Background

- In the past, today’s grandparents called the poison center about their children with accidental exposures.
- Now, they are calling for themselves, resulting in what appears to be a paradigm shift for poison center (PC) utilization.
- Older adults are living longer and taking more medications, increasing the potential for adverse reactions and errors.
- Emergency department visits for these adverse drug events are escalating along with healthcare costs.

Objective

To describe the trend in utilization patterns of a poison center in adults 60 and older (60+)

Methods

- toxICALL™ data was reviewed for all human exposure calls to the Washington Poison Center (WAPC) from 1999-2017.
- Call reason, management site with referral patterns, and substance data for 2017 for adults 60+ were analyzed.

Results

- Human exposure call volume decreased 34% from 1999 to 2017.
- During the same time, calls regarding adults 60+ increased 4.8% (peaking at 8.5% in 2017).
- There was an 18% increase in calls for adults 60+ classified as medication errors or adverse reactions (32% in 1999 to 50% in 2017).
- The top three reasons for medication error calls were double dose (29%), wrong drug (20%), and other type of wrong dose (17%).
- The top substances involved in errors were cardiovascular medications (21%) and insulin (4%), accounting for 25% of total errors.
- Seventy-nine percent of medication errors in adults 60+ were managed at home regardless of caller site.
- However, when the poison center was called first, 95.3% of medication errors were kept at home.

Conclusions

- In the last 18 years, medication error calls to the PC have increased in adults 60+, despite overall human exposure calls declining.
- Specific education targeting management strategies that involve poison center utilization is needed in this population.
- It is imperative to invest in the poison center with the changing public health landscape to provide a resource in prevention and management of these errors in adults 60+.