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Accidental Injuries Report Consumer Products



Canada 



Consumer and
Corporate Affairs
Canada

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Canada

Introduction

The Canadian Accident Injury Reporting and Evaluation (CAIRE) project was initiated by the Product Safety Branch of Consumer and Corporate Affairs Canada in January 1982. The objective of the project is to provide a data bank of information on accidents and injuries, which in turn will help organizations concerned with product safety to establish priorities and evaluate programs.

Reports are published twice a year, in April and October. The April report summarizes the data collected in the period from April to September of the previous year, and the October report summarizes the previous October to March.

Methodology

Five hospitals are participating in the data collection:

Isaac Walton Killam Hospital, Halifax, N.S.
Montreal Children's Hospital, Montreal,
Quebec
Toronto Hospital for Sick Children, Toronto,
Ontario
Pasqua Hospital, Regina, Saskatchewan
Prince George Hospital, Prince George, B.C.

As part of the patient registration procedure at the hospitals, all admissions for accidental injuries involving consumer products are specially coded. The product coding used is identical to that of the National Electronic Injury Surveillance System (NEISS) of the Consumer Product Safety Commission of the United States. At the same time, data including the nature of the injury (according to the ICD-9N code on international classification of diseases), the cause of injury (according to the ICD-9E code), and the age group of the casualty are collected. These data are collated and tabulated by the Hospital Medical Records Institute (HMRI) on a quarterly basis.

All admissions to the participating hospitals that result from accidents involving consumer products, including emergency cases, are reported to HMRI. Industrial and work-related accidents, and injuries that are not directly related to a consumer product, such as long-term exposure to toxic chemicals, are not included.

The small size of the sample (five hospitals out of more than 1,000 medical institutions in Canada) precludes any reliable extrapolation of the results, but is sufficient to provide a good indication of trends. Three of the five participating hospitals specialize in child care. This increases the bias of the sample from a statistical point of view, but is of particular interest to the Product Safety Branch, because of its commitment to the safety of children's products. The participating hospitals are representative of various community sizes and are strategically located geographically.

The NEISS code used to classify products divides the range of consumer products into some 1,000 classifications. Some of these are very specific, for example, waffle irons, and others much more general, such as stairs and steps. The codes referring to sports injuries are intended to be used only when sports equipment is involved, but, in practice, it is difficult to distinguish between injuries inherent to the sport and those related to the equipment used. In a more general sense, the mention of a product does not imply that the product caused the accident, but only that the product was associated with the accident. To define the cause of an accident requires a detailed investigation into its circumstances and environment, as well as the nature of the injury. Special investigations of this type are initiated whenever necessary to meet the requirements of the Product Safety Branch.

The tables and diagrams in this edition of the Report include the number of accidents by age group, those products or activities most frequently associated with accidents, and the most frequently occurring injuries by age group.

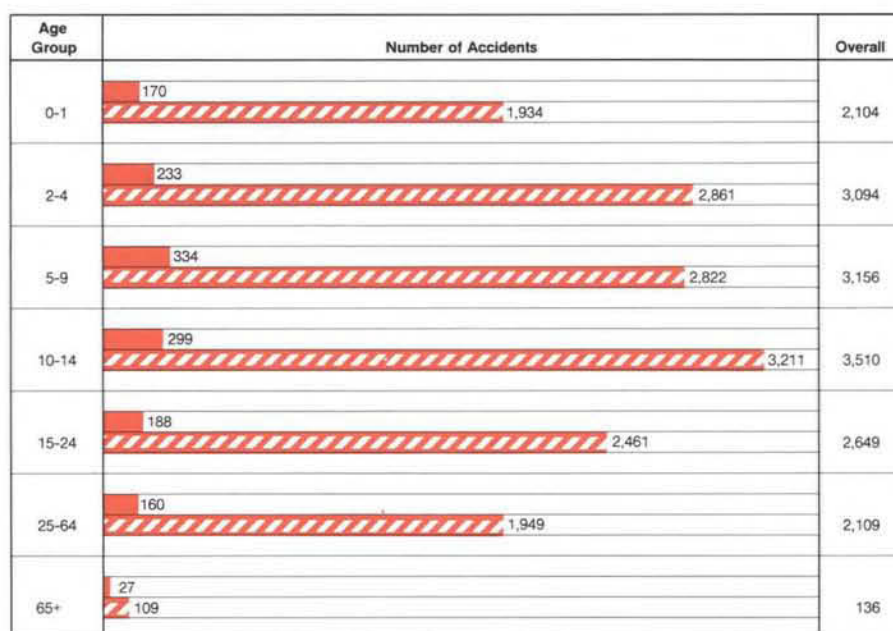
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CAIRE Highlights — Summer 1983

- Some changes were made to the NEISS coding in April 1983, which resulted in the elimination of the codes for foods, motor vehicles or parts, and glass parts or pieces, all three of which appeared in the top 20 products or activities in the summer of 1982. However, the codes for other associated products such as glass soft drink bottles have not been eliminated.
- Increases occurred in the number of accidents involving soccer, bicycles, slides, and stairs and steps. A decrease was reported in scalds from hot water.
- Bicycles were involved in 11.5 per cent of all the accidents reported; three out of every four bicycle accidents were to children in the 5-16 age group. Injuries included 39 skull fractures and 327 other fractures. There were also 578 open wounds, of which 298 were to the head, neck and face.
- Stairs and steps were associated with 8 per cent of accidents, and young children in the 0-4 age group were hurt in almost half of these. There were 31 skull fractures and 178 other fractures, 173 intracranial injuries, and 218 open wounds to the head, neck and face.
- Sports (excluding bicycling), when taken altogether, were mentioned in 19 per cent of all records collected. Of a total of 3,187 sports injuries, baseball (including softball and fast-ball) predominated, with 798 (25 per cent) of recorded injuries. In baseball, soccer and hockey, reports of 64 skull fractures, 51 intracranial injuries, 268 fractures other than to the skull, 154 open wounds to the head, and 12 concussions were received.
- Household furniture continues to be a cause of accidents and injuries. In particular, tables, beds and chairs accounted for 7 per cent of all accidents, and young children up to the age of 4 were involved in 72 per cent of these. More specifically, folding chairs were associated with the amputation of 8 fingers and 1 thumb in separate accidents.
- Playground apparatus accounted for a total of 934 reported injuries, which included 10 skull fractures, 65 intracranial injuries, 25 concussions, 219 fractures other than to the head, and 167 open wounds to the head.
- New to this publication is an overall summary of the most common injuries by age group (Table 2). Open wounds predominated, occurring 31 per cent of the time, with contusions and fractures occurring 14 and 13 per cent of the time respectively. While 88 per cent of all open wounds to the head, neck and face occurred to children in the 0-14 age group, it would appear that adults are more susceptible to open wounds of the upper limbs; 57 per cent of these injuries were to people in the 15-64 age group.

Figure 1
Number of Accidents
by Age Group
April — September 1983



Total number of accidents (N) = 16,758



Table 1
Top 20 Products or Activities
Involved in Accidents by Age Group
April 1983 — September 1983

Product/Activity**Age Groups**

	TOTAL		0-1		2-4		5-9		10-14		15-24		25-64		65+	
	Number (n)	% of N	Freq.	% of n	Freq.	% of n	Freq.	% of n	Freq.	% of n	Freq.	% of n	Freq.	% of n	Freq.	% of n
Bicycles and accessories	1,937	11.5	24	1	228	12	707	37	715	36	226	12	36	2	1	0.05
Stairs and steps	1,271	7.6	330	26	288	23	163	13	153	12	142	11	166	13	29	2
Baseball	798	4.8	4	1	23	3	137	17	291	36	193	24	150	19	—	—
Doors	604	3.6	89	15	164	27	140	23	95	16	71	12	40	7	5	1
Tables	454	2.7	163	36	170	37	53	12	22	5	23	5	23	5	—	—
Football	420	2.5	—	—	4	1	14	3	145	34	217	52	40	10	—	—
Knives	397	2.4	5	1	13	3	39	10	64	16	126	32	146	37	4	1
Beds	395	2.4	132	33	160	41	64	16	22	6	9	2	2	1	6	2
Soccer	374	2.3	—	—	—	—	51	14	199	53	98	26	25	7	1	0.5
Nails, screws, carpet tacks	364	2.2	11	3	46	12	68	19	105	29	105	29	26	7	3	1
Chairs	302	1.8	100	33	104	34	43	14	14	5	13	4	18	6	10	3
Swings and swing sets	292	1.8	16	5	103	35	121	41	44	15	7	3	1	0.5	—	—
Hockey	264	1.6	—	—	2	1	34	13	114	43	78	30	36	14	—	—
Monkey bars/climbing apparatus	247	1.5	10	4	41	17	149	60	45	18	1	0.5	1	0.5	—	—
Slides and/or sliding boards	241	1.5	15	6	103	43	94	39	24	10	3	1	2	1	—	—
Walls	227	1.4	32	14	51	22	45	20	48	22	26	11	22	10	3	1
Fences or fence posts	226	1.4	5	3	33	15	89	41	55	25	33	11	9	4	2	1
Swimming pools and related apparatus	210	1.3	5	2	27	13	62	30	81	39	26	12	9	4	—	—
Ball sports (not elsewhere classified)	200	1.2	1	1	2	1	25	13	92	46	37	19	43	22	—	—
Floors	175	1.1	44	25	57	33	32	18	22	13	11	6	9	5	—	—
TOTALS	9,398	56.0	986	10	1,619	17	2,130	23	2,350	25	1,445	15	804	9	64	1

Relative percentage by age group as compared to the total number of accidents (N):

TOTALS	9,398	56.0	986	6	1,619	10	2,130	13	2,350	14	1,445	9	804	5	64	5
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Total number of accidents (N) = 16,758

Table 2
Most Common Types of Injuries
by Age Group
April 1983 — September 1983

Injury Type	Number of Injuries							
	Age Groups							
	TOTAL	0-1	2-4	5-9	10-14	15-24	25-64	65+
Open wound of head and neck, including face and eyes	2,777	495	953	709	284	184	136	16
Contusion with intact skin surface	2,403	318	359	436	583	399	284	24
Open wound of upper limbs	1,606	73	132	203	250	413	508	27
Sprains and strains	1,430	22	66	122	457	476	275	12
Fracture of upper limbs	1,412	56	211	364	492	178	100	11
Intracranial injury, excluding skull fractures	1,159	357	275	270	188	50	16	3
Superficial injury	947	108	147	206	211	160	111	4
Open wound of lower limbs	842	25	84	203	218	171	136	5
Burns	502	165	62	45	43	81	106	—
Fracture of lower limbs	506	30	57	82	147	90	88	12
Poisonings	434	68	208	47	31	51	55	4
Effects of foreign body entering through orifice	379	93	143	56	17	30	40	—
Fracture of skull	240	48	37	53	55	21	25	1
TOTALS	14,637	1,858	2,734	2,796	2,976	2,304	1,850	119

Total number of accidents (N) = 16,758

Figure 2
Graph Displaying Three Most
Common Types of Injuries
by Age Group
April — September 1983

