

Nursery Products Report

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U.S. Consumer Product Safety Commission Toll-free Hotline: 1-800-638-2772 www.cpsc.gov

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Overview:

INJURIES

- Nursery product hospital emergency room-treated injuries to young children under age 5 decreased almost 20% from 1995 to 1999.
- This drop in injuries was associated primarily with baby walkers.
- Baby walker-related injuries to children under age 15 months dropped almost 60%, from an estimated 20,100 in 1995 to 8,800 in 1999. During those years, CPSC worked with industry to revise the voluntary safety standard for baby walkers, which resulted in safer baby walkers on the market. Also, stationary activity centers, an alternative product, came on the market.

DEATHS

- In recent years, an average of 87 children under age 5 died annually in incidents associated with nursery products.
- About 35 of these deaths each year were associated with cribs. This is a decrease from an estimated 150 to 200 annual deaths associated with cribs in the early 1970s.

NURSERY PRODUCT-RELATED INJURIES

- An estimated 65,400 children under age 5 were treated in U.S. hospital emergency rooms in 1999 for injuries associated with nursery products (*Figure 1*).
- This figure represents almost a 20% decline from the 1995 estimate of 80,500 injuries (*Figure 2*).
- This decrease in nursery product-related injuries was associated primarily with baby walkers. Baby walker-related injuries of children under age 15 months dropped from 20,100 in 1995 to 8,800 injuries in 1999, or almost 60% (*Figure 3*).

FIGURE 1: NURSERY PRODUCT-RELATED INJURIES AND DEATHS TO CHILDREN UNDER AGE FIVE BY PRODUCT

PRODUCT CATEGORY	ESTIMATED INJURIES ¹ CY 1999	TOTAL DEATHS 1995-1997
TOTAL	65,400	261
Infant Carriers and Car Seats (Excludes Motor Vehicle Incidents)	12,820	18
Strollers and Carriages	12,600	12
Cribs	10,240	106
Baby Walkers and Jumpers	9,340	8
High Chairs	6,660	5
Changing Tables	2,120	1
Baby Gates and Barriers	1,470	0
Play Yards	1,470	42
Other	8,680	69

Source: National Electronic Injury Surveillance System (NEISS) for the CY 1999 injury estimates; and In-depth Investigation File, Injury and Potential Injury Incident File, Death Certificate File and NEISS for 1995 to 1997 for reported deaths, U.S. Consumer Product Safety Commission

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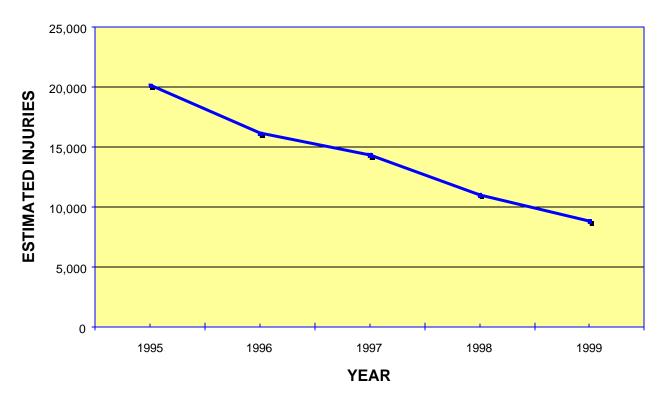
¹ Car seat injuries associated with motor vehicle incidents have been deleted from the infant carriers and car seats estimate.

FIGURE 2: ESTIMATED INJURIES TO CHILDREN UNDER AGE 5
ASSOCIATED WITH NURSERY PRODUCTS
CY 1995-1999

Calendar Year	Estimated Injuries
1995	80,500
1996	72,500
1997	71,400
1998	71,000
1999	65,400

Source: National Electronic Injury Surveillance System (NEISS)
U.S. Consumer Product Safety Commission

FIGURE 3: BABY WALKER INJURIES TO CHILDREN < 15 MONTHS (1995-1999)

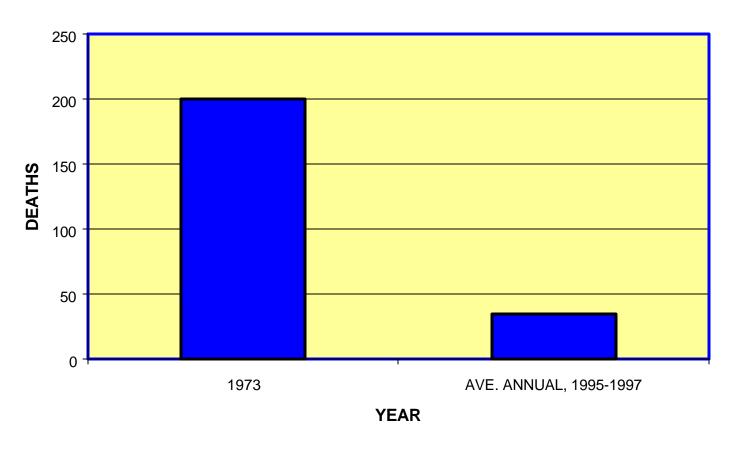


Source: National Electronic Injury Surveillance System (NEISS)
U.S. Consumer Product Safety Commission

NURSERY PRODUCT-RELATED DEATHS

- CPSC staff has reports of 261 deaths (or an annual average of 87 deaths) associated with nursery products during 1995 to 1997. About 41% (106) of the deaths reported involved cribs.
- In pre-crib standard years (early 1970s), an estimated 150 to 200 babies died annually from injuries associated with cribs. The average annual reported deaths have decreased over the years to about 35 (*Figure 4*).
- Play yards (playpens) had the second highest number of deaths reported, with 42 total from 1995 to 1997 or 14 average deaths annually.

FIGURE 4: CRIB-RELATED DEATHS TO CHILDREN (PRE-STANDARD VS CURRENT YEARS)



Source: 1973: Federal Register (vol.38, no.71); 1995-1997: In-depth Investigation File, Injury and Potential Injury Incident File, Death Certificate File and NEISS for 1995 to 1997 for reported deaths, U.S. Consumer Product Safety Commission

SUMMARY OF HAZARD SCENARIOS AND STANDARDS ACTIVITES TO ADDRESS NURSERY PRODUCT-RELATED INJURIES AND DEATHS

• <u>Baby Walkers</u>

Injury Scenarios: Primarily falls down stairs in baby walkers.

Death Scenarios: Primarily falls down stairs in baby walkers.

Standards Activities: CPSC staff worked closely with ASTM² to revise the industry voluntary standard for walkers to include requirements to address falls down stairs. The revised standard was completed in 1997. Walkers that meet the new stair-fall requirements must:

- 1. have special features that stop the walker at the top step, or
- 2. be wider than a 36-inch opening, the size of most doorways.

New walkers are now available in stores throughout the country. The new walkers are labeled with wording similar to "Meets New Safety Standards," so consumers can identify them.

• Cribs

Injury Scenarios: Primarily falls from cribs.

Death Scenarios: Often entrapment and suffocation due to loose, missing or improperly installed mattress support hardware or improperly spaced, loose or missing slats.

Standards Activities: In 1973 and 1976, CPSC published mandatory safety standards for full-size and non-full-size cribs, respectively, to address side height, slat spacing, mattress fit, and other factors. These standards were amended in 1982 to prohibit hazardous cutouts in crib end panels. CPSC also worked with ASTM on industry voluntary safety standards for cribs, including requirements to address entanglement on cornerposts, and most recently in 1999 to address the integrity of crib slats.

² An organization that coordinates the development of voluntary national consensus standards

• Infant Carriers and Car Seats

Injury Scenarios: Primarily falls from carriers/car seats due to handle/latch failures of the product or victim falling off furniture (such as a table or kitchen counter) either from or in the infant carrier.

Death Scenarios: Often a car seat overturning or falling off a bed or sofa.

Standards Activities: At the request of CPSC staff, ASTM recently completed, in July 2000, a voluntary standard with requirements to prevent handle latch failures.

• Strollers and Carriages

Injury Scenarios: Primarily falls from strollers or carriages.

Death Scenarios: Primarily entanglements, entrapments and wedging incidents involving various components of the stroller structure (leg openings, for example).

Standards Activities: CPSC staff worked with ASTM to revise the stroller standard, completed in 1995, to include requirements for entrapments and possible strangulation through the leg holes.

• Play Yards (Playpens)

Injury Scenarios: Primarily falls from the play yard and injuries incurred while trying to climb out of the play yard.

Death Scenarios: Primarily entrapments and wedging incidents involving the mattress and side of the play yard, as well as neck entrapments in the collapsed top rail.

Standards Activities: At the request of CPSC staff, ASTM revised the industry voluntary standard, completed in 1997, to require top rails that automatically lock when lifted into the normal use position. In 1999, latch strength requirements were added for top rail durability and requirements to address protrusions will be added soon.

• Changing Tables

Injury Scenarios: Primarily falls from the changing table.

Death Scenarios: Primarily entrapment involving the structure of the changing table.

Standards Activities: At the request of CPSC staff, ASTM began developing a safety standard for residential baby changing tables in March 2000; the standard will address structural integrity, side barriers, entrapment, and warnings.

• High Chairs

Injury Scenarios: Primarily falls from the high chair.

Death Scenarios: Primarily entrapments and hangings when the child slid down in the seat and got caught in the restraint system or on the tray.

Standards Activities: At the request of CPSC staff, requirements were added to the high chair voluntary standard for a passive crotch restraint in 1999. This will prevent children from slipping down and getting their necks caught on the tray and strangling. These new high chairs are now being sold in stores throughout the country. Consumers should look for a high chair with a post between the child's legs to prevent the child from slipping down and becoming trapped under the tray.

• Baby Gates and Barriers

Injury Scenarios: Primarily failure of the baby gate that caused the child to be injured (falling down stairs, for example).

Standards Activities: In the 1980s, CPSC staff worked with ASTM to develop the voluntary safety standard for safety gates to address strangulation in baby gates. Currently, CPSC staff is working with ASTM to develop requirements to prevent gate push-out.