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## Battery Ingestion Injuries And Deaths On The Rise

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In the past few years there has been a significant increase in pediatric button battery ingestions resulting in serious complications. From 1985 to 2009, there was a 6.7-fold increase in the percentage of ingestions with severe outcomes, including 13 deaths. In addition, many devastating injuries have been reported such as exsanguination from esophageal perforation into the aorta, destruction of the wall of the esophagus and trachea, vocal cord paralysis and esophageal narrowing.

Children swallowing batteries lodged in the esophagus have required feeding or breathing tubes for months or years and multiple surgical repairs. Two new studies suggest that batteries must be removed from the esophagus within 2 hours to prevent these serious injuries. These studies further demonstrate that the increase in the severity of button battery ingestions by children is directly related to the widespread use of 20-mm-diameter lithium batteries as a power source for common household products.

The studies, "Preventing Battery Ingestions: An Analysis of 8,648 Cases" and "Emerging Battery Ingestion Hazard: Clinical Implications," in the June print issue of *Pediatrics* (published online May 24), determined that 61.8 percent of batteries

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swallowed by children younger than 6 years came directly from a product, 29.8 percent were loose, and 8.2 percent were obtained from battery packaging. The most hazardous battery ingested, the 20-mm lithium cell, was intended for use in remote controls in 37.3 percent of cases. Study authors suggest that all consumer electronics powered by 20-mm lithium cells should require a secure battery compartment accessible with a tool (screwdriver) or child-resistant lock to prevent further pediatric ingestions. Parents must be vigilant, too, to prevent these ingestions.

Source  
**American Academy of Pediatrics**

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