

[IMAGE]

Charcoal: Not Just for Barbecues

The best treatment for accidental ingestion of toxic substances is activated charcoal (AC). AC, a different type of charcoal than you use for your barbecue, is especially effective if used within the first hour after poison ingestion. It has been suggested that AC should be administered in the home, but this idea has received a negative response from some people because of concerns that parents may not be able to properly administer AC to their children.

The Kentucky Regional Poison Center recently began advising parents with young children and pharmacies to have AC on hand in case of accidental poisoning. For 18 months, the authors of this study in *Pediatrics* followed the poison center and over 100 cases of home AC administration. Cases were followed until three days after poison ingestion; patients who were recommended home AC administration but treated in the emergency department instead were used for comparison.

All children treated in the home were successfully given a sufficient amount of AC, and no complications developed in any cases. The average time for home ingestion was 38 minutes - half the average treatment time in emergency-department cases (73 minutes). Mushrooms and medications were the most likely poisons ingested, while yogurt, fruit, milk, and water were likely to be offered with the charcoal to make it palatable.

The authors of this study add that over 200 more children were administered AC in their home by recommendation of the same poison center after the conclusion of this study; again, in all cases the treatment was successful. You should be able to successfully administer AC in your home if your child ever ingests poison, which can reduce the treatment time and make the treatment more effective. Keep AC in your medicine cabinet as a precautionary measure - you should be able to find it at your local pharmacy.

Reference:

Spiller HA, Rodgers GC. Evaluation of administration of activated charcoal in the home. *Pediatrics* 2001 (online):108(6), p. e100.

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