

Home-safety devices reduce childhood injuries

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(PhysOrg.com) -- Simon Fraser University researcher Bruce Lanphear says Canadian policymakers and health agencies should review the findings of the first study internationally to quantify the effectiveness of home safety devices to safeguard children.

The Faculty of Health Sciences professor of children's health was a co-investigator on A Randomized Controlled Trial of Home [Injury](#) Hazard Reduction, published in the *Archives of Pediatric and Adolescent Medicine* (April 2011).

The two-year study in Cincinnati, OH looked at how young children in more than 300 homes with safety devices fared compared to those in homes without the devices. They included stairway gates, cabinet locks, electrical outlet covers, safety storage for sharp objects such as knives and hot water heaters set below 48 degrees Celsius (120 F).

Along with Lanphear, five researchers at Cincinnati Children's Hospital Medical Centre, including the lead investigator Doctor Kieran J. Phelan, studied the impact of installing and maintaining the devices. Their efficacy was studied during the first two years of a baby's life.

The researchers found children in the equipped homes experienced 70 per cent fewer preventable injuries. The rate of all housing-related injuries dropped by 30 per cent.

“The results of this study are important because injuries are the leading

cause of morbidity, mortality and disability in Canada and other developed countries,” explains Lanphear.

“Injuries that occur in the home are the most common and preventable injuries. Cuts, bruises, burns, poisonings or falls are not usually severe or fatal, but falling down stairs or out of an open window can result in serious injuries or death. Ingestions, fires or poisonings occur frequently and can be serious or fatal.”

This is the first study of [home-safety](#) device efficacy to go so far as installing, maintaining and evaluating their injury reduction. Previous studies typically only provided families with educational literature.

More information: archpedi.ama-assn.org/cgi/content/abstract/165/4/346

Provided by Simon Fraser University

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