IOWA POISON CONTROL CENTER

Poison HOTLINE

1-800-222-1222

December 2025

Did you know .....

A hidden holiday hazard is lurking in items around your home – in things like toys, decorations, remotes, flameless candles, watches, and musical greeting cards.

Button batteries are small, coin-shaped, and shiny – and very attractive to young children. If a child ingests a button battery, it can cause severe burning, tissue damage, and even death.

To keep kids safe this holiday season, be sure that battery compartments are securely closed with a screw, and keep loose or spare button batteries stored up high and out of sight.

If an ingestion is suspected, immediately call **1-800-222-1222**, 24/7/365, to speak with one of our specially trained nurses, pharmacists, or physicians.

Treat the Patient, Not the Poison

When a patient presents following a suspected poisoning or overdose, clinicians often try to anticipate what can go wrong so they can be prepared to administer any necessary interventions—whether specific antidotes or other therapies. While it's important to be prepared, thorough patient assessment and careful monitoring for symptom development are equally valuable. Many times, a patient's history is unclear—especially in instances of self-harm. Unfortunately, the initial information is often only part of the story, and the history may need to be revisited several times as the situation and clinical trajectory become clearer.

Patients may be reluctant to provide information about what they took, or they may be unable to do so. This ambiguity is why observation and clinical judgment are so critical. A patient may claim they took "a handful of pills," but what does that mean? Was it a prescription? Something OTC? Was it their own medication? Someone else's? Even when the substance is known, the timing and amount are often unclear. A significant challenge presents when the patient claims to have taken one thing, yet their symptoms don't match the typical presentation. Either they remain asymptomatic, or even worse, their symptoms do not align with the initial history.

Another challenge is that symptoms can evolve over time. A patient who appears stable on arrival may develop significant effects as the agent is absorbed or metabolized. Continuous monitoring is essential, not just for the obvious signs like respiratory distress or hypotension, but for subtle changes that foreshadow future complications. Early intervention and assessment based on clinical presentation—not just the suspected exposures—can make all the difference in a patient's outcome.

Finally, remember that treating a poisoning isn't just about antidotes. Antidotes can be lifesaving, but they should not be used solely because they are available or because a poisoning is presumed. Antidotes also carry their own risks and can cause harm if given without a clear clinical need. The decision to administer an antidote should be based on clear clinical indications. Above all, let the patient's presentation guide your decisions: treat the patient, not the poison.

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POISON HELP 1-800-222-1222 POISONHELP.ORG

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