

HANDS-ONHealth

Health Wave Newsletter, March 2008

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Poison Prevention Week: March 16-22, 2008

The U.S. Congress established National Poison Prevention Week on September 16, 1961. Shortly thereafter, the Poison Prevention Week Council was organized to coordinate this annual event and promote poison prevention.

National Poison Prevention Week, the third week in March each year, is a

week nationally designated to highlight the dangers of poisonings and how to prevent them. However, *every day people can and do prevent poisonings.*

Please visit www.poisonprevention.org for more information about this year's weekly events and materials.



TRENDS AND STATISTICS

- More than 2 million poisonings are reported each year to the 61 Poison Control Centers (PCCs) across the country, or one poison exposure every 13 seconds.
- More than 90 percent of these poisonings occur in the home and involve household items such as medicines, cleaning supplies, cosmetics and personal care items.
- Children younger than 3 years of age were involved in 38% of the cases, and 51% involved children younger than 6 years of age.
- In 2005 about 91,000 young children visited hospital emergency rooms; and
- more than one million calls were placed to poison control centers as a result of unintentional poisoning.

Sources:

- 2005 Annual Report of the American Association of Poison Control Centers National Poisoning and Exposure Database
- Watson, W.A., Litovitz, T.L., Rodgers Jr., G.C., et al, 2004 Annual Report of the American Association of Poison Control Centers Toxic Exposure Surveillance System. *Am J Emerg Med* 2005; 23(5):589-708.
- poisonprevention.org

In This Newsletter:

Poison Prevention Week: March 16-22, 2008

Learn ways to protect your child from poisons in the home (**pages 1-2**) and view the FDA flyer "How to Give Medicine to a Child" at the end of this newsletter.

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March is National Colorectal Cancer Awareness Month

Colon cancer is the fourth largest cause of cancer deaths in men and women. Learn about the risk factors, symptoms and screenings.

(pages 3-4)

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Protect Your Child from Poisons in Your Home

Recognize Poisons in Your Home

Medicines. Cleaning Products. Houseplants
Many items in your home can be poisons to children. *But the main cause of children's deaths from poisoning is vitamin pills with iron.* A child can die after swallowing as few as five of these pills.

Do You Know These Poisons?

Some dangerous medicines are:

- diet pills stimulants--pills to help you stay awake
- decongestants--pills that help clear a stuffy nose
- other medicines, like those that treat depression or high blood pressure

Some dangerous household products are:

- art supplies
- dishwasher detergent, bleach, and ammonia
- gasoline, kerosene, paint thinners, antifreeze, and windshield washing fluid
- beer, wine and liquor other products with alcohol, like mouthwash, after-shave and colognes
- houseplants

Poison Proof Your Home

To protect your child:

- Close containers right after you use them.
- Make sure child-resistant caps are on right.
- Keep vitamins, medicines, cleaners, and other dangerous products in the containers they came in. Don't store these products in cups, soft-drink bottles, or milk cartons. Children may think they are OK to eat or drink.
- Keep these containers where children can't reach or even see them.
- Buy only art supplies labeled as safe (nontoxic) for children.

Learn the Symptoms of Poisoning

If you see an open or spilled bottle of pills or other dangerous product, your child may be poisoned. An important sign of poisoning is when children who were well develop unusual symptoms:

- They're sleepy even though it's not nap time.



- They can't follow you with their eyes.
- Their eyes go around in circles.
- They have burns or stains around the mouth.
- Their breath smells strange.

What Should You Do If You Suspect Poisoning?

If you think your child has swallowed, breathed in, or touched poison, call the poison control center or your doctor right away. Post their numbers near your phone. The nearest poison control center should be listed with other emergency numbers at the beginning of your phone book. If you can, tell them:

- the name of the poison
- the way the poison was taken — swallowed, breathed in, or splashed on the skin or in the eyes
- if your child has vomited
- your child's age, height and weight
- any health problems your child may have

If you are told to go to the hospital emergency room, take the poison with you.

Always have **syrup of ipecac** (*ip-eh-kak*) in the house. It can make a person vomit. You can buy it at the drug-store. **Do not use ipecac until you call the poison control center or your doctor.** They will tell you whether to use the ipecac and how to use it. With some poisons, vomiting can be harmful instead of helpful.

"How to Give Medicine to a Child"
Email, or print out and post the following information on pages 5-6

Sources: Food and Drug Administration, U. S. Dept. of Health and Human Services; U.S. Consumer Product Safety Commission; American Association of Poison Control Centers

March is National Colorectal Cancer Awareness Month

Founders: National Colorectal Cancer Awareness Month began in 2000 when the Prevent Cancer Foundation, the American Society for Gastrointestinal Endoscopy, the Foundation for Digestive Health and Nutrition and the National Colorectal Cancer Roundtable joined forces to bring about colorectal cancer awareness. Over 57 other collaborating organizations joined forces to raise awareness year-round, particularly during March. All across the nation, organizations sponsor activities to bring the public information about colorectal cancer.

Goal: increase awareness that colorectal cancer is largely preventable, treatable and beatable.

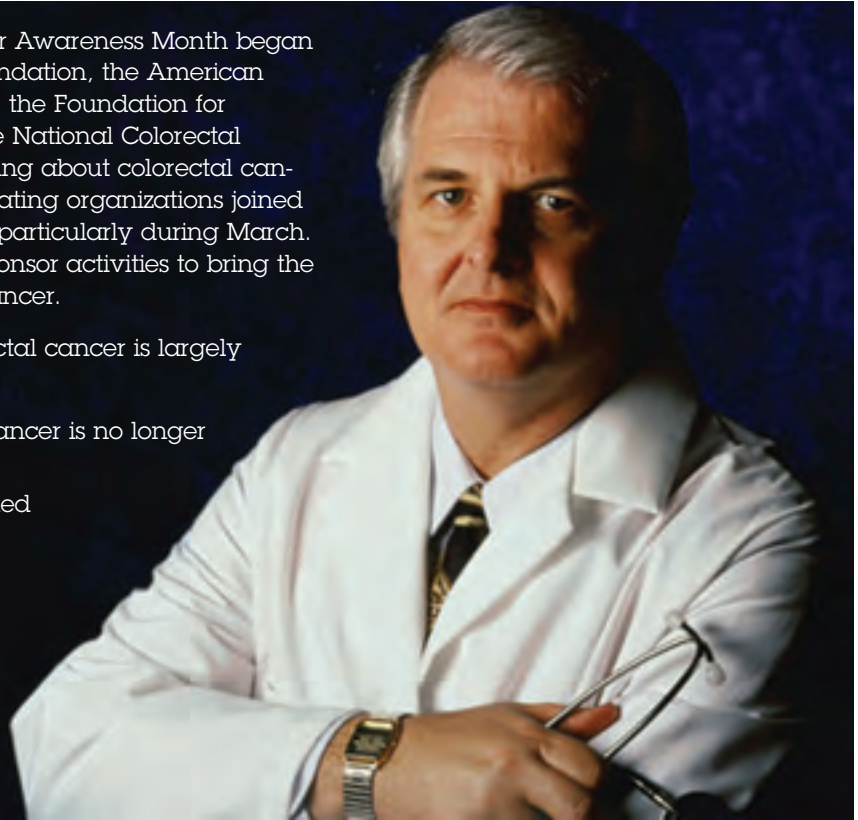
Vision: A world in which colorectal cancer is no longer a life threatening disease because:

- Individuals take action to get screened
- Barriers to screening are removed, especially lack of access to services
- All key stakeholders commit to decreasing colorectal cancer rates

Source: Prevent Cancer Foundation.

To learn more, please visit:

<http://www.preventcancer.org>



Risk Factors

No one knows the exact causes of colorectal cancer. Doctors often cannot explain why one person develops this disease and another does not. However, it is clear that colorectal cancer is not contagious. No one can catch this disease from another person.

Studies have found the following risk factors for colorectal cancer:

- **Age over 50:** Colorectal cancer is more likely to occur as people get older. More than 90 percent of people with this disease are diagnosed after age 50. The average age at diagnosis is 72.
- **Colorectal polyps:** Polyps are growths on the inner wall of the colon or rectum. They are common in people over age 50. Most polyps are benign (not cancer), but some polyps can become cancer. Finding and removing polyps may reduce the risk of colorectal cancer.
- **Family history of colorectal cancer:**

Close relatives (parents, brothers, sisters, or children) of a person with a history of colorectal cancer are somewhat more likely to develop this disease themselves, especially if the relative had the cancer at a young age. If many close relatives have a history of colorectal cancer, the risk is even greater.

- **Genetic alterations:** Changes in certain genes increase the risk of colorectal cancer.
- **Personal history of cancer:** A person who has already had colorectal cancer may develop colorectal cancer a second time. Also, women with a history of cancer of the ovary, uterus (endometrium), or breast are at a somewhat higher risk of developing colorectal cancer.
- **Ulcerative Colitis or Crohn's Disease:** A person who has had a condition that causes inflammation of the colon (such as ulcerative colitis or Crohn's disease) for many years is at increased risk of developing colorectal cancer.

In the United States, colorectal cancer is the fourth most common cancer in men, after skin, prostate, and lung cancer. It is also the fourth most common cancer in women, after skin, breast, and lung cancer.

Estimated new cases and deaths from colon and rectal cancer in the United States in 2008

New cases: 108,070 (colon); 40,740 (rectal)

Deaths: 49,960 (colon and rectal combined)

▪ **Diet:** Studies suggest that diets high in fat (especially animal fat) and low in calcium, folate, and fiber may increase the risk of colorectal cancer. Also, some studies suggest that people who eat a diet very low in fruits and vegetables may have a higher risk of colorectal cancer. However, results from diet studies do not always agree, and more research is needed to better understand how diet affects the risk of colorectal cancer.

▪ **Cigarette smoking:** A person who smokes cigarettes may be at increased risk of developing polyps and colorectal cancer.

Symptoms

A common symptom of colorectal cancer is a change in bowel habits. Symptoms include:

- Having diarrhea or constipation
- Feeling that your bowel does not empty completely
- Finding blood (either bright red or very dark) in your stool
- Finding your stools are narrower than usual
- Frequently having gas pains or cramps, or feeling full or bloated
- Losing weight with no known reason
- Feeling very tired all the time
- Having nausea or vomiting

Most often, these symptoms are not due to cancer. Other health problems can cause the same symptoms. Anyone with these symptoms should see a doctor to be diagnosed and treated as early as possible.

Screening

Screening tests help your doctor find polyps or cancer before you have symptoms. Finding and removing polyps may prevent colorectal cancer. Also, treatment for colorectal cancer is more likely to be effective when the disease is found early. To find polyps or early colorectal cancer:

- People in their 50s and older should be screened.
- People who are at higher-than-average risk of colorectal cancer should talk with their doctor about whether

to have screening tests before age 50, what tests to have, the benefits and risks of each test, and how often to schedule appointments.

The following screening tests can be used to detect polyps, cancer, or other abnormal areas.

Your doctor can explain more about each test:

▪ **Fecal occult blood test (FOBT):** Sometimes cancers or polyps bleed, and the FOBT can detect tiny amounts of blood in the stool. If this test detects blood, other tests are needed to find the source of the blood. Benign conditions (such as hemorrhoids) also can cause blood in the stool.

▪ **Sigmoidoscopy:** Your doctor checks inside your rectum and the lower part of the colon with a lighted tube called a sigmoidoscope. If polyps are found, the doctor removes them.

▪ **Colonoscopy:** Your doctor examines inside the rectum and entire colon using a long, lighted tube called a colonoscope. Your doctor removes polyps that may be found.

▪ **Double-contrast barium enema:** You are given an enema with a barium solution, and air is pumped into your rectum. Several x-ray pictures are taken of your colon and rectum. The barium and air help your colon and rectum show up on the pictures. Polyps or tumors may show up.

▪ **Digital rectal exam:** A rectal exam is often part of a routine physical examination. Your doctor inserts a lubricated, gloved finger into your rectum to feel for abnormal areas.

▪ **Virtual Colonoscopy:** This method is under study.

Other Prevention Measures

- Exercise regularly, and maintain a healthy weight.
- Eat a diet rich in fruits, vegetables and whole grains.
- Don't smoke, and don't drink alcohol excessively.



Quick Information for Your Health

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES • FOOD AND DRUG ADMINISTRATION



How To Give Medicine To Children

Do You Know How To Give Medicine To Children?

If you are caring for a child who needs medicine, it's important that you know how to give the medicine the right way.

Over-the-Counter Drugs

Over-the-counter drugs are also called OTC drugs. They are medications you can buy without a doctor's prescription. You usually find them on drugstore shelves, or in supermarkets and other stores. OTC drugs have information on the bottle or box. Always read this information before using the medicine. This information tells you:

- how much to give
- how often to give it
- what is in the medication
- warnings about using the drug
- if the drug is safe for children. If no dose is given on the bottle or package for children under 12 years old, ask your doctor or pharmacist:
 - Is it OK to give the medicine to my child?
 - How much should I give my child and when?



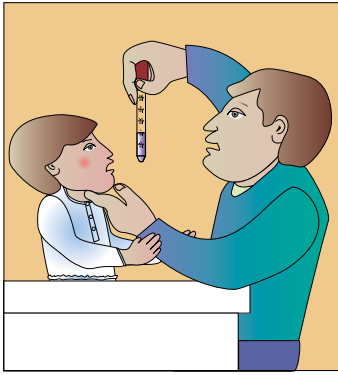
If the medicine has alcohol in it, as some cough and cold syrups do, you may want to ask the doctor if it's OK for your child to take it. Before buying the product, make sure the safety seal is not broken. If it's broken or torn, buy another box or bottle with an unbroken seal. Show the product with the broken seal to the pharmacist or sales person.

When The Doctor Prescribes The Medicine

If a doctor prescribes a drug for your child, before you leave the doctor's office ask any questions you have about the drug. Some of these questions may be:

- What is the drug and what is it for?
- Will this drug cause a problem with other drugs my child is taking?
- How often does my child need to take this medicine?
- How many days or weeks does my child need to take this medicine?
- What if I miss giving my child a dose?
- How soon will the drug start working?
- What side effects does it have?
- What should I do if my child gets any of these side effects?
- Should I stop giving the medicine when my child gets better?
- Is there a less expensive generic version that I can use?

When you get the medicine, check to see if it's the color and size you expected from the doctor's description. If not, ask the pharmacist about it. When filling a prescription, the pharmacist will often give you printed information with the medicine. If you don't understand the information, or if you have questions, ask the pharmacist. If you still have questions, call your doctor.



How To Measure

Liquid medicines usually come with a cup, spoon, or syringe to help measure the right dose. Be sure to use it. The devices that come with the medicine are better for measuring than kitchen spoons because the amount of medicine kitchen spoons hold can differ a lot. For example, one kitchen teaspoon could hold nearly twice as much as another. The numbers on the side of measuring instruments are usually small, so read them carefully. Here are the most common types of dosing instruments and tips for using them:

Dosage cups

For children who can drink from a cup without spilling. Look closely at the numbers on the side to make sure you get the dose right. Measure out the liquid with the cup at eye level on a flat surface.

Cylindrical dosing spoons

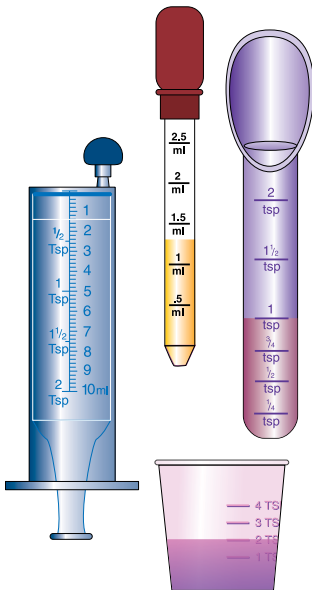
For children who can drink from a cup but are likely to spill. The spoon looks like a wide straw with a small spoon at the top. Measure the liquid in the spoon at eye level. Have the child sip the medicine from the spoon.

Droppers

For children who can't drink from a cup. Put the medicine into the dropper and measure at eye level. Give to the child quickly before the medicine drips out.

Syringes

For children who can't drink from a cup. You can squirt the medicine into the back of the child's mouth where it's less likely to spill out. Some syringes come with caps to prevent the medicine from leaking out. Be sure to remove these caps before giving the medicine to the child, or the child could choke on the cap. Throw away the cap or place it out of reach of children. You can fill a syringe with the right dose and leave it capped for a babysitter to give to your child later. Make sure you tell the sitter to remove the cap before giving the medicine to your child. It's best to use syringes specially made to give medicines to children. But if you find you have to use a hypodermic syringe, always remove the needle first.



Do You Have More Questions?

If you're not sure about the medicine or how to give it to your child, ask your pharmacist or doctor. Or ask the FDA.

The FDA may have an office near you. Look for the number in the blue pages of your phone book. You can also call the FDA on its toll-free number: (888) INFO-FDA (463-6332).

Or look on the Internet at www.fda.gov

The Food and Drug Administration is an agency of the U.S. Department of Health and Human Services that makes sure that medicines given to children work and are safe.

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