SPLINTERS & FRAGMENTS

Readers of Splinters & Fragments, especially those on a budget, will be interested in the web site Free Medical Journals.com [<http://www.freemedicaljournals.com/>]. This site provides links and descriptions to free, full text online journals, and indicates whether they are available immediately, a few weeks or a year after publication. Journals include titles published in English, French, German, Portuguese, Spanish, Turkish, and other languages. Many of the journals contain articles of interest to injury prevention practitioners. For example, a link to the *African Newsletter on Occupational Health and Safety* [<http://www.occuphealth.fi/e/info/anl/index.htm>], led to articles on involvement of children in the application and sale of pesticides in Tanzania, and snakebites in Niger.

For readers with an interest in law, the *WHO International Digest of Health Legislation* [<http://www.nt.who.int/idhl/en/ConsultIDHL.cfm>] offers a search by country or keyword to find information on recently passed laws and regulations that affect a number of injury related topics, including accident prevention and poisons.

An important role for injury prevention advocates is to place risk in perspective: to help people make well informed choices based on realistic perceptions of hazards and their control over them. A New Zealand survey asked schoolchildren about various natural disasters and hazards that might occur, how likely the children thought these events were, and their perceptions of their abilities to cope with them. Children with more realistic perceptions of risk had stronger belief in their ability to cope with such events, and children who had received education programs about hazards had fewer fears and greater awareness of protective behaviors to take (Ronan KR, Johnson DM, Daly M, et al. Schoolchildren's risk perceptions and preparedness: a hazards education survey. Australasian Journal of Disaster and Trauma Studies 2001(1) [<http://www.massey.ac.nz/%7Etrauma/>]).

Many studies have examined the risk of fire to the elderly. A recent article describes the alarming results of home assessments of geriatric clinic patients. Although almost two thirds of the clients had physical impairments that could affect their ability to escape a fire, and homes frequently had poor or inadequate fire safety equipment, most of the participants were not worried about fires. They knew little, and complied poorly with the fire prevention recommendations provided to them. Further work is needed to determine what messages will motivate the elderly to adapt their environments and behaviors to reduce their risks (Stiles NJ, Brancher D, Ramsbottom-Lucier M, et al. Evaluating fire safety in older persons through home visits. *J Kentucky Med Assoc* 2001;99:105-10).

College life often involves excessive consumption of alcohol, which is sometimes overtly encouraged by the campus environment. A study last year examined student-run college newspapers for how they covered alcohol and other drugs. Items about alcohol appeared in half the issues. Although items often discussed the problems associated with alcohol, they infrequently

provided basic information about alcohol use, detection, treatment, intervention, or prevention efforts. The authors point out that good opportunities are being missed for more extensive coverage of alcohol and other drug issues (Atkin CK, DeJong W. News coverage of alcohol and other drugs in US college newspapers. Journal of Drug Education 2000;30:453-65).

A May 2001 publication from the US Centers for Disease Control offers a succinct summary of recommendations that really make a difference in reducing motor vehicle related deaths and injuries. "Motor vehicle occupant injury: strategies for increasing use of child safety seats, increasing use of safety belts, and reducing alcohol-impaired driving" is part of the *Mortality and Morbidity Weekly Reports* series and is available at www.cdc.gov/mmwr/preview/mmwrhtml/rr5007a1.htm. For each of the three areas, education and enforcement interventions are described, and labelled as strongly recommended, recommended, or lacking sufficient evidence.

Too often, "injury" is equated with "trauma," neglecting the other forms of physical energy that can result in injury events. Concerns that global warming is increasing should draw more attention to how best to prevent heat stroke, hyperthermia, and other heat related injuries. Researchers studied deaths of older people in seven regions of Europe to assess heat related mortality in relation to climate. They found that heat did not account for more deaths in the hotter areas of Europe, and that heat deaths occurred at higher temperatures in those regions than in cooler climates. The authors conclude that populations will "adjust successfully" to global warming predicted to occur in the next 50 years (Keatinge WR, Donaldson GC, Cordoli E, et al. Heat related mortality in warm and cold regions of Europe: observational study. *BMJ* 2000;321:670-3).

In the US, alcohol misuse is the third leading cause of death, as well as the third cause of all preventable deaths. Yet for some states, the alcohol industry also contributes significantly to the local economy. This article presents a succinct summary of alcohol related illness and injury statistics in Wisconsin: a state that issues the most liquor licenses annually, that employs a significant number of people in breweries, and that has the lowest rate of alcohol abstinence over age 12 in the nation. The authors show how the public health model can be applied to prevent and intervene in alcohol problems, by suggesting strategies focused on the host, agent, vehicle, and environment (Cisler RA, Hargarten SH. Public health strategies to reduce and prevent alcohol related illness, injury and death in Wisconsin and Milwaukee County. *Wisconsin Medical Journal* 2000;99:71-8).

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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