32.2%
Other/Unknown	1,696	2.3%
Refused Referral	893	1.2%
<b>TOTAL</b>	<b>72,198</b>	<b>100%</b>

## ROUTE OF EXPOSURE

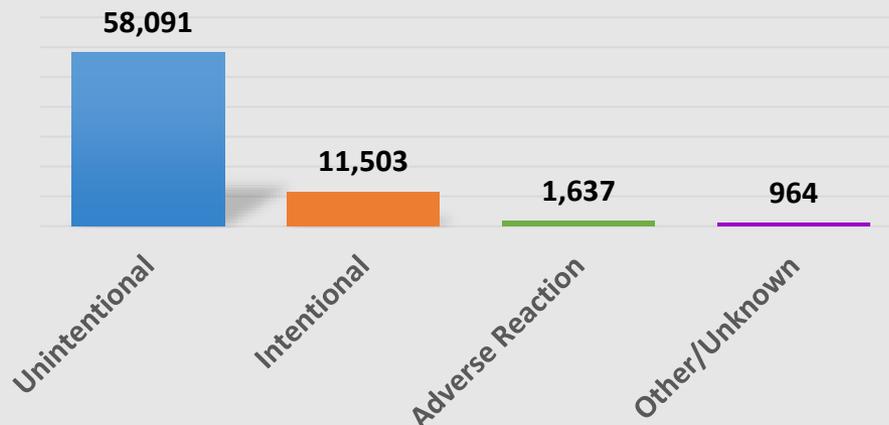
ROUTE	NUMBER	PERCENT
Ingestion	57,356	75.28%
Dermal	5,074	6.66%
Inhalation	4,907	6.44%
Bite/Sting	4,065	5.34%
Ocular	3,043	3.99%
Other/Unknown	917	2.29%

There are several different ways poisons can enter the body. How a person is exposed to a poison is called the “route of exposure.” The most common route of exposure to poison substances is through eating or drinking (ingestion).

Did you know that injection is a possible route of exposure? Biological or chemical substances can be injected into the body by accidentally puncturing the skin with a contaminated needle or other sharp device.



## CIRCUMSTANCES



- Unintentional exposures account for 80 percent of all human exposures. These exposures include occupational or environment exposures, bites/stings, therapeutic errors and misuse of products, and food poisoning.
- Intentional exposures, due to misuse, abuse, or suicide attempts, accounted for 16 percent of our total exposures.
  - Prescription and over the counter medicines are used everyday by teens and adults to “get high”. Studies show that a large percentage of abused prescription drugs are obtained without permission from family and friends. Medicines are easily accessible in home medicine cabinets, closets, pantries, purses, luggage, etc. and are highly susceptible to misuse and/or abuse.

# SUBSTANCES INVOLVED IN POISONINGS

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 GPC, 79 percent of the cases involved drugs, 14 percent were non-drug related, and 7 percent were unknown substances.



DRUG SUBSTANCES	EXAMPLES	NUMBER	PERCENT
Analgesics (pain killers)	<b>MOTRIN®</b> , <b>TYLENOL®</b>	9,750	11.42%
Sedative/Hypnotics/Antipsychotics	<b>PROLIXIN®</b> , <b>AMBIEN®</b>	4,886	5.72%
Antihistamines (allergy relief)	<b>ALLEGRA®</b> , <b>BENADRYL®</b>	3,793	4.44%
Cardiovascular Drugs	<b>LIPITOR®</b> , <b>NIASPAN®</b>	3,477	4.07%
Antidepressants	<b>ZOLOFT®</b> , <b>PROZAC®</b>	3,292	3.85%
Topical Preparations	<b>BENGAY®</b> , <b>NEOSPORIN®</b>	2,666	3.12%
Cold and Cough Preparations	<b>MUCINEX®</b> , <b>DELSYM®</b>	2,351	2.75%
Antimicrobials (antibiotics)	<b>PENCILLIN</b>	2,112	2.47%
Stimulants and Street Drugs	<b>ADDERALL®</b> , <b>RITALIN®</b>	1,988	2.33%
Hormones and Hormone Antagonists	<b>TAMOXIFEN</b> , <b>CLOMID®</b>	1,807	2.12%

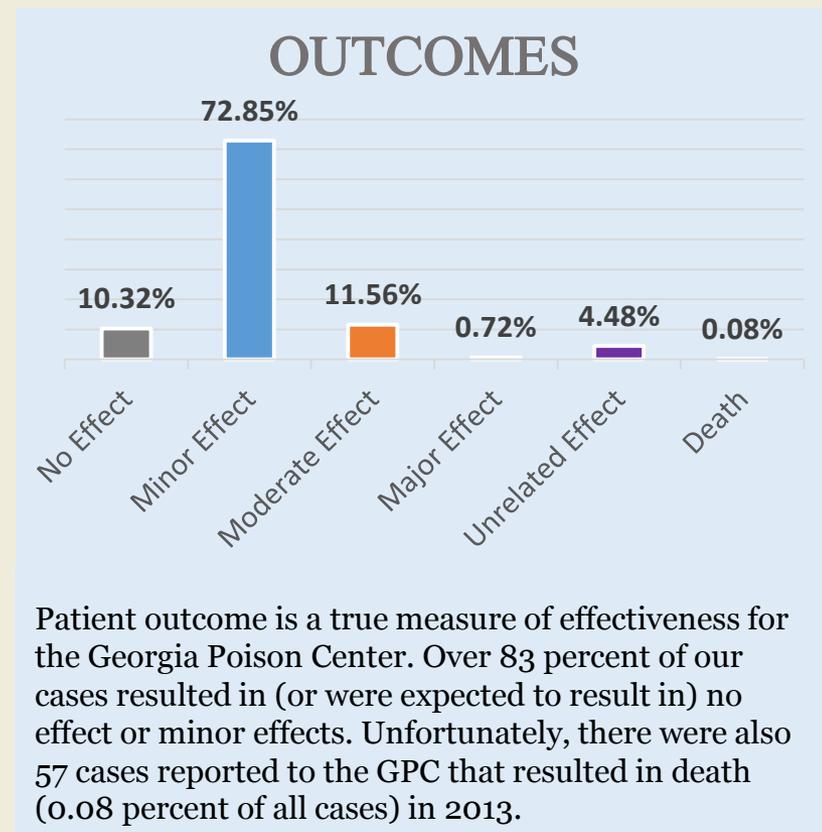
NON-DRUG SUBSTANCES	NUMBER	PERCENT
Cleaning Substances (Household)	6,078	7.12%
Cosmetics/Personal Care Products	5,777	6.76%
Bites and Envenomations	4,402	5.15%
Pesticides	3,090	3.62%
Foreign Bodies/Toys/Miscellaneous	3,072	3.60%
Vitamins	2,134	2.50%
Alcohols	2,070	2.42%
Fumes/Gases/Vapors	1,307	1.53%
Chemicals	1,271	1.49%
Plants	1,193	1.40%

# TREATMENTS INVOLVED IN POISONINGS

The two tables below list decontamination techniques (methods to reduce contact with the poison) and other therapies for poisonings recommended by the GPC during 2013. Most patients were managed with dilution, irrigation, or washing.

DECONTAMINATION TECHNIQUES	NUMBER
Dilute/Irrigate/Wash	16,626
Food/Snack	2,560
Charcoal, single dose	1,885
Fresh Air	1,804
Cathartic (substance that accelerates elimination of feces)	1,335
Other Emetic (induce vomiting)	643
Whole Bowel Irrigation (flushing out the stomach and intestines)	65
Lavage (cleansing of a hollow organ)	50
Charcoal, multiple dose	26
Ipecac (medicine that causes vomiting)	2

OTHER THERAPIES	NUMBER
Fluids, IV	3,332
Other	2,680
Oxygen	1,188
Antibiotics	1,060
Benzodiazepines	783
Naloxone	662
Ventilator	545
Antihistamines	485
NAC, IV	445
Antiemetics	380



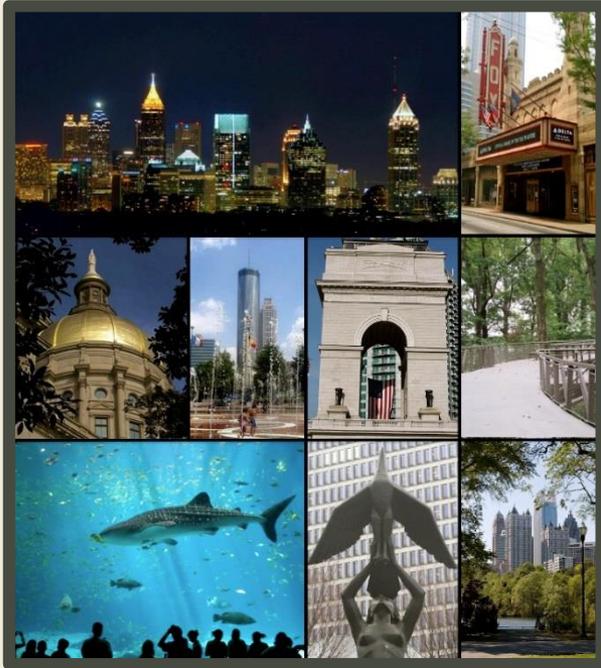
## PUBLIC AND PROFESSIONAL EDUCATION

The Georgia Poison Center is known for being an emergency telephone service that helps those who have been poisoned. It is also known for the education efforts that are put forth to the entire state of Georgia. Our public education efforts are intended to help increase the awareness of poison prevention and to communicate how to reach us for a poison emergency or poison information.

The Georgia Poison Center and partner organizations provided speakers and/or materials for over 100 programs, reaching more than 5,000 people during 2013. During the third week in March, the Georgia Poison Center celebrates National Poison Prevention Week (NPPW) and coordinates poison prevention activities throughout the state in collaboration with pharmacies, hospitals, schools, child care providers, and other agencies concerned with the health and safety of their communities.

In 2013, the GPC provided 16 emergency preparedness classes to over 450 participants across the state with a targeted audience of physicians, nurses, paramedics, pharmacists, and other health care professionals who are first responders to hazardous incidents. Classes offered included: Advanced Hazmat Life Support (AHLS); Explosion and Blast Injuries; Chemical, Biological, Radiological, Nuclear & Explosive Fundamentals (CBRNE); Nuclear Plant Emergency Response (NPER); and Radiological Preparedness & Emergency Response (RPER).

The Georgia Poison Center is also a training site for health care professionals. Emergency medicine and pediatric residents from Emory University School of Medicine train at the GPC on an ongoing basis. During their training, these residents have the opportunity to see how a poison center operates, become familiar with the resources that are available in the center, and also assist in consulting on poisoned patients admitted to local health care facilities. Fourth year pharmacy students from PCOM, Mercer University, and the University of the South are also trained here. Students are introduced to the topic of clinical toxicology through one-on-one tutorials and hands-on activities with the guidance of toxicologists and certified Specialists in Poison Information.



# RESEARCH PRESENTATIONS AND PUBLICATIONS

- **Chronic Neurologic Complaints in Two Patients Exposed to High Levels of Fipronil**
- **Clinical Features Of Patients With and Without Adverse Dysrhythmic Events After Suspected Exposure to Qt-prolonging Drugs**
- **Efficacy of Flow Restrictors in Limiting Access of Liquid Medications by Young Children**
- **Neuropathic Itch Syndrome Associated With Mercury Toxicity**
- **One Poison Center's Experience With Lipid Resuscitation Therapy: Frequency of Recommendation and Subsequent Treating-physician Administration During a One-year Period**
- **Standard Treatment Protocols and Electronic Charting: Shortcuts To Error?**
- **Utility Of A One-bag N-acetylcysteine Dosing Protocol For Acetaminophen Overdose**
- **Acidosis Unknown: Fatal Lactic Acidosis Associated With Acetaminophen And NRTI Use**
- **Bint Al Dahab: Still A Threat To Children In Oman**
- **Evaluating Oral Fluid as a Screening Tool for Lead Poisoning**
- **Lithium-induced Diabetes Insipidus Causing Acute Renal Failure and Lithium Toxicity in a Pediatric Patient**
- **Massive Iatrogenic Dopamine Overdose With Paradoxical Hypotension**
- **Medical Toxicologist Practice Regarding Drug-induced Qtc Prolongation in Overdose Patients: A Survey in the United States of America, Europe, and Asia Pacific Region**
- **Pediatric Antimony Toxicity Treated with Succimer**
- **Syndromic Surveillance for Acute Radiation Syndrome Using The National Poison Data System: Findings Over A One-year Period**



## GEORGIA POISON CENTER STAFF 2013

**Director**

Gaylord P. Lopez, PharmD, DABAT

**Assistant Director**

Stephanie L. Hon, PharmD, DABAT

**Medical Director**

Robert J. Geller, MD, FAAP, FACMT

**Associate Medical Director**

Brent W. Morgan, MD, FAAEM, ACMT

**Assistant Medical Director**

Ziad N. Kazzi, MD, FAAEM, FACMT

**Assistant Medical Director**

Adam Pomerleau, MD, FAAEM

**Assistant Medical Director**

Stella Wong, DO, FAAEM

**Medical Toxicologists****Toxicology Fellows****Specialists in Poison Information (SPIs)****Information Technology Staff****Data Manager****Education Staff****Executive Assistants****Public Health Professionals**



For any information regarding the Georgia Poison Center  
please contact us at:

Georgia Poison Center  
80 Jesse Hill Drive, SE  
P.O. Box 26066  
Atlanta, GA 30303-3050

1.800.222.1222 poison emergencies  
404.616.9000 general inquiries  
[www.georgiapoisoncenter.org](http://www.georgiapoisoncenter.org)

