



Susy Safe Newsletter

An European Project on Foreign Bodies Injuries in the Aero-Digestive tract in Children

Report from Merida, Mexico: ISCAIP's "Child Injury Prevention: Knowledge to Practice" and the "World Conference on Injury Prevention and Safety promotion"

The ISCAIP biennial conference was held on Friday, 14th March 2008 and the 9th World Conference on Injury Prevention and Safety Promotion was held from Saturday, 15th March 2008 to Tuesday, 18th March 2008, both in Merida, the capital city of the Yucatan, in Mexico.

The ISCAIP conference was named "Child Injury Prevention: Knowledge to Practice" and was meant to find challenges and opportunities to put the existing knowledge for child injury prevention and control into practice, while the Safety 2008 conference wanted to give special attention to the processes of globalization and their implications for injuries and violence: it was meant to explore both the challenges and the opportunities created by the new forms of globalization in the 21st century.

On both conferences official sessions were presented along with participants' presentations (poster presen-

tations for both conferences, also oral and video presentations at the Safety 2008 conference).

FOREIGN BODIES INSERTION / CHOKING / SUFFOCATION: various poster and oral presentation

NATIONAL CHILD INJURY REGISTER PROPOSAL BASED ON PILOT DATA COLLECTION PROJECTS Basenova Veronika, Charles University in Prague 2nd Faculty of Medicine, Center for Injury Prevention, Czech Republic:

"Foreign bodies count 2% of ambulatory treated and hospitalized child injuries according to ENHLASS 2005 data and 0% according to IDB 2006 data."

CHILDHOOD INJURY PREVENTION IN THE CLASSROOM: PROMOTING THE CULTURE OF PREVENTION

O'Reilly Luciana A., Criança Segura Safe Kids, Brazil

"Mortality due to suffocation counts 14% of all deaths, while hospitalization due to suffocation counts 0%. Suffocation is the leading cause of death in children un-

der 1, the third one for children from 1 to 4 years and the fifth one for children from 5 to 9 years."

INJURY DATA AND METHODS: LESSONS LEARNED FROM DEVELOPING INJURY CHARTBOOK, UNITED STATES, 2007

Bergen Gwen, National Center for Health statistics, USA

"Compared with the other leading mechanisms of injuries, suffocation rates have two distinct periods of change – decreasing of 1.7% from 1985 to 1994 and increasing of 2.1% from 1994 to 2004.

Suffocation is considering child's age the leading mechanisms of injury death for infants under 1 year of age.

Regarding age, race/origins, suffocation is more common in American Indians or Alaska Natives, followed by black people under 25 years of age; for people between 25 and 64 years of age suffocation is more common in American Indians again and white people; for people over 65 suffocation is more common for white people, black people and Asians or Pacific Islanders.

Suffocation is however the fifth cause of deaths after motor vehicle traffic, firearm,



poisoning and fall, with around 3-4 deaths per year on 100,000 people. It is more common between males than female with the highest rate for infants under 1 year, with a little increase from 22 years on, decreasing till around 70 years and then growing again almost at the same levels as infants (> 1 year).

Comparing also other countries, counting youth from 15 to 24 years, Northern Ireland followed by New Zealand are the leading countries in suffocation deaths, while counting people over 65, Puerto Rico followed by Denmark, Austria, Chile are the leading countries.

In years 2003-2004 there were 13,518 injury deaths due to suffocation, 5 per 1000 suffocation injury hospital discharges and 97 initial emergency department visits."

MAGNITUDE AND CHARACTERISTICS OF INJURY-RELATED DISCHARGE IN NHDS Lee Yeon-Kyeng, Division of Chronic Disease Surveillance, Korea Center for Disease Control and Prevention, South Korea

"Suffocation or choking count 0.2% of all injuries for both males and females. The discharge rate for suffocation or choking is higher between people over 50, followed by people between 40-49 years and then children between 0-9 years. Suffocation or choking mostly occur, when being taken care of, during education, followed by vital activity."

PARENTAL AND GUARDIAN ATTITUDES TOWARDS HOME SAFETY FOR FILIPINO CHILDREN

Perez Ma. Theresa, Safe Kids, Philippines

"The results of the study shows that the most

common home injury in children under 10 are falls (26%), cuts (16%), animal bites (15%), electrocution, burns and scales (14%) and suffocation and choking (12%). Other home injuries appeared out of the collected data are poisoning, drowning and insertion of foreign body. Foreign bodies that appeared in choking or foreign body insertion e.g. in nose or ears were: coins, large chunk of food, candy and marbles, beads, paper, tissue paper, crayon, erasers and the most common was the pellet used in toy guns. Some safety tips regarding choking: don't give toys with small parts to children; put small objects that can be ingested by children out of their reach."

DO CAREGIVERS GIVE THEIR UNDER THREE YEAR-OLD CHILDREN AGE-APPROPRIATE FOOD?: A CAREGIVER VIGILANCE STUDY

Rider G., Intertek, Procter & Gamble

"The abstract presents a study about appropriate food for children given by caregivers. Around 300 caregivers in Ohio area received a questionnaire that asked them what kind of food do they feed their children with. A high number of caregivers gave their children inappropriate food such as hot dogs, popcorns, nuts, small candy. Hot dogs followed by candy and nuts have the highest fatality rate due to choking, while nuts, popcorn and apples have the highest injury rate due to choking."

BUTTON CELL BATTERY INGESTION HAZARD

Scott Milkovich, USA

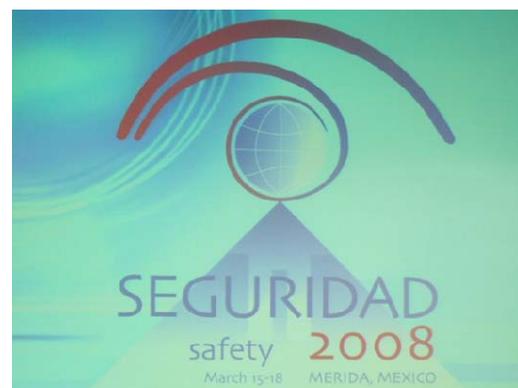
"Button cell batteries are a largely underestimated hazard to children. In fact they're shaped like coins, which are the most common

foreign body ingested by children. Further, batteries can be very dangerous because of burns, which could be minor burns –after 30 seconds or more significant, if the battery stays in the child body for minutes. Throughout poisoning is less probable, it is a possibility, if the battery is compromised. Also, three-volt lithium batteries appeared to be far more dangerous than traditional 1.5 volt button batteries."

CHOKING INJURIES AGE THREE TO FIVE

John Mason, Intertek, UK

"The presentation talks about choking in children aged three to five, since this age group is overlooked regarding choking, because focus is given to children under three, known to be the most vulnerable group. According to US Consumer Product Safety Commission, surprisingly, children aged three to five count 18,565 injuries due to choking, compared to the 27,250 injuries between children under three. Also caregivers do not pay attention any more for the possibility for such injury, when the children grow."



News

Second phase: new centres and new cases

Since the second phase of the Susy Safe project has started, new centres has registered and new cases were inserted in our databse. The number of cases grew from 7296 to 7566.

The new centres involved in the project are:

University clinical center	Tuzla	Bosnia And Herzegowina
Behcet Uz Children Hospital	Bornova Izmir	Turkey
General Hospital of Volos	Volos	Greece
Siriraj Hospital	Bangkok	Thailand
Menoufiya university hospital	Shibin Elkom	Egypt
Robert Debr Hospital	Paris	France
VU medisch centrum	Amsterdam	Netherlands
University of Ilorin Teaching Hospital	Ilorin	Nigeria
Santobono Hospital	Napoli	Italia

ESPO 2008– 8th International Conference of the European Society of Paediatric Otorhinolaryngology—June 8th-11th 2008, Budapest

The Susy Safe project will be presented with the presentation “The foreign body injuries in children: The Susy Safe project results”.

The abstract underlines the diffusion and seriousness of the foreign body injuries and its poor understanding because of the the difficulty to collect information with a deep level of detail and a wide geographical coverage needed for active surveillance purposes.

The results taken from the Susy Safe database showed that males were more likely to experience an injury due to foreign bodies with 54% of all cases. The median age of the injured children was 3. Among the inorganic FBs pearls, balls and marbles were the most common cause for injury, followed by toys and coins. Fish bones and bones were the primary causes of injuries among organic FBs, followed by nuts. In 34% of injuries hospitalization was required, while in 10% of cases also complications occurred. In 51% of cases the injury occurred without adult supervision, when children were playing (52%) or eating (41%).



EuroSafe

European Association for
Injury Prevention and Safety Promotion

2nd European Conference on Injury Prevention and Safety Promotion—October 9th and 10th 2008, Paris

Results from the Susy Safe project will be presented with the abstract “WEB-based surveillance system as an effective tool for risk assessment and for fostering product safety: the Risk Estimation engine of the Susy Safe project”.

The presentation points out the increasing importance of WEB-based surveillance systems, monitoring priority health events in order to support the planning and implementation of public health interventions and programmes. Public Health requires advanced computer-assisted technology to process a wide variety of information data, analyze them, detect risks and provide decision support as well as disseminate data and response to be used for adopting prevention measures, continuously educating and training.

The Susy Safe risk analysis engine provides an update estimate of the risk profile of the products causing injuries. Although many variables affect the risk of a foreign body injury, there are some intrinsic characteristics of the foreign body, such as its shape or its consistency.

The system contributes to improve public health information dissemination within consumers and consumers' associations. Further, supplying a quantitative risk assessment for the identification of hazardous characteristics of objects, such as dimensions or shape, it works toward an improvement of consumer products' safety design.

Member states: participating organizations and project leaders:

ITALY

Ministero dello Sviluppo Economico - Direzione generale per l'Armonizzazione del Mercato e la Tutela del Consumatore, Ufficio D1 – Coordinamento Attività sicurezza e conformità dei prodotti

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Constantinos DEMETRIADES



CZECH REPUBLIC

Masaryk University

Ivo SLAPAK



FRANCE

Commission de la Sécurité des Consommateurs

Florence WEILL



GREECE

Center for Research and Prevention of Injuries (CE.RE.PR.I.) - Medical school of University of Athens

Eleni PETRIDOU



THE NETHERLANDS

Food and Consumer Product Safety Authority

A.J. DE KONING

