

|  |
| --- |
|  |
| Analysis of consumer product related calls to the NSW Poisons Information Centre |
| June 2014 to May 2015 |
| March 2016 |

Contents

[1. Background 1](#_Toc446426117)

[2. Poisonings 1](#_Toc446426118)

[3. Poisons Information Centre data 2](#_Toc446426119)

[4. Products with high frequency of exposure or potential for injury 3](#_Toc446426120)

[4.1. Exposure of different age groups 4](#_Toc446426121)

[4.1.1. Neonates (0-4 weeks) 4](#_Toc446426122)

[4.1.2. Infants (4 weeks – 1 year) and toddlers (1-4 years) 4](#_Toc446426123)

[4.1.3. Children (5-14 years) 4](#_Toc446426124)

[4.1.4. Adolescents (15-19 years) 4](#_Toc446426125)

[4.1.5. Adults (20-74 years) 4](#_Toc446426126)

[4.1.6. Elderly (>75 years) 4](#_Toc446426127)

[4.2. All age groups 5](#_Toc446426128)

[5. Conclusion 10](#_Toc446426129)

1. Background

The Australian Competition and Consumer Commission (ACCC) administers national product safety regulations under the Competition and Consumer Act 2010 (CCA) and monitors the safety of general consumer products. The ACCC also educates suppliers and consumers about regulations, emerging issues, and the safe use of products to minimise the risk of injuries.

The ACCC consumer product safety area obtains injury and hospital admissions data from various sources to identify emerging hazards and products that may not meet the level of safety expected in the community.

Hazards associated with chemical based consumer goods continue to be subject to scrutiny because of both the frequency of exposures and the potential severity of injuries. Poisoning or injury from exposure to chemicals is a major cause of accidental death and injury to Australian children under 5 years of age[[1]](#footnote-1). There is growing community concern about the safety of chemicals and the consequences of both short and long-term exposure to hazardous chemicals.

Calls made to poisons information centres are a valuable source of data that can help identify contemporary risk factors and inform risk management strategies that may be adopted by suppliers or users of products as well as government and community organisations.

The ACCC obtained and analysed de-identified data from the NSW Poisons Information Centre (NSW PIC) about calls they received over a one-year period from June 2014 to May 2015.

The purpose of this project was to identify common factors in consumer product related chemical exposures and poisonings, to enable work with other stakeholders in developing and implementing modest but practical interventions that may reduce the prevalence and/or severity of such incidents.

The ACCC acknowledges and thanks the NSW PIC for their valuable assistance.

1. Poisonings

Although medicines are the most common source of poisons exposure overall (excluding young children), household products such as all-purpose/hard surface cleaner, bleach, hand dishwashing detergent and domestic insecticides are also significant sources of chemical exposure. In 2009-2010 in Australia, there were over 2500 hospitalisations due to poisoning[[2]](#footnote-2). The rate of hospitalisation for poisoning is highest for children aged two years and the most commonplace for children to be exposed to poisons is in and around the home.

In the UK, 5100 children under 5 years old were admitted to hospital due to accidental poisoning in 2012-13.[[3]](#footnote-3) This was associated with a mean cost of over £2500 per child (includes cost on the national health system and family) where the length of hospital stay was 2 days or more.[[4]](#footnote-4)

The majority of poisoning cases referred to hospital are monitored in the emergency department for short periods and not be admitted.[[5]](#footnote-5) These cases would not be included in hospitalisation statistics.

1. Poisons Information Centre data

In Australia, the Standard for the Uniform Scheduling of Medicines and Poisons (Poisons Standard) controls how medicines and poisons are made available to consumers. The Poisons Standard classifies substances into nine different Schedules, which reflect factors such as the need for the substance, the degree of risk presented by the substance and the degree of control to be exercised over the availability of the substance. Certain scheduled poisons are required to meet strict container and labelling requirements such as child resistant closures, first aid instructions and the national PIC telephone number (Australia 13 11 26).[[6]](#footnote-6)

The data collected by the NSW PIC represents approximately half of Australia’s poisons related calls because they receive calls from NSW, Tasmania and the ACT on a near full time basis, and from all around Australia after hours as part of the national PIC roster. While the NSW PIC recorded almost 90,000 poisons exposures in one year, 60 per cent of these relate to medicine exposures. Each record relates to an incident of exposure, but not necessarily an injury or case of poisoning.

According to the NSW PIC estimates, the total incidence of exposures to a particular substance nationally would be more than twice that of what is recorded. This is because the NSW PIC collects daytime data for one third of the population and most accidental exposures occur during the day. The other PIC in Perth, Queensland and Victoria collect data for the remaining two thirds of the population for exposures between 8:30am to 9:30pm.

When the NSW PIC receives a call they make a judgement about how serious the incident is and whether the victim should go to hospital or see a doctor. For each call, they record details about the person, the substance they have been exposed to and the course of action recommended.

The ACCC obtained the most current data available from the NSW PIC for calls they received from 1 June 2014 to 31 May 2015. The data was edited to remove duplicate information about single cases and calls relating to medicine exposures, bites and stings.

This data was analysed from different perspectives to identify product hazards associated with certain age groups, products from which exposure may lead to a higher rate of injury, and other aspects such as the route, reason, location or circumstances of the exposure.

1. Products with high frequency of exposure or potential for injury

The products associated with exposures vary with different ages; however, the overall number of exposures across the whole population provides valuable insights. All-purpose cleaning products, bleaches, hand dishwashing detergents and domestic insecticides are a major source of exposure to potentially harmful chemicals across all age groups. Table 1 lists the substances with the highest frequency of exposure leading to calls to the NSW PIC, most of which are household goods.

Ingestion is the most common route of chemical exposure, particularly for young children. This is followed by ocular and dermal exposures and exposure by inhalation. Calls relate to exposures that result in a wide range of symptoms including internal symptoms, skin reactions and burns. Treatment advice is able to be more exact when product formulations are known.

As well as contributing to health and safety outcomes Poisons Information Centres aim to reduce the pressure on hospitals from unnecessary emergency presentations.[[7]](#footnote-7) However, there are still cases where people attend hospital and the treating doctor or nurse calls a Poisons Information Centre. All these calls represent unnecessary chemical exposures, which cause significant concern to families and place a burden on the Poisons Information Centres and hospital emergency departments.

Table 1 Products with the highest frequency of exposure across all ages

|  |  |
| --- | --- |
| All | **#** |
| Cleaner: All-purpose/hard surface | 1 373 |
| Bleach: Hypochlorite based | 1 129 |
| Detergents: Hand-dish | 1 030 |
| Pyrethrins/pyrethroids | 938 |
| Desiccant: Silica gel | 900 |
| Cleaner: Toilet bowl (cage/rim type) | 835 |
| Hand Sanitiser | 795 |
| Cyalume light sticks/glow toys | 701 |
| Detergents: Laundry | 627 |
| Disinfectant | 590 |
| Eucalyptus oil | 533 |
| Detergents: Automatic dishwasher | 531 |
| Soap | 508 |
| Foreign body | 500 |
| Air freshener / room deodoriser | 456 |
| Nail polish remover | 410 |
| Veterinary: Internal medicines | 409 |
| Petrol | 377 |

* 1. Exposure of different age groups

Table 2 lists the substances that different age groups are most frequently exposed to. The different product profiles reflect what these groups may have access to but also what kind of activities they are often engaged in that involve the use of chemicals.

* + 1. Neonates (0-4 weeks)

Although the frequency of reported exposures to chemicals is very low, neonates are generally exposed to substances while in use by a parent or carer, such as hand sanitiser, eucalyptus oil and pens/ink or through contact with an object exposed to the substance such as detergent used to clean baby bottles.

* + 1. Infants (4 weeks – 1 year) and toddlers (1-4 years)

The highest frequency of exposure for infants and toddlers is associated with substances found near ground level such as toilet bowl cleaners, all-purpose/hard surface cleaner and detergents, which they will put in their mouths or ingest. Items left around the home or accessed from handbags are also a source of exposures, for example, hand sanitisers, desiccants, pens/ink and cigarettes/tobacco products. Household cleaning products are a major source of chemical exposure and may be accessed by infants and toddlers while they are in use or if they are not stored securely.

* + 1. Children (5-14 years)

Children are most frequently exposed to chemicals in products such as glow sticks, all-purpose/hard surface cleaner, freezer/cold packs and domestic insecticides. The number of exposures to chemicals in consumer products for children is lower than in the toddler age category. Although children have greater mobility and dexterity than toddlers, they are mostly past the age of exploring objects by mouthing them.

* + 1. Adolescents (15-19 years)

Potential self-harm and misuse of chemicals is apparent in chemical exposures of adolescents (Table 2). There are a number of calls relating to exposure to bleach, deodorants/antiperspirants and petrol. Exposure to petrol is likely to be indicative of siphoning. High risk taking behaviour is typically associated with this age category.

* + 1. Adults (20-74 years)

Adults are most frequently exposed to chemicals in the course of cleaning and maintenance of the home, but also in the workplace (Table 2). These chemicals include bleach, pesticides (the majority being domestic insecticides), all-purpose/hard surface cleaner, hand dishwashing detergent, and oven/grill cleaner.

* + 1. Elderly (>75 years)

Frequency of exposure to chemicals for the elderly is highest for denture cleaning agent, eucalyptus oil, bleach and domestic insecticides. This age group is more likely to use denture cleaner and there is a higher probability of mistaking it for drinking water if stored in a glass next to the bed. In addition, if the denture cleaner is in tablet form, it may be mistaken for a medication and ingested in error. In the case of eucalyptus oil, the product may be mistaken for a conventional medicine, such as cough syrup.

* 1. All age groups

Across all age groups exposure to some products leads to a high rate of adverse reactions, such as depilatories, hair colours and domestic insecticides (Table 3). In terms of accidental exposure, all-purpose cleaner/hard surface, hand dishwashing detergents and bleach are associated with the highest frequency of calls (Table 3). Exposure to chemicals because of therapeutic error is highest for veterinary internal medicines, eucalyptus oil, essential oils and denture cleaning agent (Table 3). A number of factors such as potential similarities in product packaging with conventional medicine, impaired eyesight or failure to read the instructions for use are likely to contribute to therapeutic error. In the work place unspecified chemicals, oven/grill cleaner, miscellaneous cleaners and bleach are associated with the highest frequency of calls (Table 3).

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Neonate (0-4 weeks)** | **#** | **Infant (4 weeks – 1 year)** | **#** | **Toddler (1-4 years)** | **#** | **Children (5-14 years)** | **#** |
| Hand Sanitiser | 4 | Cleaner: Toilet bowl (cage/rim type) | 213 | Cleaner: All-purpose/hard surface | 815 | Cyalume light sticks/glow toys | 262 |
| Cleaner: Baby bottle | 3 | Desiccant: Silica gel | 120 | Desiccant: Silica gel | 646 | Cleaner: All-purpose/hard surface | 82 |
| Eucalyptus oil | 2 | Foreign body | 104 | Detergents: Hand-dish | 627 | Freezer/cold packs | 67 |
| Pens/ink (inc stamp pad ink, textas) | 2 | Hand Sanitiser | 98 | Cleaner: Toilet bowl (cage/rim type) | 605 | Foreign body | 58 |
| Food additives | 2 | Cleaner: All-purpose/hard surface | 90 | Hand Sanitiser | 548 | Pyrethrins/pyrethroids | 53 |
| Cleaner: All-purpose/hard surface | 1 | Detergents: Automatic dishwasher | 71 | Detergents: Laundry | 435 | Desiccant: Silica gel | 52 |
| Detergents: Hand-dish | 1 | Pens/ink (inc stamp pad ink, textas) | 69 | Cyalume light sticks/glow toys | 390 | Detergents: Hand-dish | 52 |
| Detergents: Laundry | 1 | Cigarettes & tobacco products | 64 | Detergents: Automatic dishwasher | 373 | Bleach: Hypochlorite based | 48 |
| Soap | 1 | Detergents: Hand-dish | 54 | Soap | 346 | Air freshener / room deodoriser | 48 |
| Cleaner: Floor | 1 | Air freshener / room deodoriser | 53 | Bleach: Hypochlorite based | 321 | Desiccant: Other/unknown | 41 |
| Desiccant: Other/unknown | 1 | Soap | 48 | Disinfectant | 283 | Pens/ink (inc stamp pad ink, textas) | 38 |
| Paint: Other/unknown | 1 | Rodenticides: long acting anticoagulants | 48 | Air freshener / room deodoriser | 275 | Nail polish remover | 37 |
| Cosmetics: Cleanser, skin | 1 | Disinfectant | 43 | Nail polish remover | 270 | Disinfectant | 36 |
| Pre-wash stain remover | 1 | Detergents: Laundry | 40 | Foreign body | 268 | Eucalyptus oil | 36 |
| Tea tree oil | 1 | Paint: Other/unknown | 39 | Cleaner: Floor | 243 | Deodorants/anti-perspirants | 35 |
| Cleaner: Glass/window | 1 | Damp treatments | 39 | Perfume, cologne, aftershave | 240 | Hand Sanitiser | 31 |
| Bath oil/bubble bath/bath products | 1 | Baits: Other/unknown | 37 | Essential oils: Other/unknown | 234 | Detergents: Laundry | 31 |
| Talcum powder | 1 | Pesticide: Other/unknown | 35 | Pyrethrins/pyrethroids | 227 | Soap | 31 |
| Smoke/toxic products of combustion | 1 | Talcum powder | 34 | Pens/ink (inc stamp pad ink, textas) | 219 | Adhesive: Cyanoacrylates | 31 |
| Paint: Water-based house type | 1 |  |  | Eucalyptus oil | 214 |  |  |
|  |  |  |  | Rodenticides: long acting anticoagulants | 214 |  |  |

Table 2 Products with the highest frequency of exposures for each age group

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Adolescent (15-19 years)** | **#** | **Adult (20-74 years)** | **#** | **Elderly ( >75 years)** | **#** |
| Bleach: Hypochlorite based | 56 | Bleach: Hypochlorite based | 640 | Denture cleaning agent | 32 |
| Deodorants/anti-perspirants | 28 | Pyrethrins/pyrethroids | 574 | Eucalyptus oil | 30 |
| Petrol | 20 | Cleaner: All-purpose/hard surface | 356 | Bleach: Hypochlorite based | 25 |
| Chemicals: Other/unknown | 18 | Detergents: Hand-dish | 268 | Pyrethrins/pyrethroids | 20 |
| Cleaner: All-purpose/hard surface | 17 | Petrol | 240 | Detergents: Hand-dish | 19 |
| Cleaner: Oven/grill | 14 | Cleaner: Oven/grill | 237 | Soap | 13 |
| Disinfectant | 14 | Eucalyptus oil | 216 | Hand Sanitiser | 12 |
| Detergents: Laundry | 14 | Chemicals: Other/unknown | 214 | Batteries: Disc/button type | 10 |
| Hair colours | 14 | Glyphosate | 214 | Disinfectant | 8 |
| Eucalyptus oil | 13 | Disinfectant | 206 | Veterinary: Internal medicines | 8 |
| Pyrethrins/pyrethroids | 12 | Veterinary: Internal medicines | 199 | Glyphosate | 8 |
| Adhesive: Cyanoacrylates | 12 | Cleaner: Miscellaneous | 180 | Tea tree oil | 6 |
| Hydrocarbons: Other/unknown | 10 | Gas, fume, vapour: Other/unknown | 162 | Ethanol (Non-beverage) | 6 |
| Pool chlorine | 9 | Adhesive: Cyanoacrylates | 150 | Cleaner: All-purpose/hard surface | 5 |
| Nail polish remover | 9 | Pesticide: Other/unknown | 142 | Shampoo (non-medicated) | 5 |
| Detergents: Hand-dish | 8 | Pool chlorine | 138 | Desiccant: Other/unknown | 4 |
| Cleaner: Miscellaneous | 8 | Ethanol (Non-beverage) | 128 | Nail polish remover | 4 |
| Veterinary: Internal medicines | 7 | Herbicide Other/unknown | 113 | Detergents: Laundry | 4 |
|  |  | Pool acid | 113 |  |  |

Table 3 Top 20 products for certain types of exposures across all ages\*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Accidental** | **#** | **Therapeutic Error** | **#** | **Adverse reactions** | **#** | **Workplace** | **#** |
| Cleaner: All-purpose/hard surface | 1 282 | Veterinary: Internal medicines | 113 | Depilatories | 25 | Chemicals: Other/unknown | 71 |
| Detergents: Hand-dish | 1 011 | Eucalyptus oil | 95 | Hair colours | 20 | Cleaner: Oven/grill | 38 |
| Bleach: Hypochlorite based | 961 | Essential oils: Other/unknown | 16 | Pyrethrins/pyrethroids | 12 | Cleaner: Miscellaneous | 35 |
| Desiccant: Silica gel | 892 | Denture cleaning agent | 16 | Eucalyptus oil | 9 | Bleach: Hypochlorite based | 30 |
| Pyrethrins/pyrethroids | 882 | Disinfectant | 14 | Food additives | 9 | Gas, fume, vapour: Other/unknown | 24 |
| Cleaner: Toilet bowl (cage/rim type) | 830 | Tea tree oil | 14 | Bleach: Hypochlorite based | 7 | Alkalis | 24 |
| Hand Sanitiser | 763 | Desiccant: Other/unknown | 9 | Cleaner: All-purpose/hard surface | 7 | Veterinary: Animal vaccines | 17 |
| Cyalume light sticks/glow toys | 698 | Veterinary: External medicines | 8 | Food allergy | 7 | Cleaner: All-purpose/hard surface | 16 |
| Detergents: Laundry | 593 | Adhesive: Cyanoacrylates | 8 | Toothpaste: fluoride based | 5 | Acids: Other/unknown | 16 |
| Disinfectant | 522 | Food additives | 7 | Essential oils: Other/unknown | 4 | Cleaner: Industrial - general | 16 |
| Detergents: Automatic dishwasher | 514 | Mouthwash: Ethanol based | 5 | Tea tree oil | 4 | Building/handyman products: Other/unknown | 16 |
| Soap | 487 | Hydrogen peroxide (not for medical use) | 5 | Clove oil | 4 | Detergents: Automatic dishwasher | 15 |
| Foreign body | 484 | Desiccant: Silica gel | 4 | Insect repellents | 4 | Disinfectant | 14 |
| Air freshener / room deodoriser | 445 | Pyrethrins/pyrethroids | 4 | Teeth whitening treatment | 4 | Herbicide Other/unknown | 13 |
| Eucalyptus oil | 392 | Mouthwash: Non-ethanol based | 4 | Detergents: Hand-dish | 4 | Cement, concrete, lime | 12 |
| Nail polish remover | 387 | Depilatories | 4 | Soap | 3 | Pyrethrins/pyrethroids | 11 |
| Pens/ink (inc stamp pad ink, textas) | 351 | Contact Lens Cleaning Products | 4 | Cosmetics: Cleanser, skin | 3 | Paint: Other/unknown | 11 |
| Petrol | 333 | Cleaner: Baby bottle | 4 |  |  | Petrol | 10 |
| Essential oils: Other/unknown | 314 | Ethanol (Non-beverage) | 3 |  |  | Pesticide: Other/unknown | 9 |
|  |  |  |  |  |  | Glyphosate | 9 |

\*Excludes data on self-poisoning

Table 4 lists products with the highest proportion of exposures where the person experienced symptoms. Exposure to cement, sodium hydroxide, industrial cleaner, pool chlorine, alkalis, acids (including hydrochloric and pool acid) and oven/grill cleaner account for the highest rate of calls. Reporting on symptomatic exposure can be a useful indicator for the potential severity of the injury; however, it is important to note that this is not necessarily the case for all exposures.

Table 4 Products with the highest rate of callers with symptoms related to the exposure

|  |  |  |  |
| --- | --- | --- | --- |
| **Percentage Related Symptomatic**  **(with over 100 calls total)** | % | **Percentage Related Symptomatic**  **(with over 50 calls total)** | % |
| Pool chlorine | 68.0 | Cement, concrete, lime | 78.4 |
| Cleaner: Oven/grill | 63.5 | Sodium Hydroxide | 76.9 |
| Alkalis | 62.8 | Cleaner: Industrial - general | 68.5 |
| Acids: Other/unknown | 61.5 | Pool chlorine | 68.0 |
| Pool acid | 60.9 | Veterinary: Animal vaccines | 67.1 |
| Cleaner: Drain | 52.5 | Acids: Hydrochloric acid (not pool acid) | 63.6 |
| Petrol | 52.0 | Cleaner: Oven/grill | 63.5 |
| Hair colours | 50.0 | Alkalis | 62.8 |
| Plants: Oxalate | 48.1 | Acids: Other/unknown | 61.5 |
| Bleach: Hypochlorite based | 44.9 | Pool acid | 60.9 |
| Cyalume light sticks/glow toys | 44.7 | Carbon monoxide | 59.2 |
| Chemicals: Other/unknown | 44.6 | Hydrogen peroxide (not for medical use) | 56.1 |
| Adhesive: Cyanoacrylates | 43.5 | Diesel fuel | 55.8 |
| Pyrethrins/pyrethroids | 43.3 | Depilatories | 55.1 |
| Turpentine, mineral | 43.0 | Fire Extinguishers | 54.4 |
| Gas, fume, vapour: Other/unknown | 42.3 | Cleaner: Drain | 52.5 |
| Adhesive: Other/unknown | 41.0 | Petrol | 52.0 |
| Cleaner: Miscellaneous | 40.9 | Hair colours | 50.0 |
| Building/handyman products: Other/unknown | 40.8 | Smoke/toxic products of combustion | 48.8 |

Table 5 lists those products where the highest proportion of people exposed to the product have attended or are referred to hospital. Attending hospital is an indicator of the potential for higher severity injuries. However, in some cases people may attend hospital without calling a Poisons Information Centre and subsequently be advised that treatment in hospital is not necessary.

Chemical exposures that are associated with more serious injury resulting in hospitalisation include carbon monoxide (usually from gas heaters, charcoal barbeques, burning charcoal indoors for heat and petrol generators), disc/button type batteries and cement. Sodium hydroxide (from drain and oven/grill cleaner), industrial cleaner, alkalis, hydrochloric acid, pool acid, hydrofluoric acid (mainly from wheel cleaning products), adhesives (particularly superglue) and pool chlorine are also associated with hospitalisation (Table 5). Exposures to superglue are typically ocular and are often due to the tube appearing like eye drops or ointment.

Table 5 Products with the highest rates of callers in hospital or referred to hospital

|  |  |  |  |
| --- | --- | --- | --- |
| **In hospital + hospital refer rate**  **(with over 100 calls total)** | % | **In hospital + hospital refer rate**  **(with over 50 calls total)** | % |
| Batteries: Disc/button type | 84.3 | Carbon monoxide | 88.7 |
| Alkalis | 57.7 | Batteries: Disc/button type | 84.3 |
| Pool acid | 45.1 | Cement, concrete, lime | 70.6 |
| Acids: Other/unknown | 44.4 | Sodium Hydroxide | 69.2 |
| Pool chlorine | 44.0 | Cleaner: Industrial - general | 63.0 |
| Cleaner: Oven/grill | 37.5 | Alkalis | 57.7 |
| Cleaner: Drain | 33.9 | Acids: Hydrochloric acid (not pool acid) | 54.5 |
| Petrol | 33.2 | Alcohol: Other/unknown | 48.8 |
| Chemicals: Other/unknown | 33.0 | Veterinary: Animal vaccines | 48.7 |
| Car products, other/unknown | 32.9 | Pool acid | 45.1 |
| Adhesive: Cyanoacrylates | 32.3 | Acids: Other/unknown | 44.4 |
| Herbicide Other/unknown | 30.9 | Pool chlorine | 44.0 |
| Adhesive: Other/unknown | 29.9 | Herbicide: chlorophenoxy type (2, 4-D, MCPA etc.) | 40.0 |
| Bleach: Hypochlorite based | 29.0 | Fire Extinguishers | 38.2 |
| Cleaner: Miscellaneous | 28.6 | Cleaner: Oven/grill | 37.5 |
| Gas, fume, vapour: Other/unknown | 28.4 | Bleach: Other/unknown | 37.3 |
| Ethanol (Non-beverage) | 28.1 | Cleaner: Drain | 33.9 |
| Hydrocarbons: Other/unknown | 27.9 | Petrol | 33.2 |
|  |  | Chemicals: Other/unknown | 33.0 |

1. Conclusion

The analysis of calls to Poisons Information Centres indicates that injuries associated with chemical based consumer goods are a concern in Australia. This analysis helps identify the product types and age groups for which there is a high prevalence of exposures and/or a high proportion of injuries resulting from exposure. However, there are limitations with this data given outcome information and classification of the severity of injuries is unavailable.

This analysis will inform areas of future work for the ACCC aimed at reducing exposure to, or injury from, chemical based consumer products.

Future areas of work are likely to include:

* Educating consumers about the dangers of certain products, encouraging proper product selection, use and storage, and promoting strategies that prevent children gaining access to dangerous chemical based products.
* Talking to product manufacturers and suppliers to help them understand the common product related risk factors and incidents involving product failure and ensure they understand their obligations under the Australian Consumer Law.
* Collaboration with regulators that have responsibilities in this area including: state and territory health departments, the Australian Pesticides and Veterinary Medicines Authority, the Office of Chemical Safety and the Therapeutic Goods Administration, also non-government accident prevention organisations, such as Kidsafe.
* Undertaking further market surveys focusing on product categories and brands identified as posing the most risk to consumers.

1. Australian Institute of Health and Welfare, *Hospital separations due to injury and poisoning, Australia 2009-10,* Australian Institute of Health and Welfare, Canberra, 2012,viewed 6 November 2015, <http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=60129542180> [↑](#footnote-ref-1)
2. Australian Institute of Health and Welfare, *Hospital separations due to injury and poisoning, Australia 2009-10,* Australian Institute of Health and Welfare, Canberra, 2012,viewed 6 November 2015, <http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=60129542180> [↑](#footnote-ref-2)
3. Cooper *et al*, 2016, The short-term cost of falls, poisonings an scales occurring at home in children under 5 years old in England: multicentre longitudinal study, BMJ Publishing Group Ltd, viewed 5 February 2016, <http://injuryprevention.bmj.com/content/early/2016/01/29/injuryprev-2015-041808.abstract?papetoc> [↑](#footnote-ref-3)
4. ibid [↑](#footnote-ref-4)
5. Acting Manager, NSW Poisons Information Centre, NSW 2016 [↑](#footnote-ref-5)
6. Department of Health, *Poisons Standard July 2015*, Department of Health, Canberra, 2015, viewed 16 November 2015, <https://www.comlaw.gov.au/Details/F2015L00844/Download> [↑](#footnote-ref-6)
7. Queensland Health, *Practice Standards for Australian Poisons Information Centres 2014*, Queensland Health, viewed 18 March 2016, <https://www.health.qld.gov.au/poisonsinformationcentre/docs/poison-prac-standards.pdf> [↑](#footnote-ref-7)