



President's Corner

Donna Seger, MD

This edition of AACTion will address two major issues—changes regarding the Journal of Toxicology/Clinical Toxicology and AACT committee work.

Journal of Toxicology—Clinical Toxicology

First, the *Journal*. Michael McGuigan is the “new” Editor-in-Chief of the *Journal*. In this issue of AACTion, he discusses the direction he plans to take the *Journal*. The structure of the Editorial Board is also reviewed.

The Editorial Board is composed of two Deputy Editors, nine Senior Editorial Board members, and 30 regular Editorial Board members.

Deputy Editors—One is appointed by AACT and one is appointed by EAPCCT. The Deputy Editors assist the editor in making decisions when reviewers disagree or other controversies occur. Journal policy is set by the Editor-in-Chief in consultation with the Deputy Editors as representatives of the two sponsoring organizations.

Senior Editorial Board (SEB) Members—The AACT, EAPCCT, and the Editor-in-Chief each appoint three members to the Senior Editorial Board. One SEB member reviews most papers following review by two Editorial Board members. Occasionally, a SEB member reviews a paper as a primary reviewer.

Editorial Board Members—The AACT, EAPCCT, and the Editor-in-Chief each appoint ten members to the Editorial Board. These people are used as primary reviewers and advise the Editor-in-Chief, Deputy Editors, and the Senior Editorial Board.

Michael's Comments Follow:

The *Journal of Toxicology—Clinical Toxicology* is the official journal of the American Academy of Clinical Toxicology and the European Association of Poisons Centres and Clinical Toxicologists. As such, it is important for the membership of these organizations to be aware of recent changes in and new directions for the *Journal*.

The Editorial Board

The year 2002 saw significant changes in the Editorial Board of the *Journal*. This past summer, I replaced Carol Angle as Editor-in-Chief of the *Journal*. The transition period was challenging but we are back on schedule and moving ahead. I would

like to offer my thanks to the authors, reviewers, editorial board members, and Dekker office staff support, for their understanding and help during this period.

Other editorial board changes include the appointment of Alan Woolf to the position of Deputy Editor and Robert Hoffman to the Senior Editorial Board. Marsha Ford will join the group of AACT-appointed editors. Each brings to his position valuable skills and insights into the broad field of clinical toxicology.

There has been a new development in the editorial board. The *Journal* receives a large number of submissions from authors who do not speak (write) English as a first language. Re-writing these manuscripts to correct the grammar, spelling, and organization is a major task. This year we are fortunate to have “recruited” several experienced and respected clinical toxicologists (Nancy Matyunas, Barry Rumack, Mark Thoman) who are willing to do this important work. By supporting authors from developing countries in this way, we hope to tap into the fascinating (and, at time, highly unusual) clinical toxicology in their areas, promote their expertise and experience, and encourage their participation and interest in the *Journal*.

The Journal in 2002

The year 2002 was a good year for the *Journal*, thanks to the many authors who submitted excellent manuscripts. The term “manuscript” means any submission for publication, including articles, letters, case reports. The *Journal* received a total of 166 manuscripts, of which 115 (69%) have been published in the 2002 volume (additional manuscripts are still under consideration for publication). As could be expected, the majority of published manuscripts came from North America and Europe. Emergency medicine and poison centers accounted for the majority of published manuscripts.



Dr. Seger

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Publication Facts

There are seven issues of the *Journal* per volume. Two issues are largely taken up by abstracts from the International Congress of the European Association of Poisons Centres and Clinical Toxicologists and from the North American Congress of Clinical Toxicology. The other five issues rely on submitted manuscripts. Each issue is 90 to 120 typeset pages and there are about 2.5 double-spaced manuscript pages per typeset page.

The publication process takes just under 3 months from the time the finalized manuscripts are submitted by the Editor-in-Chief to the time the issue is released to the printer.

New Directions

The *Journal of Toxicology—Clinical Toxicology* is the premiere medical journal about the effects of toxins on humans. As such, the *Journal* is a vehicle for disseminating knowledge and information to healthcare professionals.

It also can be a teaching tool. In the near future, the *Journal* will publish guidelines to help authors write case reports, case series, and case cohort studies. In addition, the *Journal* will be developing guidelines to assist new reviewers in performing and writing manuscript reviews.

The *Journal* encourages the submission of case reports. Potential authors of these manuscripts need to decide what is the potential role of their paper. Five roles have been proposed by Vandembroucke (Ann Intern Med 2001;134:330-4): Recognition and description of new diseases; Detection of drug side effects, adverse or beneficial; Study of mechanisms of disease; Medical education and

audit; Recognition of rare manifestations of disease. Each of these has elements which are important for the report.

New sections are being added to the existing ones of Articles, Reviews, Case Reports, and Letters. A section tentatively titled “History” will include articles focusing on historical aspects of clinical toxicology. Many of these manuscripts will be based on presentations at the Toxicology Historical Society sessions. Manuscripts submitted for publication will undergo an appropriate rigorous review process. A section tentatively titled “Poison Information & Communication” is being considered to encourage submissions of scientific manuscripts from investigators interested in the transmission of information and understanding from one person to another. It is hoped that this section will attract manuscripts from Specialists in Poison Information and others interested in information communication. As always, manuscripts submitted for publication will undergo an appropriate rigorous review process.

The Future

The *Journal* is considering a change in the cover. The Senior Editorial Board currently is reviewing design possibilities. Marcel Dekker Inc., is working on a web-based manuscript submission and review mechanism.

As Editor-in-Chief, I am very interested in comments, criticisms, praise, and suggestions for improving the *Journal*. Please feel free to contact me at any time with any concerns or ideas. My e-mail address is mmcguigan@winthrop.org and my office telephone number is (516) 663-2591.

Committees

Committees are the backbone of an organization. Committee Chairs are presidential appointments and may change when a president’s term ends. Committees have a purpose. In this issue of the newsletter, each of the Committee Chairs outlines their goals and objectives for their term. Interest Groups were formed to accommodate academy members who simply wanted to meet every year at the Annual Meeting. They do not have outlined goals and objectives. Interest groups may undertake projects, e.g., the Pediatric Interest Group is organizing part of the AACT pre-meeting Symposium. If you would like to be on a Committee or be part of an Interest Group, please let me know.

Multicenter Clinical Toxicology Research Committee

Chair, Dan Cobaugh, PharmD, DABAT

Consistent with its mission to advance research into diseases involving chemicals, drugs and other toxins, AACT provides several opportunities for clinical toxicologists to enhance their research programs. A Multicenter Clinical Toxicology Research Group exists to promote coordinated investigations in multiple sites. There are also several funding opportunities available through AACT including the Lampe-Kunkel Memorial Award for studies involving natural products, the Texaco award, a \$25,000 multi-center research grant, and the Micromedex International Travel Scholarship. The success of these programs is dependent on the participation of AACT members. Consider volunteering to become a member of the Research Awards Committee or joining the Multicenter Clinical Toxicology Research Group. If you are interested in learning more about committee membership or the available awards, please contact Daniel J. Cobaugh, Pharm.D, DABAT at (202) 544-1570 or at danielcobaugh@hotmail.com.

American Board of Applied Toxicology (ABAT)

President, Peter Chyka, PharmD, DABAT

ABAT is currently working on the following items:

1. Review of the credentials of applicants to sit for the ABAT exam
2. Preparation of the exam to be offered in September 2003
3. Developing the ABAT symposium for the NACCT Congress, September 2003, entitled “Withdrawal: Bridging the Gap Between Science and Practice”
4. Review of ABAT bylaws to be consistent with those of AACT
5. Ongoing ABAT member activities such as an electronic newsletter, nominations/elections activities, and membership lists
6. Participation in the Institute of Medicine Committee on Poison Prevention and Control as a member of the Stakeholders Liaison Group.

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7. Development of an updated membership brochure for use in membership recruitment.
8. Participation in the Specialists in Poison Information (SPI) Round Table at the NACCT Congress, September 2003, to discuss ABAT opportunities.

Abstracts Committee

Chair, **Richard (Rick) F. Clark, MD**

The goals for the abstract committee are to work on the possibility of including already presented abstracts in some forum at the meeting, and to generally encourage more abstracts be submitted. The committee would also like to revise the review panel.

Technology Committee

Chair, **Lewis Nelson, MD**

The technology committee is working with the webmasters to update and improve the AACT website (www.clintox.org). This includes improving the accessibility of Current Awareness by converting it to a searchable database, increasing the available content (such as position statements) and adding relevant links (such as to toxicology meetings). The Committee is also assisting EAPCCT to develop a web-based abstract submission system similar to that used for NACCT.

Publications Committee

Chair, **Elizabeth Scharman, PharmD, DABAT, BCPS**

The AACT Newsletter is being sent to all AACT members via e-mail. Hard copy issues are no longer being produced.

The goal for 2003 onward is for four (4) issues per year:

- Jan-Feb-March issue
- Apr-May-June issue
- July-Aug-Sept issue
- Oct-Nov-Dec issue

Articles will be due no later than the 1st Friday of March, June, September, and December respectively with the newsletters being e-mailed out on or before the 4th Friday of March, June, September, and December.

Membership Committee

Chair, **Jerry Leikin, DO**

Trends in membership over the past 4.5 years show a 10% increase in membership over this time period. Our active member roster (non-ACMT/ACMT/ABAT) increased by 13% over this same time period. Student membership dropped by 50%.

Our AACT Poison Group Membership survey results are in with a total of 24 responses out of a total of 68 surveys sent by e-mail to managing staff of Poison Centers (35% response rate).

Responses:

FTEs employed

6-10 (n = 7), 11-15 (n = 14), 16-20 (n = 2), over 20 (n = 1)

Would AACT membership be of any value to your PIP/SPI/CSPI?

15-yes; 9-no

Does your budget allow for any professional society benefits for your staff?

4-yes; 20-no

Would the concept of a Poison Center Employee's membership with an associated significant discount (ranging from 20% to 40%) be of any interest to your organization?

17-yes; 5-no; 2-maybe

How many FTEs would take advantage of such a membership category?

1-5 (n = 16), 6-10 (n = 3), 11-15 (n = 1)

The benefit selected by over half of the respondents of being of most value was a *J Toxicol Clin Toxicol* subscription; meeting discounts was a close second.

Interpretation: Most Poison Center's staff believe AACT membership has some value and while most budgets do not allow for such benefits, a percentage (estimated 30 to 50% of FTEs) would take advantage of "such a deal." This could translate into dozens of new members in a category pool which is currently under-represented. Please contact me if there are any

Summary

A survey of poison center management supports the concept of a group poison center membership category with an associated group discount. AACT members should direct their comments to: Jerry Leikin; E-mail: jleikin@enh.org; phone (847) 657-1700; fax (847) 657-1715).

Interest Groups

Envenomations Special Interest Group

Chair, **Daniel E. Keyler, PharmD**

The AACT Envenomations SIG is interested in all medical toxicology aspects of envenomation, but will continue its efforts over the next two years by focusing on five important areas currently in varying stages of progress.

A frontline endeavor will be to work towards formal approval of a standardized guidelines document for use by institutions housing indigenous and/or exotic venomous animals, with the desired goal of minimizing the possibility of human envenomation. Committee member Steven Seifert has spearheaded the drafting of the document. This is a collaborative effort in conjunction with AACT, ACMT, and AZAA (American Zoo and Aquariums Association). The guidelines are to be included in the Antivenom Index. A related second SIG goal pertains to the problem zoos and aquariums face concerning exotic antivenoms and their disposition upon expiration. This complex but growing issue raises multiple medical/legal concerns. The SIG will work in concert with Tom Martin who is corresponding with FDA and USDA offices to determine viable solutions for the maintaining and potential of outdated exotic antivenoms. The current restrictions with snake antivenoms have also prompted SIG members to investigate issues associated with scorpion envenomation, limited supplies of scorpion antivenom in the USA, and the regulatory issues posed for using a foreign scorpion antivenom in this country.

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Jude McNally and Leslie Boyer, with the support of the SIG, will continue their active pursuit of possible resolutions to these problems.

Aside from antivenom issues, a review of the role of surgical treatment for compartment syndrome resulting from Crotalinae envenomation will be a key item for continuation on the SIG's future agenda. Patti Rosen initiated the SIG's effort concerning this issue. Howard McKinney is actively working on a more comprehensive review of the related literature. Collectively, the Committee will review the information, and depending on the final assessment, recommend an AACT-Envenomations SIG-directed, multi-centered study.

A final agenda item will involve investigation into the apparent growing number of spider envenomations in certain regions of the country. In particular, brown recluse spider bites, and what are appropriate medical management options for patients. Although this is an ambitious agenda the reality that toxicologists are still confronted with the medical challenges presented by spiders, snakes and scorpions in the 21st century serves as the committee's driving force for pursuing these goals over the next two years.

Medico-legal Toxicology Interest Group (formerly called Forensic Tox Interest Group) Chair, Cynthia L. Morris-Kukoski, PharmD, DABAT

Goals and objective for the next 2 years:

Goals

Our group is interested in educating toxicologists and its members in a variety of aspects pertaining to the practice of forensic (medico-legal) toxicology.

Objectives

1. Develop a strong medico-legal contact group (currently 84 members participating) sharing backgrounds and contacts in order to fully utilize our expertise

Consider Committee involvement. Committee work is a good way to learn about the workings of AACT and may be a step to Board membership.

AACTion is a tool of communication and information. If there are topics you would like to see addressed, please contact Elizabeth Scharman (escharman@hsc.wvu.edu) or myself (Donna.Seger@Vanderbilt.edu).

2. Provide medico-legal continuing education credits (multitude of topics):
 - a. Continuation of last years "electronic discovery and record retention" topic
 - b. Litigation legislation
 - c. Medical malpractice (product liability, causation ADR's)
 - d. Forensic toxicokinetics and pharmacokinetics
 - e. Tox Informatics/legal issues
 - f. Drug testing: alternative matrixes
3. Quarterly dissemination of legal publication abstracts pertaining to group's interests

Pediatric Interest Group Chair, Gary Wasserman, DO

Goals

The Goal of the Peds Interest Group is to exist as a forum for those members who have interests in pediatric poisonings (not limited to any particular childhood/ adolescent age group).

Objectives

1. Meet at designated date/time annually at the NACCT meeting as determined by the Planning Committee.
2. Open forum at each meeting to discuss whatever topics/concerns are mentioned by those members present.
3. Organize & present a 4 hour Pediatric Symposium as an AACT sponsored Pre-meeting symposium of the 2003 NACCT.
4. Between meetings, correspondence is mainly via e-mail.

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