

# American Academy of Pediatrics



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Testimony of

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On behalf of the

**American Academy of Pediatrics**

Testimony before the

**U.S. Senate Committee on Commerce, Science, and Transportation**

**Subcommittee on Consumer Protection, Product Safety, and Data Security**

**“Hidden Holiday Hazards: Product Safety During the Holiday Season”**

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Good Morning Chair Blumenthal, Ranking Member Blackburn, Chair Cantwell, Ranking Member Wicker, and distinguished members of the Subcommittee:

My name is Dr. Ben Hoffman. I'm here today on behalf of the American Academy of Pediatrics (AAP), a non-profit professional organization of 67,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety and well-being of infants, children, adolescents, and young adults. I currently serve as Chair of the AAP Council on Injury, Violence, and Poison Prevention Executive Committee, leading the Academy's work developing our evidence-based policy statements on issues related to product safety, our education of pediatricians and parents about injury risks, and our advocacy at every level of government for policies to keep children safe from injuries.

In addition to my role with the AAP, I am also a Professor of Pediatrics at Oregon Health and Science University and OHSU Doernbecher Children's Hospital. I also serve as the Vice-Chair for Community Health and Advocacy, as Director of the Oregon Center for Children and Youth with Special Health Care Needs, and as Medical Director of the Doernbecher Child Injury Prevention Program.

I would like to extend our gratitude to the Subcommittee for holding this critical hearing. Children's product safety is a vital child health priority, and I am grateful for the opportunity to testify today about holiday hazards.

The holiday season is a special time of year for children, and often comes with the thrill of new toys and the splendor of festive decorations. As a father myself, I have long treasured the joy of seeing my now grown children enjoying the holiday season. And as a pediatrician and expert on injury prevention, I also know that our annual celebrations can place children at risk, necessitating thoughtful policy to prevent injuries from toys, decorations, and other hazards around the home.

Pediatricians always counsel families on the best ways to stay safe, and the holidays are no different. The AAP's parent-facing website [healthychildren.org](https://www.healthychildren.org) has helpful tips for parents and caregivers on how to select and buy safe toys and how to decorate for the holidays in a way that enlivens a family's celebration while keeping everyone safe.

### **Pediatrician Recommendations for Holiday Safety**

Holiday decorations can help children feel connected to family traditions and be a fun family activity. To help make sure these decorations are safe the AAP offers parents and caregivers the following recommendations:

- When purchasing a live tree, check for freshness. The needles should be hard to pull off, and should not break when you bend them.
- If you have an artificial tree, make sure it's labeled "Fire Resistant."
- When setting up a tree at home, place it away from fireplaces, radiators or portable heaters. Place the tree out of the way of traffic and do not block doorways.

- Check all lights before hanging them on a tree or in your home, even if you have just purchased them. Make sure all the bulbs work and that there are no frayed wires, broken sockets or loose connections.
- Remove all wrapping papers, bags, paper, ribbons and bows from tree and fireplace areas after gifts are opened. These items can pose suffocation and choking hazards to a small child, or can cause a fire if near flame.

Every year, thousands of children are injured by toys. While most of these injuries are minor, toys that are hazardous can cause serious injury or even death. The CPSC reports that last year, there were nearly 150,000 toy-related, emergency department-treated injuries and nine deaths among children ages 14 and younger.<sup>i</sup> The AAP offers the following advice to help families and loved ones choose safe and appropriate toys for children:

- Read all warning labels. Warning labels give important information about how to use a toy and what ages the toy is considered safe for. However, every child is different, so parents should consider their unique circumstances. Be sure to show children how to use the toy the right way and provide appropriate supervision.
- Make sure all toys and parts are larger than your child's mouth to prevent choking.
- Follow age recommendations on toys, which offer guidelines on the safety of the toy and the ability of a child to play with and enjoy the toy.
- Be careful when buying crib toys. Soft objects, loose bedding, or any objects that could increase the risk of entrapment, suffocation, or strangulation should never be in a crib. Any hanging crib toy (mobiles, crib gyms) should be out of your baby's reach and must be removed when your baby first begins to push up on their hands and knees or when the baby is 5 months old, whichever occurs first. These toys can strangle a baby.
- Track recalls from the CPSC and remove any recalled toys immediately.
- Avoid counterfeit products by purchasing from stores and online retailers you know and trust.

While pediatricians offer these recommendations in our public education and clinical messaging, we also know that this can be a very busy and overwhelming time for parents, and our safety messages are not enough to protect children. Parents often assume that the toys and products they see on store shelves or online have been tested and proven to be safe for their kids, but this is sadly not the case. Product-related hazards cause far too many injuries and deaths that could be prevented through strong safety standards.

The U.S. Consumer Product Safety Commission and Congress have critical roles in protecting children from these risks. This Subcommittee has a tremendous opportunity to ensure the holiday season is safer for children, both through its oversight of CPSC to ensure its work is maximally protective of children, and through consideration and enactment of strong and child-protective bipartisan legislation that is currently before Congress.

## **Button Batteries**

Button batteries are ubiquitous and useful; powering many toys, tools, and consumer products that we all use on a daily basis. Children face potentially deadly ingestion hazards from button batteries when they come out of common household products, such as small remote controls, garage door openers, bathroom scales, cell phones, flameless candles, watches, cameras, and digital thermometers. These batteries can be tremendously dangerous if swallowed, as the contact with a child's airway or esophagus immediately causes the battery to immediately discharge electricity, resulting in burns which are an immediate, life-threatening emergency. I have seen children who suffered life altering burns to their esophagus, or food tube, after ingesting a button battery that was undetected by parents for less than an hour.

A recent report from the CPSC showed an alarming 93% increase in emergency-room treated injuries related to button batteries among children ages 5-9 from March through September 2020. Education alone cannot protect children from button battery ingestion; federal action is necessary. The AAP supports a mandatory safety standard that would require manufacturers to securely enclose all button cell batteries and to sell such batteries in child-resistant packaging. Manufacturers should also work in support of design changes that would eliminate this serious health hazard, even if batteries are ingested.

The AAP supports *Reese's Law*, which would protect children against the hazardous ingestion of button cell or coin batteries. This bipartisan bill would require the CPSC to promulgate a safety standard for consumer products containing button cell or coin battery compartments. This standard would require these products to secure the batteries in a manner that prevents children from accessing the hazardous batteries. The bill would also improve warning label requirements to communicate the hazard of ingestion and require button cell or coin batteries to be sold using child-resistant packaging. These measures would help prevent children from accessing button batteries in the first place, which would save lives.

## **High-Powered Magnet Sets**

Another ingestion hazard that we expect to effect children over the holidays comes from dangerous high-powered magnets that are marketed as toys. When two or more high-powered magnets are swallowed, their attractive force (flux) allows them to find each other, even if it is across or between different segments of the digestive system. For example, a magnet in the stomach will be pulled to a magnet in the small intestine, as it will to another in colon, or across loops of bowel. These magnet connections can lead to necrosis of the intestinal tissue, which can lead to intestinal injury, rupture, and even death.

Recognizing these serious risks, the CPSC took action to eliminate dangerous high-powered magnets from the marketplace. And these steps were initially successful; research shows that the CPSC and Health Canada efforts to ban high-powered magnet sets were working to protect children. Researchers studied the impact of Canada's recall by comparing data on magnet ingestion at Toronto's Hospital for Sick Children during the two years before the recall (2011 and 2012) and two years after the recall (2014 and 2015).<sup>ii</sup> In the initial two years,

there were 22 multiple magnet ingestions, six operations and nine endoscopic procedures. In the two years after the recall, there were five ingestions, one operation and four endoscopic procedures.

Unfortunately, the courts vacated the CPSC standard and recall in 2015, putting children at risk again from these dangerous products. And we have seen the problem return, both in the data and what we are seeing in the emergency room. New federal protections are urgently needed. During a 3 week period in 2019, we had 3 children admitted for magnet ingestions, and surgeons removed a total of 36 tiny magnets from their intestines. I personally met a 5-year-old boy who swallowed 5 magnets, and narrowly averted requiring a colostomy as the magnets found each other across multiple loops of bowel and cut off blood supply.

The AAP has endorsed the *Magnet Injury Prevention Act*, which would create strong safety standards again so that dangerous magnet sets are no longer on the marketplace. AAP also supports the CPSC's latest efforts to address this hazard through a recent mandatory recall and through a new proposed safety standard. Families need clear protections so that they don't have to worry that the well-intentioned toy in their child's stocking could pose a risk to them or a younger sibling.

### **Other Product Hazards**

In this season of giving, it is important for parents and policymakers to be aware of other products that can pose hazards for children. The AAP continues to call attention to the importance of safe sleep environments for infants and urges Congress and the CPSC to protect children from inclined infant sleep products, crib bumpers, and other sleep products that can lead to suffocation and other infant sleep-related deaths. The AAP thanks the Commerce Committee for advancing the bipartisan Safe Cribs Act (S. 1259), which would ban padded crib bumpers. We also strongly support the Safe Sleep Act, which would protect children from infant inclined sleep products like the now-recalled Fisher-Price Rock 'n Play Sleeper. Both of these policies passed the U.S. House in June, and we urge the Senate to pass them expeditiously. Enactment of these policies, and continued progress on CPSC's proposals to remove inclined sleepers and padded crib bumpers from the marketplace, would be a welcome improvement and ensure that any sleep-related gifts from well-meaning friends and relatives are safe.

Holiday gatherings and parties often mean children running around and exploring the house, including climbing on furniture. This highlights the risk of furniture tip-overs and the importance of passing the bipartisan STURDY Act, which would create a stronger safety standard to prevent furniture from tipping over on and crushing young children. We urge the full Committee to mark up and advance this bill.

### **CPSC Effectiveness**

In closing, I want to note that a strong and fully-functioning CPSC is critical to keep children safe over the holidays and throughout the year. Congress should ensure the agency has the funding, staff, and statutory authorities needed to carry out its mission. This includes the ability to transparently and proactively address risks to children before they lead to significant injuries and fatalities. The AAP supports the Sunshine in

Product Safety Act, which would repeal Section 6(b) of the Consumer Product Safety Act, an outdated provision creating unnecessary barriers to disclosing information about a consumer product that identifies a manufacturer. Section 6(b) delays the release of specific and critical safety information, putting children at risk of injury and death. For example, there could be a deadly hazard associated with a product being given as a gift this holiday season that the agency is not allowed to transparently warn consumers about. Strengthening CPSC's authorities and increasing its funding would help the agency better protect children and save lives.

### **Conclusion**

The AAP is grateful to the Subcommittee for its focus on children's product safety during this holiday season, and we look forward to continuing to work with you so that families can safely celebrate the holidays. Thank you for the opportunity to testify, and I look forward to your questions.

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<sup>i</sup> Qin A. Toy-Related Deaths and Injuries Calendar Year 2020. U.S. Consumer Product Safety Commission, 2021. Accessed at <https://www.cpsc.gov/s3fs-public/Toy-Related-Deaths-and-Injuries-2020.pdf>.

<sup>ii</sup> Rosenfield D, Strickland M, Hepburn CM. After the Recall: Reexamining Multiple Magnet Ingestion at a Large Pediatric Hospital. *J Pediatr*. 2017 Jul;186:78-81. doi: 10.1016/j.jpeds.2017.02.002. Epub 2017 Mar 10. PMID: 28291530.