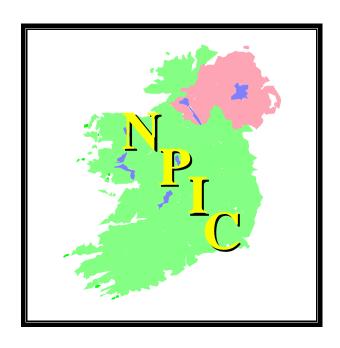
ANNUAL REPORT 2000



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Introduction:

The Poisons Information Centre provides a national service to doctors and other healthcare professions in Ireland. The Centre provides information on the toxicity, features and management of poisoning from drugs, household products, industrial chemicals, pesticides, plants and fungi. A limited service is provided to the general public e.g. advice on the need for immediate medical attention, skin and eye decontamination.

The Centre provides a 24-hour service. Between 8.00am and 10.00pm telephone enquiries are answered by our own Poisons Information Officers. Night-time calls were answered by the nursing staff on St. Michael's Ward, Beaumont Hospital, until 30th April 2000. Since 1st May 2000 our night-time calls have been automatically diverted to the Welsh National Poisons Unit in Cardiff. There are no additional costs to callers as the extra call charges are borne by Beaumont Hospital.

Records:

Written records are kept of all enquiries to the Centre. A standard call report form is used to note details of telephone enquiries (Appendix 1). In the future we may record our telephone enquiries. Details of all enquiries are registered on a computer database (UKPID) and used to generate reports. Selected enquiries are followed up (usually by telephone) to determine what features the patient developed and the outcome of the case.

Staff:

Director: Dr. Joseph A Tracey MB.,FFARCSI.,DABA

1 Manager: Ms. Patricia Casey BSc

3.5 Poisons Information Officers: Mr. John Herbert BSc., Dip Med Tox

Ms. Elaine Donohoe MSc

Ms. Nicola Cassidy BSc., MMedSc

Mr. Fergal O'Connor BSc

1 Clerical Officer: Ms. Annette Cooke

The Poisons Information Officers and Manager are all science graduates; some have masters degrees or a post-graduate diploma in medical toxicology. The director is a consultant anaesthetist in Beaumont Hospital.

All staff participate in continuing professional development by attending in-house programmes, meetings of Specialists in Poisons Information in the UK and Ireland, courses and conferences organised by the European Association of Poisons Centres and Clinical Toxicology (EAPCCT).

Information Sources:

The Centre uses a variety of information sources including a paper database, computer databases, textbooks, articles from the medical and scientific literature and material safety data sheets provided by industry.

The computer databases include:

•	TOXBASE	First tier database of the UK National Poisons Information Service (NPIS)
•	POISINDEX	American Poisons Information database
•	TOMES PLUS	Chemicals database
•	TICTAC	Tablet identification
•	UKPID	UK NPIS second tier database
•	INTOX	WHO Poisons Information database
•	INCHEM	WHO Hazardous Chemicals database
•	iSIs	Household & Industrial Products (UK)
•	NPIS Datasheet Compendium	Pesticides & Veterinary Products (UK)

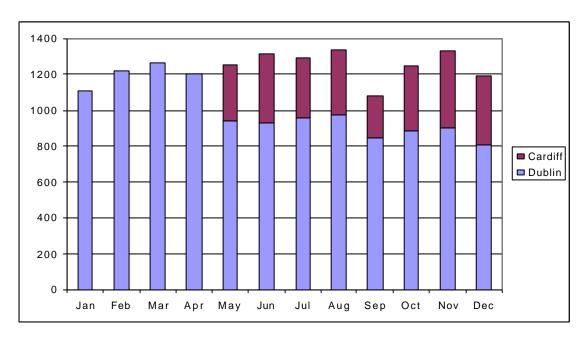
Enquiries:

The Centre received a total of 14,389 enquiries in 2000, a similar number to 1999 (14,654 enquiries). August and November were the busiest months (Figure 1). 2,808 of these calls were answered by the Cardiff Centre and are not included in the following analysis.

Poisons Plants of Great Britain and Ireland



Database GB & Ireland



12,031 enquiries were answered by our own Poisons Information Officers. Approximately, 34% of these enquiries were from Dublin (city and county), 10% were from Cork, 5% from Galway and 4% from Limerick (Table 1).

Table 1 Origin of enquiries

Table 1 Origin of enquiries	
County / Country	Number of enquiries
Dublin	4061
Cork	1190
Galway	654
Limerick	511
Tipperary	394
Louth	379
Waterford	332
Donegal	302
Kerry	280
Wexford	264
Kildare	243
Mayo	222
Sligo	219
Kilkenny	215
Westmeath	213
Laois	195
Meath	187
Cavan	120
Offaly	111
Monaghan	110
Clare	106
Wicklow	79
Carlow	63
Roscommon	55
Longford	17
Leitrim	9
Unknown	1491
Northern Ireland	6
UK	1
EU	1
USA	1
Total	12031

Origin of Calls:

Most enquiries were from doctors and nurses (Figure 2). 2,176 calls (18%) were from members of the public.

Figure 2. Enquirers



11,327 (94%) enquiries concerned human cases of poisoning, 107 animals, and 597 were non-emergency requests for information.

Human Cases of Poisoning:

4,347 (38.4%) enquiries involved children under 10 years and most of these were under 5 (Table 2). 4,191 (37.0%) enquiries were about adults (≥ 20years). Males outnumbered females in the children between 1 and 9 years old. In the older cases there was a predominance of females, particularly in the 15-19 year group.

Table 2 Age and sex of human cases

Age (years)	Female	Male	Unknown	Total	F:M Ratio
<1	100	88	24	212	1.14
1-4	1678	1940	188	3806	0.86
5-9	112	197	20	329	0.57
10-14	165	119	5	289	1.39
15-19	605	289	5	899	2.09
20-49	1925	1531	12	3468	1.26
50-69	305	261	2	568	1.17
70+	89	64	2	155	1.39
Unknown	738	647	216	1601	1.14
Total	5717	5136	474	11327	1.11

Agents:

The 11,325 enquiries about human cases involved 16,078 substances. As in previous years most cases involved drugs, industrial chemicals or household products (Table 3). Drugs were most frequently ingested by all age groups. However, the majority of cases involving household products, cosmetic and personal hygiene products and plants were children under 10 years.

Table 3 Agents in human cases

Age (years)	<1	1-4	5-9	10-14	15-19	20-49	50-69	70+	UK	Total
Drugs	94	2258	195	291	1309	5433	843	203	1184	11810
Industrial	14	133	32	69	129	797	126	15	406	1721
Chemicals										
Household	81	966	55	29	33	111	38	15	236	1564
products										
Pesticides	3	152	21	2	11	96	36	6	114	441
Cosmetics	16	245	9	3	8	44	9	9	55	398
Plants	6	31	4	1	2	4	1	0	13	62
Herbal	0	29	1	1	3	16	2	1	5	58
Remedies					_				-	
Animal	0	2	11	2	0	2	0	0	7	24
Unknown	8	102	1	8	22	72	13	1	120	347
Other	8	41	11	5	2	21	1	2	33	124
Total	214	3816	328	398	1495	6503	1055	249	2020	16078

Children (< 10 years):

4,347 enquiries, involving 4,358 products, were about children under 10 years. Drugs, household products and cosmetics and personal hygiene products were most frequently involved. The most common drugs were analgesics, vitamins, psycholeptics and cough and cold preparations.

Table 4 Most common drugs in paediatric cases.

Agents	<1	1-4	5-9	Total
Analgesics	9	384	40	433
Vitamins	0	180	21	201
Psycholeptics	8	152	14	174
Cough and Cold Preparations	6	145	7	158
Sex Hormones and modulators	3	116	7	126
Antibiotics	3	104	5	112
Anti-inflammatory and Antirheumatics	4	100	4	108
Nasal preparations	5	86	9	100
Psychoanaleptics	5	88	4	97
Anti-asthmatic	2	75	5	82
Antacids & drugs for treatment of peptic ulcer	1	70	0	71
Antianaemic preparations	0	57	8	65
Antipruritics	1	60	3	64
Stomatological preparations	4	51	5	60

Adolescents (10 – 19 years)

1,188 enquiries, involving 1,893 products, concerned adolescents. Drugs, industrial chemicals and household products were most frequently involved. The most common drugs were analgesics, psycholeptics, psychoanaleptics and anti-inflammatory and antirheumatic drugs.

 Table 5
 Most common drugs in adolescents

Agent	10-14	15-19	Total
Analgesics	100	393	493
Psycholeptics	35	203	238
Psychoanaleptics	25	190	215
Anti-inflammatory and antirheumatics	17	100	117
Stomatological preparations	21	77	98
Antibiotics	8	50	58
Gynaecologicals	6	29	35
Antiepileptics	9	22	31
Antianaemic preparations	2	26	28
Antihistamines	4	23	27
Antispasmodics and anticholinergics	6	17	23
Vitamins	11	11	22
Diuretics	1	14	15
Anti-asthmatics	2	9	11
Antidiarrhoeals	2	9	11

Adults (3 20 years)

4,191 enquiries, involving 7,807 products, concerned adults. Drugs, industrial chemicals and household products were most frequently involved. The most common drugs were psycholeptics, analgesics, psychoanaleptis and anti-inflammatory and antirheumatic drugs.

Table 6 Most common drugs in adults

Agent	20-49	50-69	70+	Total
Psycholeptics	1984	357	68	2409
Analgesics	1031	95	18	1144
Psychoanaleptics	920	137	23	1080
Anti-inflammatory and antirheumatics	223	20	1	244
Antiepileptics	199	33	6	238
Stomatological	205	20	8	233
preparations				
Antibiotics	119	4	5	128
Antacids	59	15	3	77
Diuretics	39	12	14	65
Beta-blockers	41	19	3	63
Anti-parkinson drugs	54	4	1	59
Antihistamines	36	6	0	42
Thyroid therapy	29	4	2	35
Calcium channel blockers	23	5	5	33
Anti-asthmatics	26	3	3	32

Outcome

122 cases were followed up and 97 (79.5%) of these recovered completely, 16 cases suffered sequelae and 9 patients died.

Other Activities

Quality management

The Centre introduced a system for peer review in January 2000. The written records of all calls are reviewed by another Poisons Information Officer to ensure that the form is completed properly and to check the advice given. During the day when several Poisons Information Officers are on duty forms are reviewed within one hour. Calls taken in the evening (6.00pm–10.00pm) are reviewed the following morning. Protocols were written for all our activities and will be reviewed/updated regularly.

Antidotes List

The antidotes list was reviewed and the updated version circulated to hospital pharmacies.

<u>Training</u>

- John Herbert obtained the Postgraduate Diploma in Medical Toxicology from the University of Wales in June 2000.
- Nicola Cassidy commenced the Beaumont Hospital staff development programme. As part of this programme she undertook a project to develop a leaflet on the prevention of accidental poisoning.
- Elaine Donohoe and John Herbert took the Beaumont Hospital customer care course. Remaining staff will take this course in 2001.
- Elaine Donohoe, Nicola Cassidy and Dr. Joseph Tracey attended the EAPCCT Congress in Amsterdam in May 2000. Elaine attended a one-day symposium prior to the Congress, Continuing Education in Clinical Toxicology.

Lectures/presentations

- Patricia Casey lectured on the management of poisoning to emergency medical technicians, A&E nurses, CCU nurses and anaesthetists on several occasions in 2000
- Elaine Donohoe presented a poster on the impact of restrictions on the sale
 of paracetamol and Nicola Cassidy presented a poster on the effect of the
 nation-wide nurse's strike on telephone enquiries to the NPIC at the EAPCCT
 meeting in Amsterdam.
- Dr. Tracey gave a lecture on "Acute Poisoning" for the final of the FCA course.

Meetings attended by Dr. Tracey

DATE	TITLE	COUNTY/COUNTRY
7,8,9 Jan	Meeting Scientific Committee EAPCCT	Utrecht
28 Jan	Meeting Board National Poisons Information	London
	Service, UK.	
24 Feb	Lecture "Acute Poisoning" Final FCA course	Dublin
3 March	Meeting Scientific Committee EAPCCT	Brussels
4-5 March	Governing Body EAPCCT	Brussels
5 April	Visit to Forensic Toxicology Lab	Munich
3-6May	XX Congress EAPCCT	Amsterdam
June	World Congress of Anaesthesia	Montreal

Publications/abstracts

- T.W. Holohan, C.P. Humphreys, H. Johnson, P.B. Casey, J.A. Tracey, M. Laffoy, A.T. Clarke.
 Sources of Information for Acute Poisoning in Accident and Emergency Departments in Dublin, Ireland.
 Journal of Toxicology Clinical Toxicology 2000; 38: 29-36
- P.A. McCormack, P.B. Casey, P. Barry, M. Laffoy, J. A. Tracey. Delays in administration of acetylcysteine in paracetamol overdose. Irish Medical Journal 2000; 93: 77-78
- 3 E. Donohone, J.A. Tracey

 Restrictions on Sale of paracetamol in Ireland had no impact on the number of tablets ingested in acute deliberate overdose.

 Journal of Toxicology Clinical Toxicology 2000; 38:251
- N. Cassidy, P.B. Casey, J.A. Tracey
 Impact of a nationwide nurses strike on telephone enquiries to the
 National Poisons Information Centre
 Journal of Toxicology Clinical Toxicology 2000; 38: 239.

Appendix 2. Top 100 enquiries

AGENT NAME GENERIC NAME

Ethanol Paracetamol Unknown Valium

Zimovane Zopiclone Dalmane Flurazepam

Alprazolam

Seroxat Paroxetine
Melleril Thioridazine
Calpol Paediatric Suspension Paracetamol

Fluoxetine Hcl

Distalgesic Dextropropoxyphene, paracetamol

Diazepam

Prothiaden Dothiepin Anadin Aspirin

Ecstasy

Ponstan Mefenamic acid Largactil Chlorpromazine Panadol Paracetamol Efexor Venlafaxine

White Spirit

Cipramil Citalopram
Tegretol Carbamazepine
Solpadeine Paracetamol

Zolpidem

Librium Chlordiazepoxide

Ibuprofen

Difene Diclofenac
Lustral Sertraline
Tramil Paracetamol
Lexotan Bromazepam

Anadin Extra Aspirin, paracetamol

Normison Temazepam

Aspirin

Augmentin Amoxycillin, clavulanic acid

Disprin Aspirin Nurofen Ibuprofen

Metallic Mercury

Zydol Tramadol

Temazepam

Eltroxin Thyroxine

Flunitrazepam Methadone Amitriptyline

Dimotapp Elixir Paediatric Phenylpropanolamine, phenylephrine,

brompheniramine

Essential Oil Information Bleach Household Petroleum Spirit Epilim Sodium valproate

Heroin Marihuana

Lithium carbonate

Silica Gel

Ventolin Salbutamol

Warfarin

Nortem Temazepam Motilium Domperidone

Dettox

Zispin Mirtazapine Anxicalm Diazepam

Nu-Seals Aspirin

DF 118 Dihydrocodeine Gamanil Lofepramine

Karvol Inhalant Capsules

Zip Firelighters

Zyprexa Olanzapine Cogentin Benztropine

Domestos Bleach

Hedex Paracetamol

Prazepam

Priadel Lithium
Risperdal Risperidone
Tylex Paracetamol
Storm Flocoumafen

Unknown Drug

Piriton Chlorpheniramine

Sudocrem Olanzapine Atenolol

Losec Omeprazole Serenace Haloperidol Mogadon Nitrazepam

Rat Poison

Haliborange Tablets Multivitamins
Noctamid Lormetazepam
Rivotril Clonazepam
Epanutin Capsules Phenytoin

Amoxycillin

Inderal Propranolol

Aftershave Lotion

Alkalis

Milton Sterilising Fluid

Perfume

Round Up Glyphosate
Aulin Nimesulide

Parazone

Stemetil Prochlorperazine

Benzodiazepine unknown

Paracetamol (Staggered Overdose)

Risperidone