SPLINTERS & FRAGMENTS

A new study has examined the likelihood of injury among people who are addicted to alcohol or other drugs. Medical claims data from a longitudinal database of 1.5 million people were examined, and claims for anyone with a primary or secondary diagnosis related to alcohol or drugs in a three year period were analyzed. All substance abusers had an elevated risk of injury, with the largest risk (58%) among those who abuse both alcohol and other drugs. These people were twice as likely as controls to sustain at least one injury, and four times as likely to be hospitalized for an injury. The injury risks were also much higher for female than male abusers. The authors note that "the excess injury risk may be associated with drug-seeking, the effects of the drugs themselves, or other lifestyle factors, notably risk-taking and sensation-seeking". They urge physicians to identify female abusers more aggressively, and to work towards earlier identification of substance abuse problems among younger people (Miller TR, Lestina DC, Smith GS. Alcoholism. *Clinical and Experimental Research* January 2001;25).

*As the prospect for peace in the Middle East appears to decline, rates of intentional injury in the region may unfortunately only rise. Intentional injuries among young persons in Israel were analyzed from a national sample of emergency rooms. Fights and assaults accounted for more than half (54%) of the visits, followed by self inflicted injuries (10.8%) and abuse and rape (10.3%). As in other such studies, the overall rates were higher among adolescents than among younger children, and assault rates were higher for boys, while girls attempted suicide much more often. Nearly twice as many Jewish youngsters were treated in the emergency rooms as were Arabs, although this may not reflect true injury rates in the region. No suicides were reported for Arabs in the year studied. Unlike studies in the US, there were no differences in intentional injury rates between rural and urban residents (Gofin R, Abitzour M, Haklai Z, et al. Intentional injuries among the young: presentation to emergency rooms, hospitalization, and death in Israel. *Journal of Adolescent Health* 2000;27:434-42).*

Injury prevention initiatives that result in no change in safety behavior are not published or publicized frequently. But there are many lessons to be learned from endeavors that fail to produce results. These authors studied the effects of signs placed at university parking deck exits to remind drivers to buckle their safety belts. Many communities use reminder signs: they are inexpensive, durable, and help promote a social milieu of seat belt usage. But are they effective? The researchers collected 6780 observations and found the installation of signs did not increase belt use beyond what was already a high baseline (83%). Perhaps a different message or graphic may have been more effective, but the authors also encourage the use of other strategies such as high-visibility enforcement (Clack ZA, Pitts SR, Kellermann AL. Do reminder signs promote use of safety belts? *Annals of Emergency Medicine* 2000;36:597-601).

Deliberate self harm by poisoning is a major problem among adults in the developing world; a new paper examines this phenomenon by reviewing the literature. Such self poisoning is common in regions where toxic poisons are commonly available and medical services are scarce. Pesticides, domestic and industrial chemicals, medications, and plants are agents frequently used for self poisoning, and few of these have specific antidotes. The author discusses multiple interventions, including banning certain

*poisons, increasing coping skills for individuals and improving medical management for professionals (Eddleston M. Patterns and problems of deliberate self-poisoning in the developing world. *Quarterly Journal of Medicine* 2000;93:715-31).*

Each year about 6000 children in the European Union die from injuries, representing the leading cause of death for 0-14 year olds. This author examines whether contemporary epidemiologic methods could be successfully applied. She calls for improved large injury databases in the EU in order to understand the causes and conditions of childhood injury. She also notes "Childhood injury prevention has never achieved and probably will never receive adequate academic recognition and research support . . . yet, there are already some signs of positive change" (Petridou E. Childhood injuries in the European Union: can epidemiology contribute to their control? *Acta Paediatrica* 2000;89:1244-9).

This article initially caught my attention with its amusingly worded title, and kept my interest as it examines window falls in a suburban, rather than urban population. Unlike other studies, the authors describe the epidemiology of residential window falls among children in a rapidly growing suburban area over nine years. Falls comprised 41% of the admissions to a level I trauma center, with window falls accounting for 11% of all falls, more than twice the national average. Most falls were unwitnessed, resulted in head injuries, and occurred in single family homes or townhouses. Large scale campaigns of window guard distribution among low income housing residents will not affect this population, nor do there seem to have been window guard codes or mandates enacted in suburban settings.

*The article also includes discussion from its original presentation at a trauma surgery meeting (Benoit R, Watts DD, Dwyer K, et al. Windows 99: a source of suburban pediatric trauma. *Journal of Trauma, Injury, Infection, and Critical Care* 2000;49:477-82).*

New teen drivers are a population known to incur many crashes, due to their inexperience, impulsivity, and other factors. Many states in the US now mandate graduated licensing, following the New Zealand example, which requires a stepped approach to gaining new driving skills, and adult supervision, usually provided by parents. A study examined parental involvement with teen driving, and whether it helped to reduce the risks. Interviews were conducted separately with 424 provisionally licensed teens and their parents in one state. As with other adolescent behaviors, parents were often unaware of the risks in which their teens had engaged while behind the wheel, such as speeding or being distracted by other teens. Not surprisingly, teens with more frequent access to unsupervised driving engaged in riskier behaviors than those with less access. The authors conclude that parents need to play an even greater role in imposing and enforcing driving restrictions on their adolescent new drivers (Beck KH, Shattuck T, Raleigh R. Parental predictors of teen driving risk. *American Journal of Health Behavior* 2001;25:10-20).

Have you read—or published—an interesting article recently? Please send the citation, and copy if possible, to the editor of Splinters & Fragments: Anara Guard, 44 King Street, Auburndale MA 02466, USA (fax: +1 617 437 9394; email: guardwilliams@rcn.com or Anara@jointogether.org).

A GUARD

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