Preventing choking and suffocation in children

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ABSTRACT

Choking, suffocation and strangulation cause serious unintentional injuries in children and are leading causes of unintentional death in infants and toddlers. Nearly all choking, suffocation and strangulation deaths and injuries are preventable. The present statement reviews definitions, epidemiology and effective prevention strategies for these injuries. Recommendations that combine approaches for improving safety, including research, surveillance, legislation and standards, product design and education, are made. Paediatric health care providers should be encouraging parents and other caregivers to learn cardiopulmonary resuscitation (CPR) and choking first aid, as well as offering anticipatory, age-appropriate guidance to prevent these injuries at regular health visits.

Key Words: *Anticipatory guidance; Choking; Injury prevention; Strangulation; Suffocation*

RECOMMENDATIONS

Research and surveillance

Data regarding the circumstances of fatal and near-miss choking and suffocation incidents are essential for identifying new hazards as well as for monitoring the effectiveness of existing or future regulatory and educational strategies. Detailed data, including narrative descriptions of events and products involved, are available only through specialized surveillance programs such as the Canadian Hospitals Injury Reporting and Prevention Program and the proposed National Coroners' Database. These systems are necessary for future research and surveillance related to product safety.

Legislation and standards

For some existing legislation and standards, data regarding compliance and effectiveness are lacking. For example, while a Canadian standard for play spaces and equipment exists that addresses many potential entrapment risks, the degree of uptake and application by communities and its effectiveness in preventing serious injuries are not known. Standards for play equipment for preschool-age children are lacking and should be developed.

- Nationally, the Canadian Paediatric Society (CPS) recommends revising the Hazardous Products Act to include known hazards that are not currently regulated but are associated with fatal and near-fatal incidents, such as bunk beds, toddler bed guardrails, children's clothing with drawstrings and window covering cords.
- At the provincial level, the CPS recommends that child care regulators integrate safety guidelines, including measures that prevent choking, suffocation and strangulation.
- At the municipal level, the CPS recommends that communities and school boards mandate the use of the (now voluntary) Canadian Standards Association guidelines for play spaces and playground equipment.

Product design/manufacture

Considering that improved product design, labelling and packaging could significantly impact children's exposure to choking and suffocation hazards, the CPS recommends that manufacturers and designers of baby and children's products and children's facilities use guidance documents such as the ISO Guide 50, which summarizes injury risks, including entrapment, suffocation and choking, in their design and production processes. The use of plastic wrap, plastic bags and other choking hazards in the packaging of products for young children should be reduced or eliminated wherever possible. Labelling of children's toys and products should clearly identify a specific risk, rather than simply making an age recommendation.

Education

During health visits, paediatric health care professionals should be educating parents and other caregivers (child care providers, babysitters, grandparents) about choking/suffocation prevention as appropriate for their child's age/developmental stage. Community public health programs should distribute choking prevention information to child care providers. Babysitting courses should include instruction on preventing choking and treatment protocols (see below).

First-aid/CPR

Parents and caregivers should be encouraged to take CPR and choking first-aid (infant/child CPR) courses offered by local Heart and Stroke Foundation offices (1-888-HSF-INFO), St John Ambulance or the Red Cross. The infant/child course is geared to child care workers, teachers, babysitters, lifeguards and parents. Paediatric health care providers, particularly prehospital care providers and those serving remote communities, should maintain their advanced paediatric resuscitation knowledge and skills. Basic Rescuer training should

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be supplemented by Pediatric Advanced Life Support training, with periodic updates and review, as recommended by the American Heart Association.

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