

# **Toxicological Information- und Data Network - A European Challenge?**

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Abstract for workshop on “Toxicological Information and Data-Network – an European Challenge?”

### **European dimension of Poison Centre Documentation**

#### **Alexander Campbell**

c/o National Poisons Information Service (London), Guy's & St Thomas' Hospital,  
Medical Toxicology Unit, Avonley Road, London, SE14 5ER, UK

Publication and exchange of toxicology information and case experience is vital for advancing our understanding of the mechanisms of poisons and their effects, and also improving the management of poisoning cases in hospitals throughout the world. This requirement has long been recognised by poisons centres. Indeed, in the written constitution of the European Association of Poisons Centres and Clinical Toxicologists (EAPCCT), the following two aims are stated:

- “facilitate the collection, exchange and dissemination of relevant information among individual members, poison centres and organisations interested in clinical toxicology”
- “promote training in, and set standards for the practice of, clinical toxicology and to encourage high standards in poisons centres and in the management of poisoned patients generally”
- “establish and maintain effective collaboration with governments, governmental organisations, professional bodies and other groups or individuals concerned with clinical toxicology, particularly those working in poisons centres in all countries in Europe”.

In many respects the scientific meetings and congresses of the various toxicological associations fulfil these objectives – particularly as regards sharing experience of cases of severe, fatal or unusual poisonings. They are less successful however, at facilitating exchange of other information occasionally deemed necessary for the management of cases – namely product data. With the increasing relaxation of boundary / border restrictions in regard to trade throughout Europe access to data on the composition of products that may “travel” is going to be more important. Industry is keen to capitalise on these new markets and it is important that poisons centres meet the challenges that this will bring.

There have been various attempts over the years to network poisons centres for this purpose, many funded with grants from the European Commission. Many of these projects “failed” because the information technology (IT) available at the time was not advanced or robust enough for many operational difficulties to be surmounted. IT has advanced enormously in the last decade to the extent that the once major hindrance of system compatibility is far less of an issue. The development of World Wide Web has demonstrated its worth in making information available to a wide audience. Poisons centres have not been slow to utilise this technology in many ways – they have developed interactive websites and databases for their users and staff as well as discussion groups for communication between themselves. Electronic exchange of product and case data, perhaps linked in some way, is an issue ready to be tackled and resolved collaboratively to minimise duplication of effort across Europe and to optimise our joint limited resources.

We should not forget some of the lessons of the past projects in addressing the issues of today. Data for storage and retrieval must be standardised or harmonised so that users have confidence in it and can reliably interpret it and compare it with their own experience. Industry will wish to be satisfied of commercial confidentiality as well. There is also the issue of content. A database with extremely comprehensive data for a few products is not going to be as useful as one with a more restricted content for many agents – but the balance needs to be correct and the appropriate data-set for products determined. This coverage needs to be appropriate for all participating centres across Europe and not specific to one region. Language, or adaptability of the system to meet local needs may therefore become important considerations.

Such a collaborative venture is evidently worthy and, in theory, practical. It would meet the objective of promoting “high standards” in poisons centres and poisoned patient management. But it is also potentially costly and funding would be an issue.

It is unproven whether lack of such a system has adversely affected outcome in poisoning cases in a demonstrable way. Therefore, whether such collaboration is necessary remains the question that must be answered.