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The numbers speak

INVITERT KOMMENTAR

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Many of the figures informing our experience in the field of poisoning are the result of time-consuming manual counting.

What is happening on the poisoning front? What substances are leading to visits to emergency departments and A&E clinics right now?

These questions are often asked, but we are not normally able to provide as up-to-date information as you might think. We can of course extract aggregated diagnostic data from electronic patient records or health registries, which can provide valuable information about the incidence of poisonings in general (1). However, the diagnostic systems are imprecise in relation to identifying poisoning agents and are insufficiently detailed to provide good answers (2). The emergence of hundreds of new substances in the last couple of decades has not helped matters (3).

Thus, in order to obtain precise data, we often have to do manual counts in the patient record systems, which is time-consuming and meticulous work. In this edition of the Journal of the Norwegian Medical Association, Graabak et al. make an important contribution to this work (4). They counted poisoning incidents in 2019 and 2020 managed at a hospital in Trondheim, Norway's third largest city, providing us with the most up-to-date data on this subject. The authors found that the most common poisoning agents were ethanol, benzodiazepines and opioids. Poisoning with ethanol was most common among both men and women, while prescription drugs were more common among women, and men were more likely to use illegal substances. This is consistent

with earlier findings from comparable locations, such as Oslo in 2008–09 and Ghent in Belgium in 2017 (5–7). Although the findings of Graabak et al. may not be surprising, this consistency in itself is an important discovery. Opinions vary widely on the situation in the field of poisoning, but this study gives us something tangible: concrete numbers. This lends weight to our assertions, allowing us to speak with greater authority: until recently, the situation in this geographical area seemed as it did before.

> ***«Opinions vary widely on the situation in the field of poisoning, but this study gives us something tangible: concrete numbers»***

The European Drug Emergencies Network (Euro-DEN) was formed in 2013 to address the lack of precise data on acute recreational drug toxicity at the time (8, 9). A decade and close to 30 scientific publications later, data on acute recreational drug toxicity are now being recorded at 28 centres, serving as part of the source data for the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) (10). As in Trondheim, these figures are counted manually. Consequently, there can be a significant delay between the incident and the subsequent registration, analysis and publication. The many years of effort have resulted in a dataset that provides an overview that we did not have previously. Although the findings are no great surprise to anyone who has worked in the field for a long time, they advance us from assumptions to knowledge. Because we have numbers to inform our experience, we speak with greater authority. It has undoubtedly been worth the effort.

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