

Cough/Cold Meds Involved in Many ED Visits

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Every year an estimated 7,091 children under age 12 are treated in U.S. emergency departments for adverse events related to over-the-counter and prescription cough and cold medications.

Almost two-thirds of these visits were due to unsupervised ingestions, reported Dr. Melissa K. Schaefer and her associates at the Centers for Disease Control and

Prevention. The estimate is based on emergency department (ED) visits for adverse drug events attributable to cough and cold medications, identified from a nationally representative sample of 63 emergency departments in 2004 and 2005. The 7,091 visits make up almost 6% of all ED visits related to all medications in this age group; 66% of the study visits were related to unsupervised ingestions—significantly higher than the 47% of ED visits related to unsupervised ingestions of other

medications. The cough and cold products contained decongestants, expectorants, or combinations of decongestants, antihistamines, antitussive, and/or expectorant ingredients.

Hospital admission or extended observation was not needed in 93% of these cases, but 23% of patients had to undergo gastric decontamination. In over half of the cases, no symptoms were noted in the ED. However, among children who were symptomatic, 19% had allergic symp-

toms and 13% had neurologic symptoms.

The investigators noted that surveillance data from this and future studies could “help target education, enforcement, and engineering strategies for reducing adverse events from cough and cold medications among children.”

The study, which will be published in the April print issue of *Pediatrics*, appeared on the journal’s Web site (<http://pediatrics.aappublications.org/cgi/content/abstract/peds.2007-3638v3>). ■

Hep B Rates Fell During 1994-2004 For Ages 6-19

SAN DIEGO — The prevalence of hepatitis B virus among children aged 6-19 years declined significantly between 1994 and 2004, Annemarie Wasley, Sc.D., reported during a poster session at the annual meeting of the Infectious Diseases Society of America.

“We have seen significant declines among kids, which is evidence that the impact of universal vaccination is becoming apparent,” Dr. Wasley, an epidemiologist with the division of viral hepatitis at the Centers for Disease Control and Prevention, Atlanta, said in an interview.

The finding comes from a comparison of the National Health and Nutrition Examination Surveys (NHANES) from 1988-1994 and 1999-2004. The researchers tested 22,435 serum samples from NHANES 1999-2004 for antibody to hepatitis B virus (HBV) core antigen, and if positive, HBV surface antigen. The prevalence estimates were weighted to represent the United States population and age-adjusted to allow comparison between participants of the two surveys.

The overall prevalence of HBV was 4.8% in NHANES 1988-1994 and 5.4% in NHANES 1999-2004, a difference that was not statistically significant. However, the prevalence of HBV among 6- to -19-year-olds declined significantly, from 1.9% in NHANES 1988-1994 to 0.5% in NHANES 1999-2004.

She also reported that the prevalence of HBV infection among foreign-born children aged 6-19 years declined significantly from 12.8% in NHANES 1988-1994 to 2.0% in NHANES 1999-2004.

“The prevalence among foreign-born children is still significantly higher than for U.S.-born children, who have a prevalence of 0.4%, but this difference is much smaller than in previous surveys,” she said. “Some implementation of routine vaccination has been occurring in a stepwise manner in different parts of the globe. To see the impact of that in our data was a surprise. Vaccination of kids is having an impact here and globally. That’s great news.”

An analysis of all age groups found that the HBV prevalence was higher among black NHANES 1999-2004 participants (12.8%) than in white (3.0%) and Mexican American (2.8%) participants.

—Doug Brunk

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