

Around 20 children present to Australian hospitals each week with suspected button battery ingestion.

Oesophageal perforation can occur in less than 2 hours with the poorest prognosis associated with oesophageal lodgement and erosion into a major vessel.

Button batteries are found in common household items e.g. watches, toys, novelties, remote controls, car keyless fobs, hearing aids, musical greeting cards, thermometers.

Symptoms caused by swallowing or inserting button batteries are often **non-specific** and can **mimic** common conditions when they become lodged in the GI tract, nose or ears.

Extra vigilance is urged in children under 6 years especially pre-verbal toddlers under 3 years.

Potential battery exposure should be considered in patients with:

- Persistent or atypical croup
   a lodged battery can cause laryngeal oedema that mimics croup
- Chest pain
- Unexplained food refusal
- Unexplained GI bleeding
   melaena/haematemesis can precede
   aortic perforation
- Epistaxis
  oesophageal bleeding may exit via

- Regurgitation or drooling
- Vomiting without fever or diarrhoea

child may still vomit with battery lodged in oesophagus

- Fever
  - a late sign that may indicate oesophageal perforation
- Unexplained nasal/ear or vaginal/ rectal bleeding or discharge caused by insertion

## URGENT ACTION IS NEEDED

If you suspect a button battery ingestion or insertion immediately:

 call the POISONS INFORMATION CENTRE on 13 11 26 fast expert advice.

## **REMEMBER:**

POOR OUTCOMES ARE ASSOCIATED WITH DELAYED DIAGNOSIS – X-rays looking for button batteries must be processed urgently.







