

The BC Drug and Poison Information Centre: An essential clinical resource and public health partner

Poisonings have a significant impact on the health of people in BC. In 2022, there were more than 2000 poisoning deaths due to the toxic illicit drug supply alone.¹ All age groups are at risk of poisoning, but the types of poisonings change over the lifespan. Exploratory ingestion of household products or medications is most common in young children. For adolescents, poisoning due to experimental or impulsive use of alcohol, medications, and other substances is more common. Poisonings due to self-harm are a significant cause of injury in adolescents and younger adults. Among older adults, prescription and other medication errors become more common.

Poison control centres are a clinical service that provide expertise in the management of poisonings for the public and health care providers. Although there are limited Canadian data on their cost-effectiveness, a comprehensive review in the United States found that each \$1 spent on poison control centres saves over \$13 in other health care costs.² The BC Drug and Poison Information Centre (DPIC) is the regional poison control service for BC and Yukon, and it has been located at the BC Centre for Disease Control (BCCDC) since 2012. The DPIC is staffed by specialists in poison information who are nurses and pharmacists certified by the American Association of Poison Control Centers. The DPIC is

also supported by physicians specializing in emergency medicine and toxicology. There are multiple DPIC programs:

- A 24/7 consultation phone service for the public and health care professionals (604 682-5050 or 1 800 567-8911).
- A weekday drug information phone service for health care professionals to receive expert advice on the safe use of medications (604 707-2787 or 1 866 298-5909).
- The *Poison Management Manual* with detailed information to assist in managing acute poisonings from many medications, consumer products, and drugs (available at www.dpic.org).
- Public campaigns and educational material to advise the public on poison prevention (available at www.dpic.org).

The DPIC receives calls about a wide range of poisonings. While most of the outcomes are mild to moderate (over 60% are managed at home), the DPIC also helps emergency room physicians and intensivists manage severe cases. The DPIC's services are particularly valuable to rural and remote communities, where urgent care can be harder to access.³ The volume and complexity of poisoning cases managed by the DPIC have increased in recent years [Figure]. In part, this reflects the unregulated drug crisis in BC and resulting morbidity and mortality. Other factors driving

the increasing caseload include cannabis legalization, more cases of self-harm among young people, and the growing and aging population.

The DPIC is unique among the five Canadian poison control centres because it is embedded in the BC public health system by being physically and administratively located at the BCCDC. This provides meaningful opportunities for collaboration and cooperation between poison specialists and public health practitioners. For example,

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the BCCDC routinely monitors for calls related to specific substances that might pose an immediate public hazard needing urgent intervention, such as paralytic shellfish toxins.⁴ The close integration between the DPIC and the BCCDC also allows for rapid and effective responses to novel and high-risk toxins, such as aconitine in imported sand ginger.⁵ In these cases, the early notification and subsequent support by poison specialists were essential components of the public health response. We encourage all clinicians to consult the DPIC when managing cases of poisoning, promote awareness of the DPIC and the services it offers, and notify the DPIC of any unusual toxic exposures so that public health response can be initiated if needed. ■

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This article is the opinion of the BC Centre for Disease Control and has not been peer reviewed by the BCMJ Editorial Board.

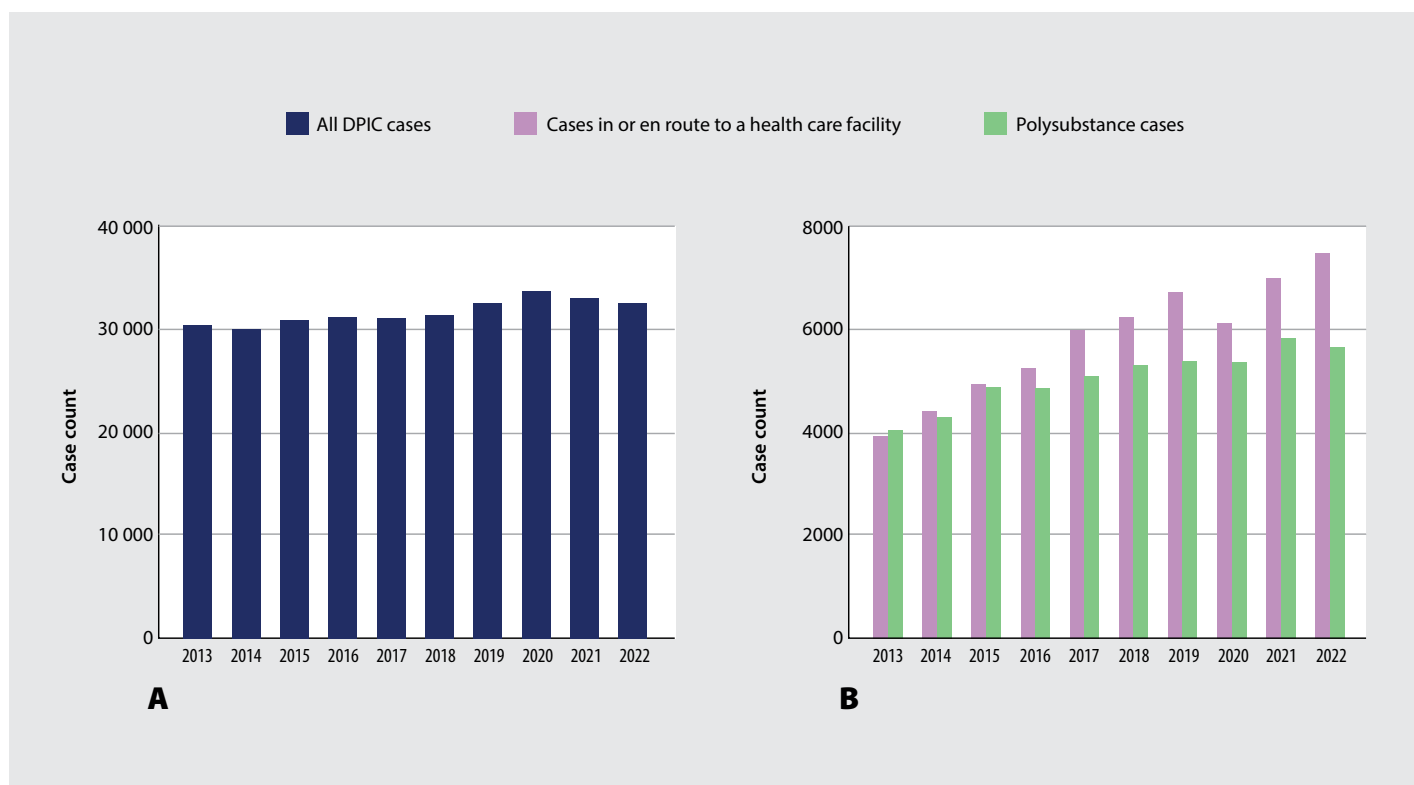


FIGURE. Annual volume (A) and characteristics (B) of cases managed by the BC Drug and Poison Information Centre (DPIC). Panel B shows the changing volume of more complex cases, including those reporting multiple exposures (green) and those requiring treatment in a health care facility (purple).

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