

## **Injuries and Poisoning**

Injuries are among the leading cause of death in children surviving their first birthday. Every day around the world the lives of more than 2000 families are torn apart by the loss of a child to an unintentional injury or so-called "accident" that could have been prevented. The grief that these families suffer -is immeasurable and may often change lives irrevocably. According to the CDC 2006 report about 20 children die every day from a preventable injury - more than the numbers dying from all diseases combined in the United States. Injuries requiring medical attention or resulting in restricted activity affect approximately 20 million children and adolescents and cost \$17 billion annually in medical costs. In India, more than 60,000 children each year, due to unintentional injuries and many more are left disabled due to the same. Of all un-intentional injuries poisoning is an important type contributing substantially to mortality and morbidity.

Poisonings especially due to animal or insect bites are common in the tropics and more so in the developing countries where overcrowding and poor living conditions are rampant. Of all type snake bites are the leading cause of death and disability in our country. Children in the

5-14 years age group are the worst affected according to the recent million deaths study by Mohapatra et al. Snake bite was finally included in the World Health Organizations's list of neglected tropical diseases in 2010 as it has been neglected more often than other diseases such as AIDS which kill fewer patients than snake bite.

Very few prospective pediatric studies are available in children with snake envenomation. The research paper on snake bite is an attempt to illustrate the clinical profile of these children and the outcomes of systemic envenomation in the present decade. Apart from this we have interesting case illustrations of remarkable survival after near fatal childhood injuries after accidental ingestions and inhalation.

In addition, we also have two important clinical questions on the use of first line agents in congestive heart failure which often baffles most of us as there is no consensus on the same. Several agents have been tried in neonatal seizures and sodium valproate seems to be rapidly emerging as the initial drug in emergency. But is there enough evidence for its use? Or are phenytoin and phenobarbitone still the first choice. Let us find out in the clinical question on neonatal seizures.

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Indian Journal of Emergency Pediatrics