EMERGENCY DEPARTMENT PRESENTATIONS FOR INJURIES RELATED TO CRIBS

S McFaull, R Skinner, M Herbert* Correspondence: Public Health Agency of Canada, Jeanne Mance Building A01910C 200 Eglantine Driveway Tuney's Pasture Ottawa, Ontario K1A 0K9, Canada
Introduction Safe design and use of cribs is fundamental to infant safety. Because international coding (ICD) does not specify crib-related injuries, few surveillance systems provide data to study these injuries.

Methods The Canadian Hospitals Injury Reporting and Prevention Program (CHIRPP) collects information on injuries treated in the emergency departments of 11 paediatric and 3 general hospitals. Its database was used to study crib-related injuries to children under 5 years of age, 1990–2007.

Results 3201 cases were identified. The proportion of crib cases among all CHIRPP injuries remained relatively constant over time. The median age was 16 months (IQR, 10-23 months). The male to female ratio was 1.2:1. Falls out of cribs accounted for 75% of injuries followed by body part entrapment (7.2%), accessing hazardous objects (2.3%) and crib malfunction (<1%). Head/face/neck injuries occurred in 56% of cases and among these half were closed head injuries. A novel scale was developed to classify the severity of these injuries; the majority (82.5%) were minor, 5.2% moderate and 1.4% serious/fatal. In this study 4.5% of infants were admitted to hospital and there was one death (suffocation related to bedding materials).

Discussion Although Canada introduced product standards for cribs before 1990 (updates pending), crib-related injuries continue to occur. Injuries could be reduced through review/enforcement of standards, and, vigilance by parents regarding: correct installation and maintenance of approved cribs, minimising bedding and removing extra objects, removing hazards around the crib, and, discontinuing use when a child can climb out.