2025

MA & RI POISON CENTER

Serving Massachusetts & Rhode Island

2025 Q4 Report:

Massachusetts

Quarter Four Report: October 1, 2025 - December 31, 2025 *(MASSACHUSETTS)*

Purpose

The purpose of this report is to describe the cases that Massachusetts & Rhode Island Poison Center (MARI PC) received for the state of Massachusetts in the year 2025. Quarters are broken into three-month periods. Details are below. *This specific report focuses on Quarter Four (Q4).*

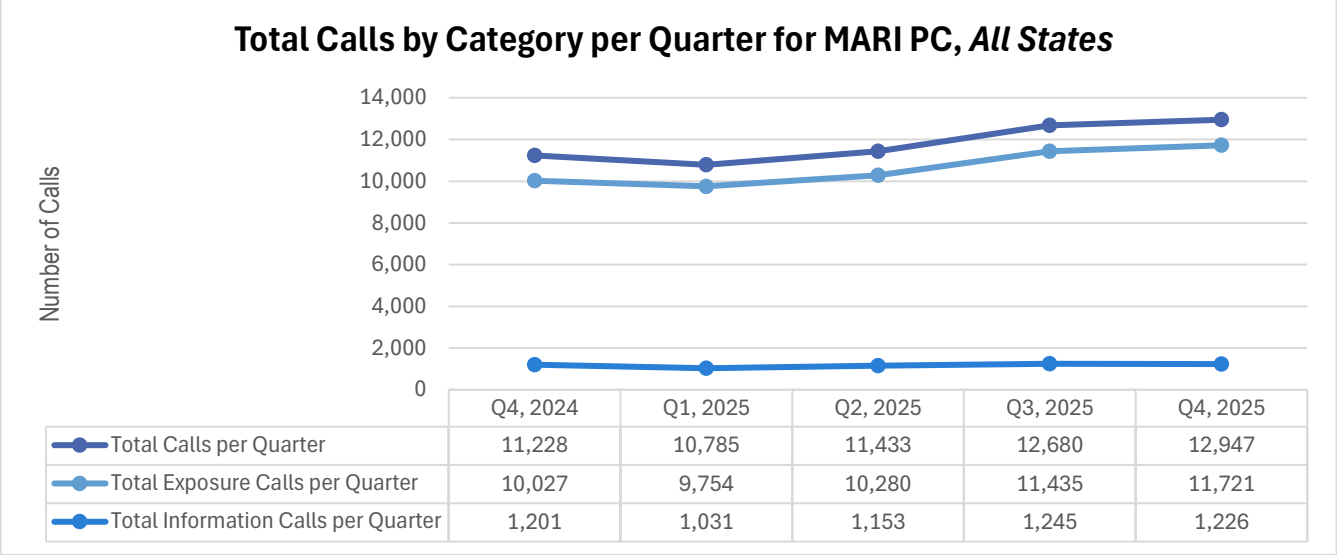
Quarter	Dates
Q1	January 1 – March 31, 2025
Q2	April 1 – June 30, 2025
Q3	July 1 – September 30, 2025
Q4	October 1 – December 31, 2025

Call Volume for MARI PC

All Calls (MA, RI, Other States)

For Q4 2025, the MA & RI Poison Center managed a total of 12,947 incoming calls for Massachusetts, Rhode Island, and other states, a 15.3% increase compared to Q4 2024. Of those calls, 11,721 were for exposures and 1,226 were for information. The breakdown of calls per quarter can be found below.

In total, in 2025, the MA & RI Poison center managed a total of 47,845 incoming calls for all states, with 43,190 exposure calls and 4,655 information calls.

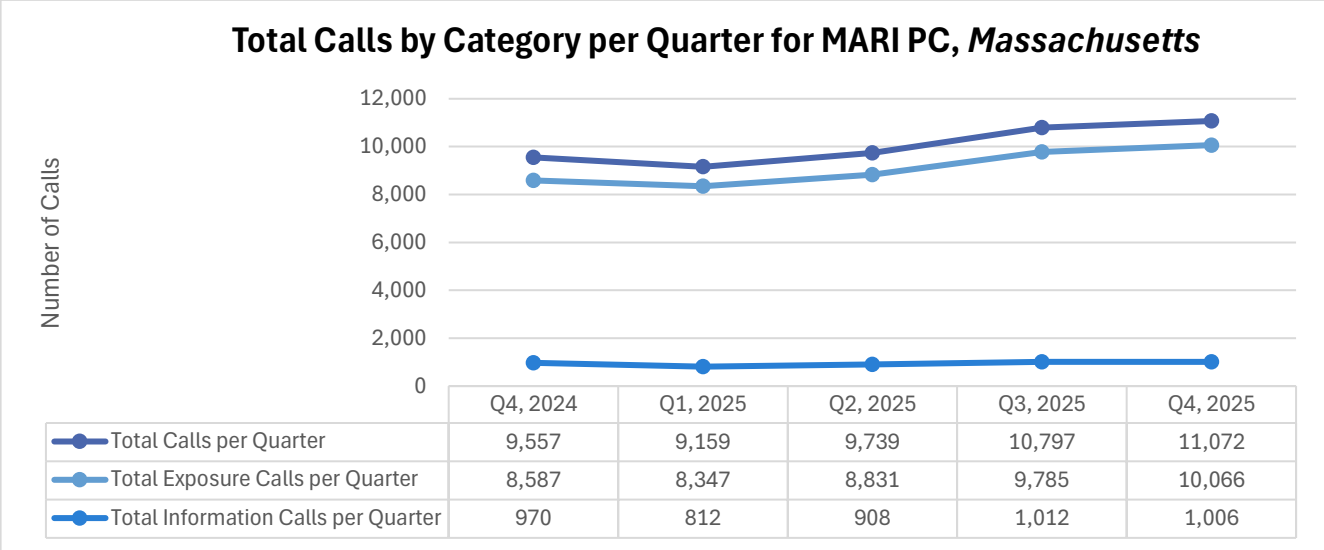


	Q4, 2024	Q1, 2025	Q2, 2025	Q3, 2025	Q4, 2025
Total Calls per Quarter	11,228	10,785	11,433	12,680	12,947
Total Exposure Calls per Quarter	10,027	9,754	10,280	11,435	11,721
Total Information Calls per Quarter	1,201	1,031	1,153	1,245	1,226

MA Specific Calls

For Q4 2025, the MA & RI Poison Center managed a total of 11,072 incoming calls for Massachusetts alone, a 15.9% increase compared to Q4 2024. Of those calls, 10,066 were for exposures and 1,006 were for information. Information calls consisted of calls with questions about drug information, prevention/safety/education, and other poison information. The breakdown of calls per quarter can be found below.

In total, in 2025, the MA & RI Poison center managed a total of 40,767 incoming calls for just Massachusetts, with 37,029 exposure calls and 3,738 information calls.

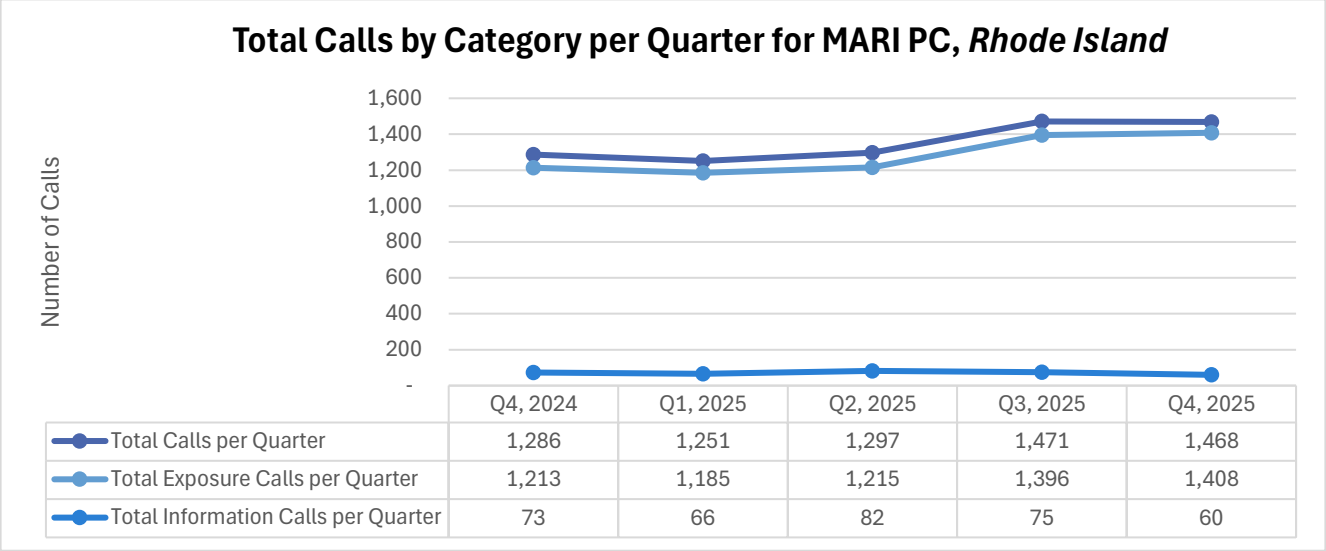


	Q4, 2024	Q1, 2025	Q2, 2025	Q3, 2025	Q4, 2025
Total Calls per Quarter	9,557	9,159	9,739	10,797	11,072
Total Exposure Calls per Quarter	8,587	8,347	8,831	9,785	10,066
Total Information Calls per Quarter	970	812	908	1,012	1,006

RI Specific Calls

For Q4 2025, the MA & RI Poison Center managed a total of 1,468 incoming calls for Rhode Island alone, a 14.2% increase compared to Q4 2024. Of those calls, 1,408 were for exposures and 60 were for information. The breakdown of calls per quarter can be found below.

In total, in 2025, the MA & RI Poison center managed a total of 5,487 incoming calls for just Rhode Island, with 5,204 exposure calls and 283 information calls.



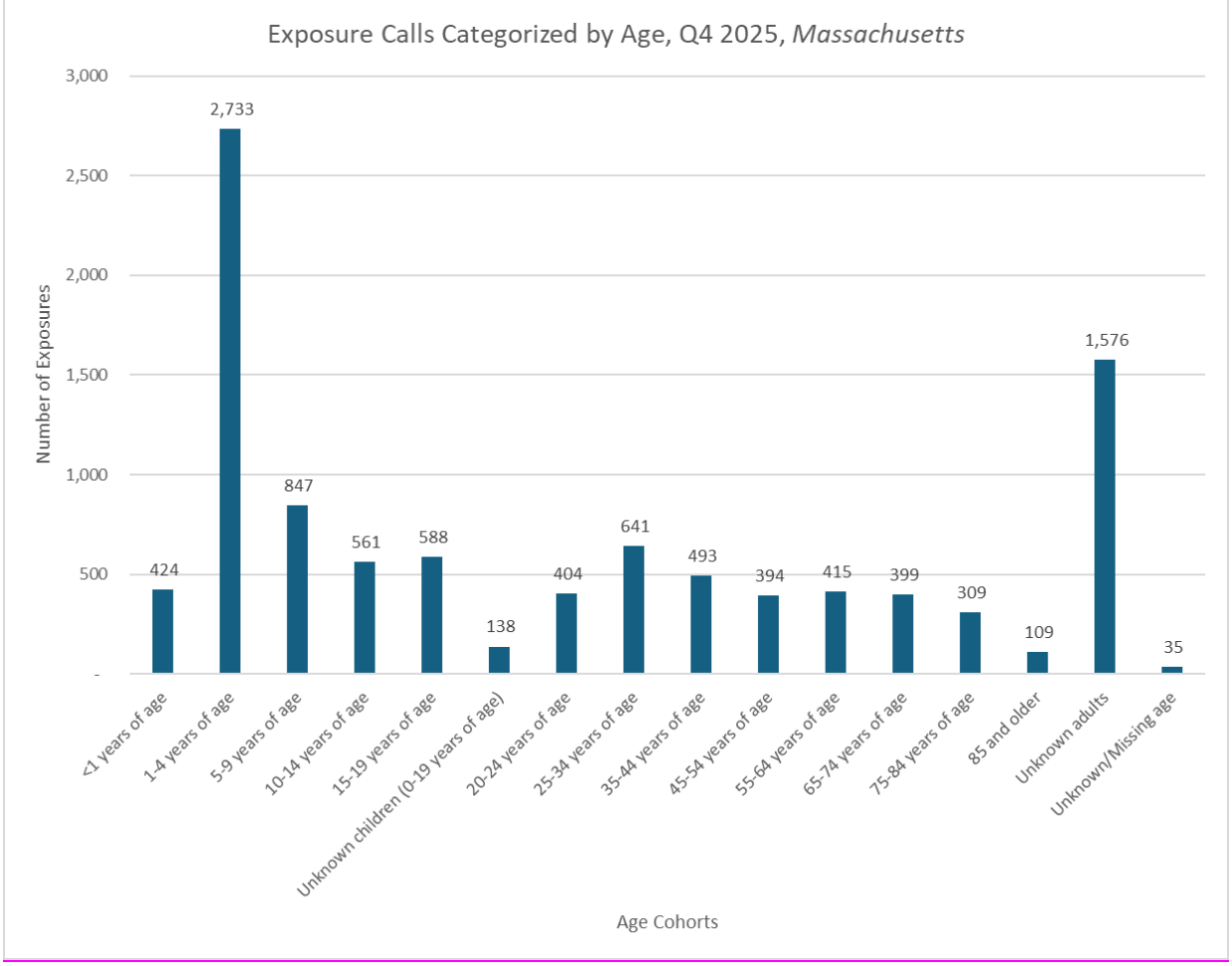
Call Volume: Languages

Languages for All States: All Calls	Q1 2025	Percentage of All Calls (Q1 2025)	Q2 2025	Percentage of All Calls (Q2 2025)	Q3 2025	Percentage of All Calls (Q3 2025)	Q4 2025	Percentage of All Calls (Q4 2025)	2025 Total	Percentage of All Calls (2025 Total)
Spanish	6	0.06%	5	0.04%	9	0.07%	5	0.04%	**25**	**0.05%**
Portuguese	2	0.02%	0	0%	3	0.02%	2	0.02%	**7**	**0.01%**
Haitian/Creole	0	0%	1	0.01%	1	0.01%	0	0%	**2**	**0.004%**
English or unspecified/ unknown	10,777	99.93%	11,427	99.95%	12,667	99.90%	12,940	99.94%	**47,811**	**99.93%**
Total calls	**10,785**	**100%**	**11,433**	**100%**	**12,680**	**100%**	**12,947**	**100%**	**47,845**	**100%**

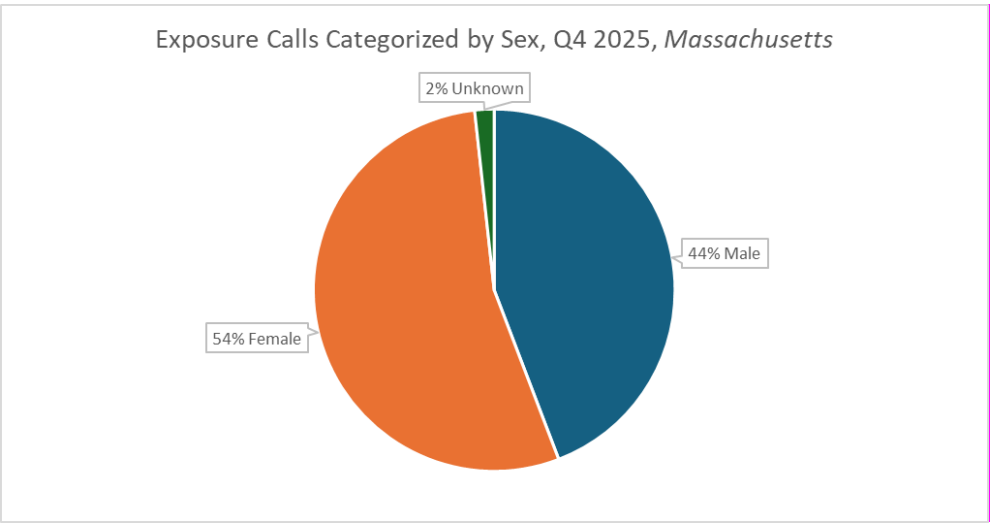
Exposure Calls Demographics

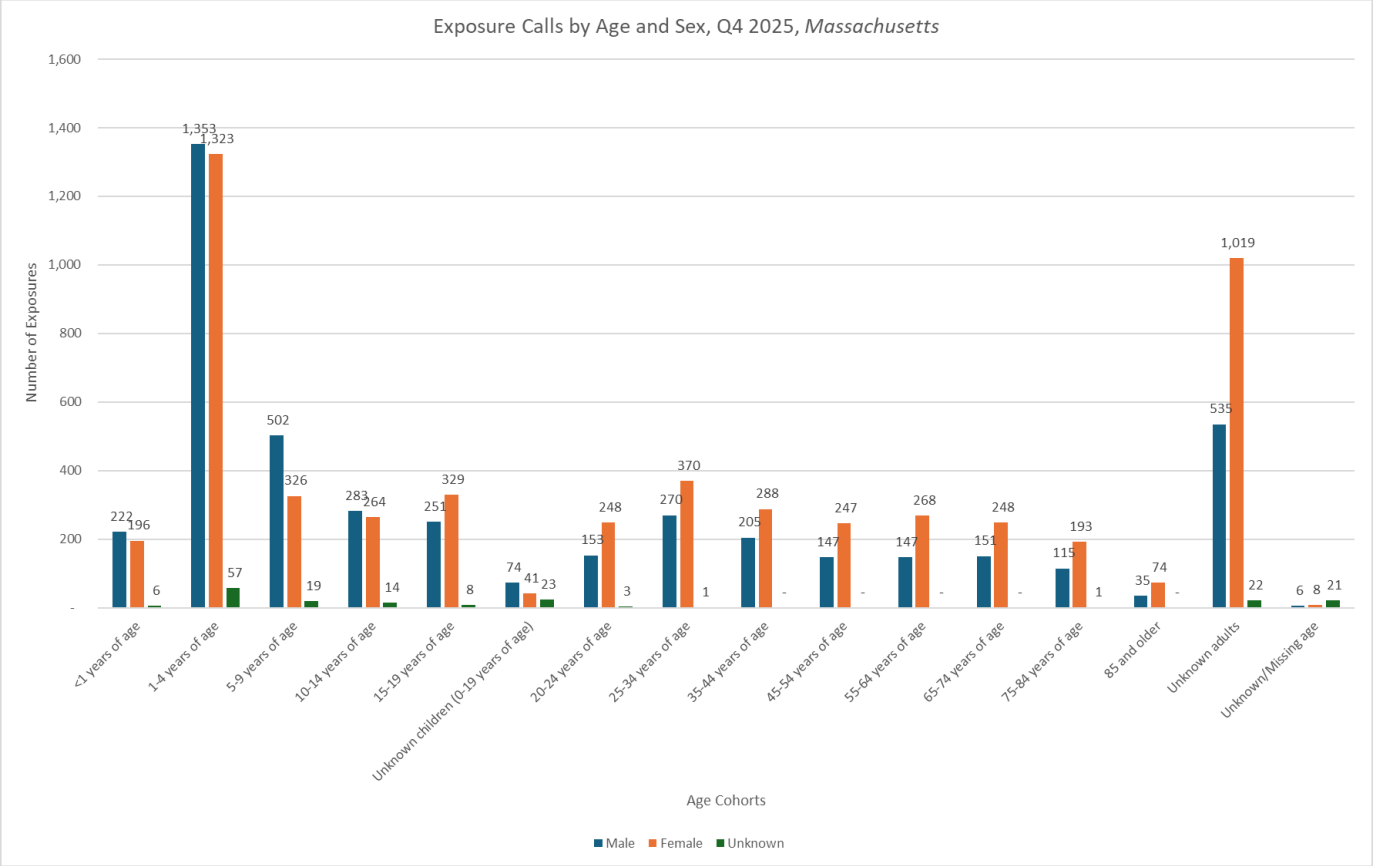
Exposure Calls by Age and Sex

Most of the exposure calls to MARI PC in Q4 are for children ages 1-4 years old (2,733 calls). Of this age group, those aged 2 years old had the most exposures (n= 964). In terms of sex, 54% of exposures involved females (n= 5,442), 44% of exposures involved males (n= 4,449), and 2% of exposures were unknown (n= 175). A breakdown by age and sex are in the charts below.



Age Cohort	Q1 2025 Total	Q2 2025 Total	Q3 2025 Total	Q4 2025 Total	2025 Total
<1 years of age	400	383	421	424	**1628**
1-4 years of age	2427	2553	2768	2733	**10,481**
5-9 years of age	737	764	751	847	**3099**
10-14 years of age	457	495	504	561	**2017**
15-19 years of age	470	469	537	588	**2064**
Unknown children (0-19 years of age)	111	134	111	138	**494**
20-24 years of age	356	327	390	404	**1477**
25-34 years of age	483	576	617	641	**2317**
35-44 years of age	453	500	557	493	**2003**
45-54 years of age	319	372	394	394	**1479**
55-64 years of age	303	389	417	415	**1524**
65-74 years of age	291	384	364	399	**1438**
75-84 years of age	217	218	275	309	**1019**
85 and older	92	92	114	109	**407**
Unknown adults	1194	1144	1540	1576	**5454**
Unknown/Missing age	37	31	25	35	**128**



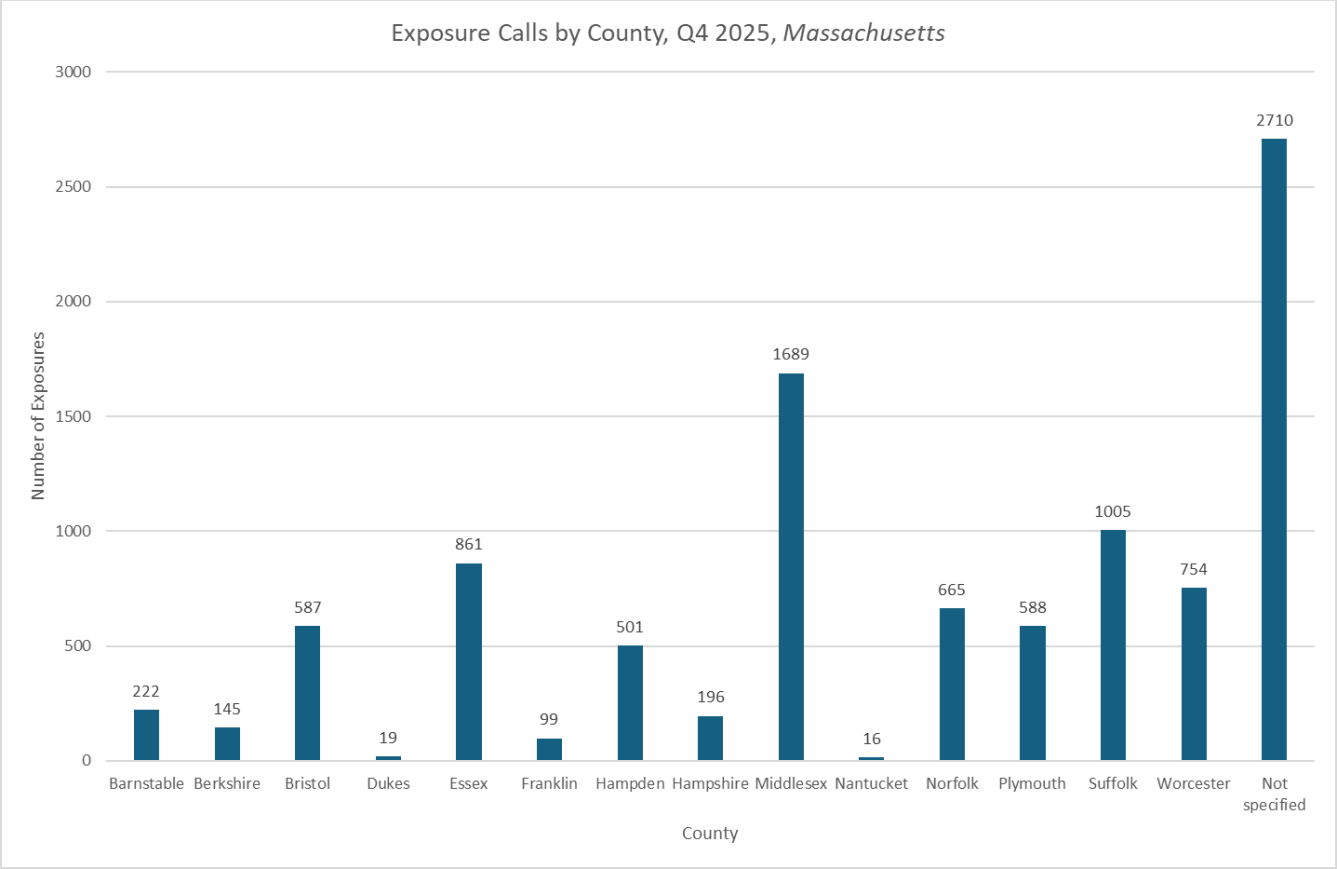


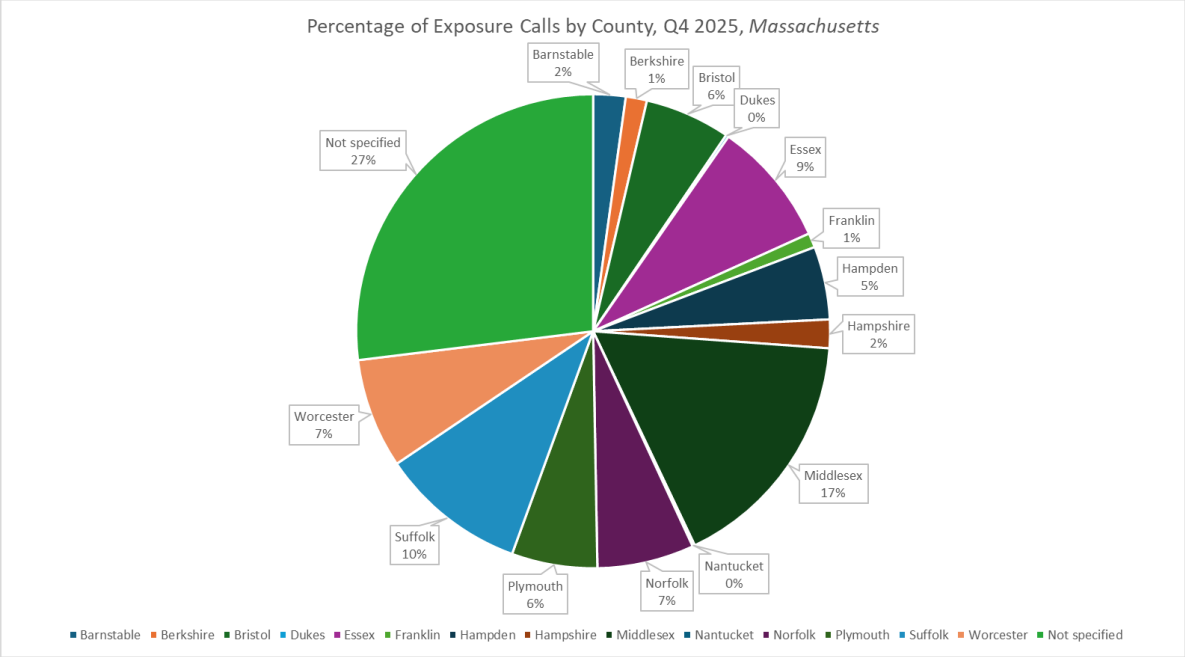
Exposure Calls by Race

Race: Exposures in MA	Q1 2025	Q2 2025	Q3 2025	Q4 2025	2025 Total
White	908	1748	1164	999	**4,819**
African American	110	205	131	130	**576**
Alaska Native	0	0	1	0	**1**
Asian	36	94	64	57	**251**
Hispanic	181	372	327	315	**1,195**
American Indian	1	1	1	2	**5**
Native Hawaiian	0	7	6	2	**15**
Chose not to answer	66	1213	2950	3176	**7,405**
Mixed	49	75	65	44	**233**
Unsure how to answer this question/unknov	6,996	5116	5076	5341	**22,529**

Exposure Calls by County

The Massachusetts counties with the highest number of exposure calls in Q4 2025 were Middlesex County (n= 1,689), Suffolk County (n= 1,005), and Essex County (n= 861), respectively. A further breakdown is illustrated in the graphs below.



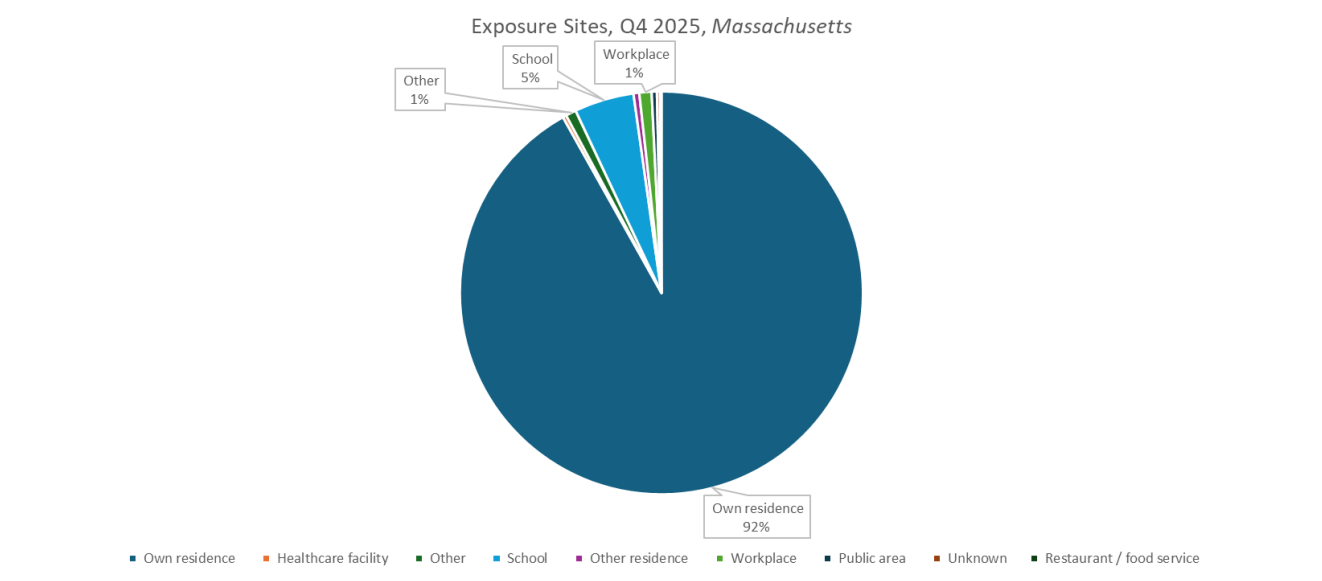


County	Q1 2025	Q2 2025	Q3 2025	Q4 2025	2025 Total
Barnstable	169	256	311	222	**958**
Berkshire	126	135	145	145	**551**
Bristol	581	589	617	587	**2374**
Dukes	15	24	34	19	**92**
Essex	778	820	835	861	**3294**
Franklin	71	81	79	99	**330**
Hampden	507	514	558	501	**2080**
Hampshire	136	154	189	196	**675**
Middlesex	1444	1686	1636	1689	**6455**
Nantucket	9	14	21	16	**60**
Norfolk	735	678	784	665	**2862**
Plymouth	475	591	602	588	**2256**
Suffolk	1026	928	986	1005	**3945**
Worcester	713	725	801	754	**2993**
Not specified	1547	1636	2183	2710	**8076**

Exposure Site of Exposure Calls

In Q4 2025, most individuals were exposed to poisons at their own residence (92%; n= 9,248). There was also a small percentage of exposures that happened at schools (5%; n= 481). This is a similar trend to previous quarters.

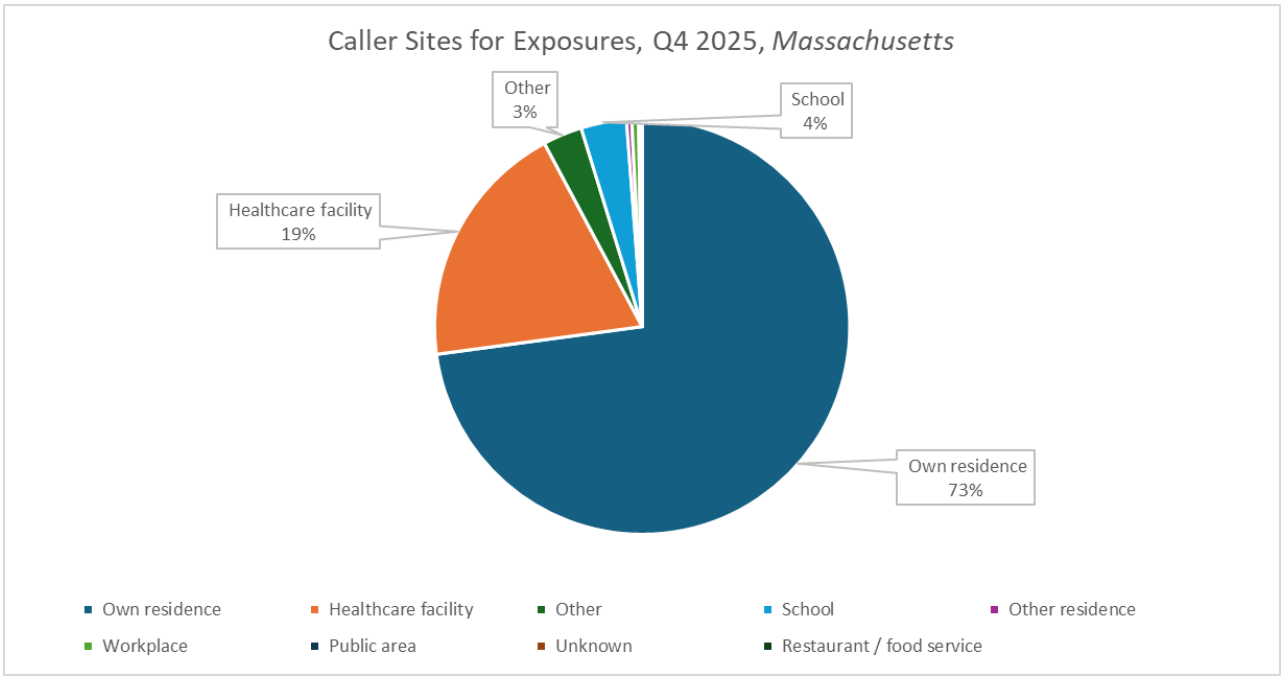
Exposure Sites for Exposures	Q4 2024 Calls (n)	Q1 2025 Calls (n)	Q2 2025 Calls (n)	Q3 2025 Calls (n)	Q4 2025 Calls (n)	2025 Total
Own residence	7,849	7,576	8,071	9,142	9,248	**34,037**
Healthcare facility	28	35	24	19	29	**107**
Other	75	50	68	68	84	**270**
School	374	442	392	262	481	**1,577**
Other residence	60	63	83	59	47	**252**
Workplace	114	98	95	118	99	**410**
Public area	43	32	52	80	42	**206**
Unknown	32	36	42	26	25	**129**
Restaurant / food service	12	15	4	11	11	**41**
Total	**8,587**	**8,347**	**8,831**	**9,785**	**10,066**	**37,029**



Caller Site of Exposure Calls

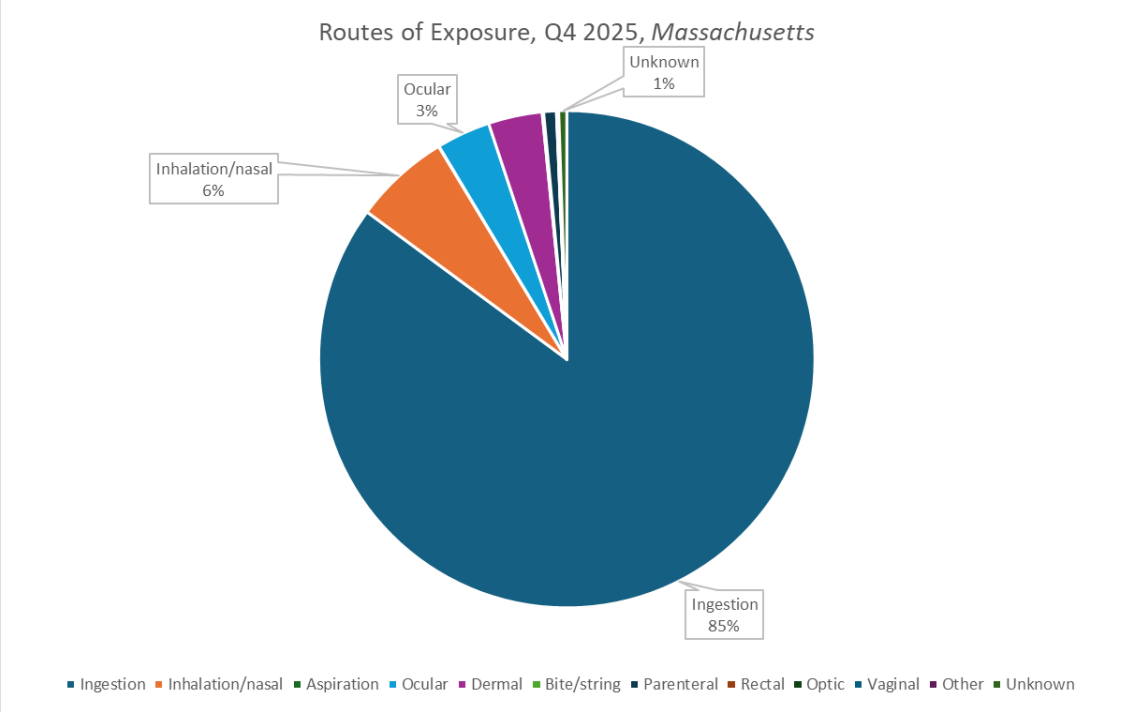
In Q4 2025, the most common caller site for Massachusetts exposures is the patients' own residence (n= 7,335, 72.9%) followed by health care facility (n= 1,945, 19.3%). This is a similar trend to previous quarters.

Caller Sites for Exposures	Q4 2024 Calls (n)	Q1 2025 Calls (n)	Q2 2025 Calls (n)	Q3 2025 Calls (n)	Q4 2025 Calls (n)	2025 Total
Own residence	6,130	5,905	6,194	7,185	7,335	**26,619**
Healthcare facility	1,791	1,725	1,876	1,985	1,945	**7,531**
Other	261	219	276	252	308	**1,055**
School	297	370	324	214	356	**1,264**
Other residence	41	46	73	53	41	**213**
Workplace	32	41	44	44	53	**182**
Public area	15	24	33	45	20	**122**
Unknown	9	13	11	7	6	**37**
Restaurant / food service	5	4	-	-	2	**6**
Total	**8,581**	**8,347**	**8,831**	**9,785**	**10,066**	**37,029**



Route of Exposure

In Q4 2025, most exposures happened via ingestion (85%; n= 8,748). The second most common route of exposure was inhalation (6%), dermal (4%), and ocular (4%).

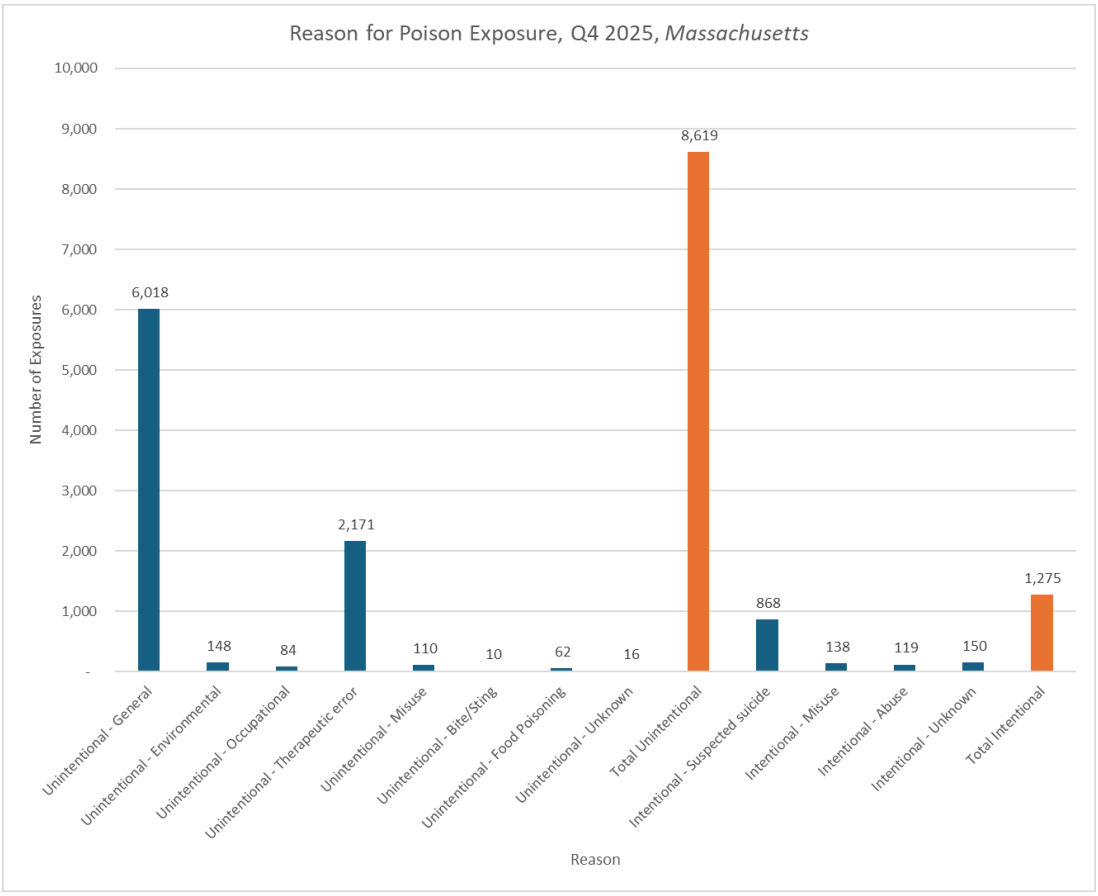


Route of Exposure	Q1 2025 Calls (n)	Q2 2025 Calls (n)	Q3 2025 Calls (n)	Q4 2025 Calls (n)	2025 Total
Ingestion	7252	7585	8402	8748	**31,987**
Inhalation/nasal	550	534	569	643	**2,296**
Aspiration	0	3	2	3	**8**
Ocular	268	346	402	361	**1,377**
Dermal	298	435	476	361	**1,570**
Bite/string	7	20	30	10	**67**
Parenteral	77	92	84	85	**338**
Rectal	6	2	2	3	**13**
Optic	3	6	8	1	**18**
Vaginal	4	6	8	9	**27**
Other	6	4	13	2	**25**
Unknown	46	44	58	54	**202**
Total	**8,517**	**9077**	**10,054**	**10280**	**37,928**

Reason for Poison Exposure (Intent)

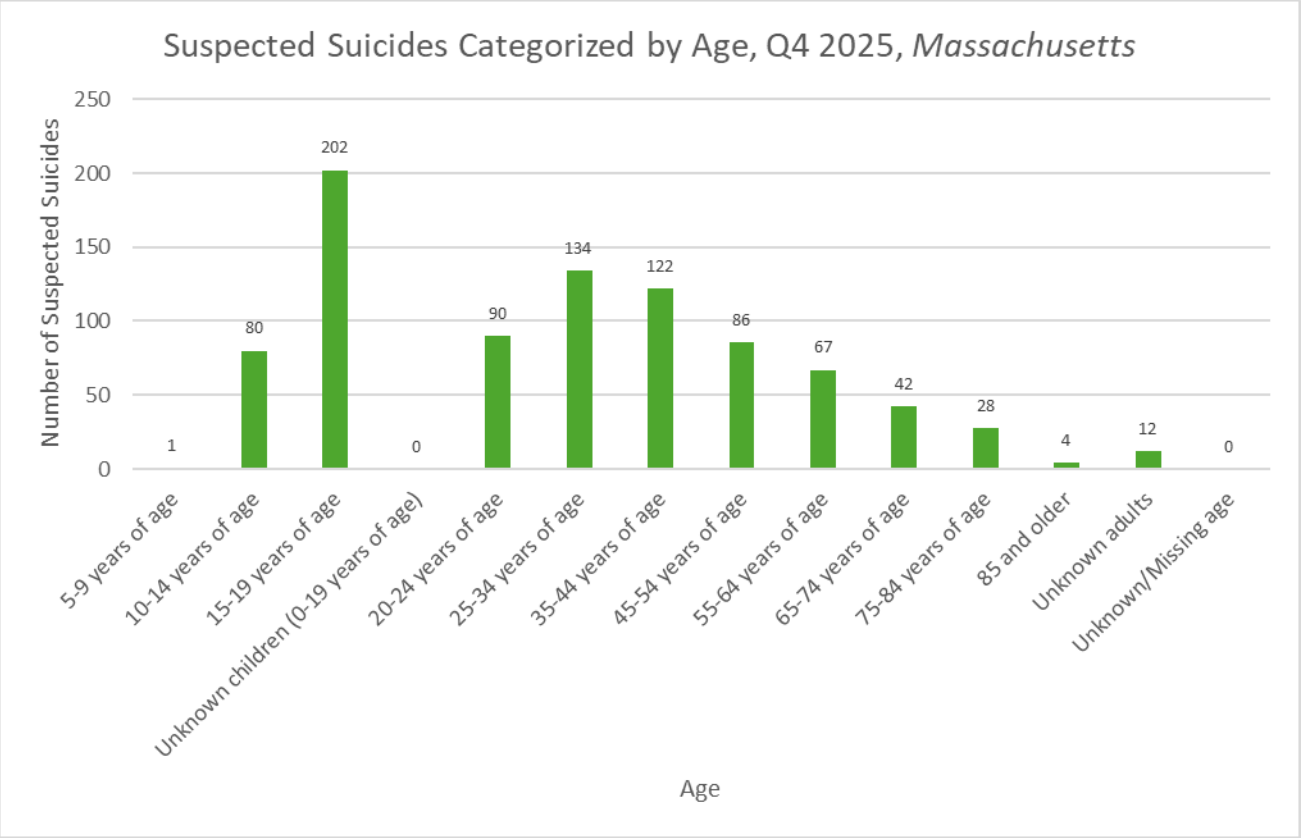
In Q4 2025, most poison exposures were recorded as unintentional (86%; n= 8,619). 1,275 cases (13%) were intentional. Of the 1,275 intentional calls, 868 calls were recorded as suspected suicides.

Reason for Exposure	Q4 2024	Q1 2025	Q2 2025	Q3 2025	Q4 2025	2025 Total
Unintentional - General	5,331	5,159	5,467	5,976	6,018	22,620
Unintentional - Environmental	142	121	164	184	148	617
Unintentional - Occupational	96	71	77	98	84	330
Unintentional - Therapeutic error	1,494	1,531	1,538	1,799	2,171	7,039
Unintentional - Misuse	83	102	100	119	110	431
Unintentional - Bite/Sting	17	7	20	30	10	67
Unintentional - Food Poisoning	82	62	73	95	62	292
Unintentional - Unknown	25	11	10	13	16	50
Total Unintentional	**7,270**	**7,064**	**7,499**	**8,314**	**8,619**	**31,496**
Intentional - Suspected suicide	875	786	887	946	868	3,487
Intentional - Misuse	92	109	108	116	138	471
Intentional - Abuse	79	80	92	96	119	387
Intentional - Unknown	107	130	132	143	150	555
Total Intentional	**1,153**	**1,105**	**1,219**	**1,301**	**1,275**	**4,900**
Other - Contamination/tampering	6	-	1	3	3	7
Other - Malicious	14	10	11	12	15	48
Other - Withdrawal	-	3	7	4	3	17
Total Other	**20**	**13**	**19**	**19**	**21**	**72**
Adverse Reaction - Drug	77	98	78	95	90	361
Adverse Reaction - Food	4	7	3	1	3	14
Adverse Reaction - Other	12	4	6	6	8	24
Total Adverse Reaction	**93**	**109**	**87**	**102**	**101**	**399**
Unknown Reason	**51**	**56**	**57**	**49**	**50**	**212**

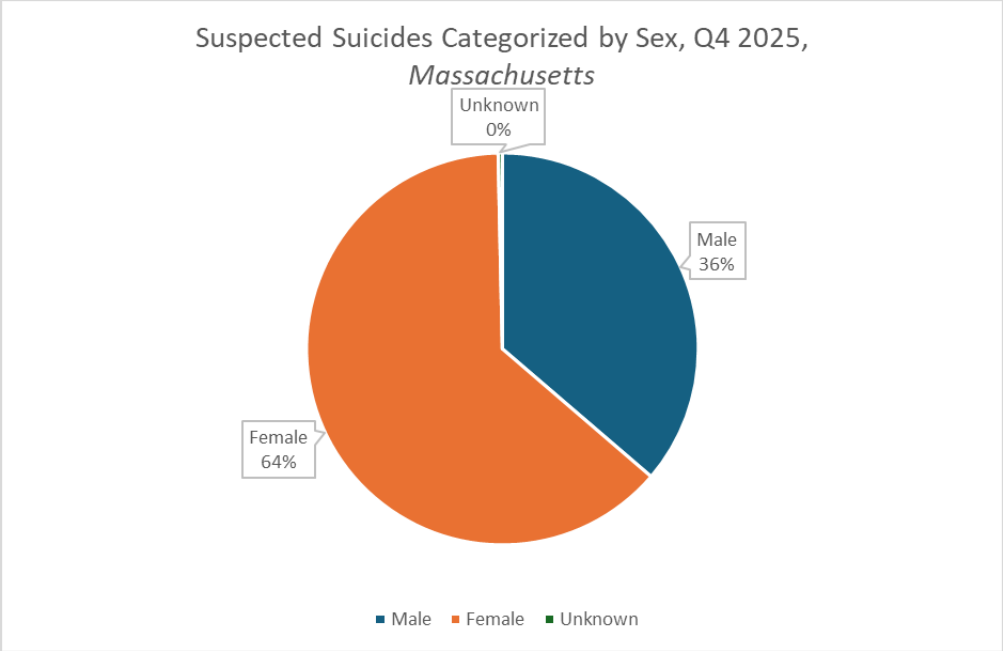


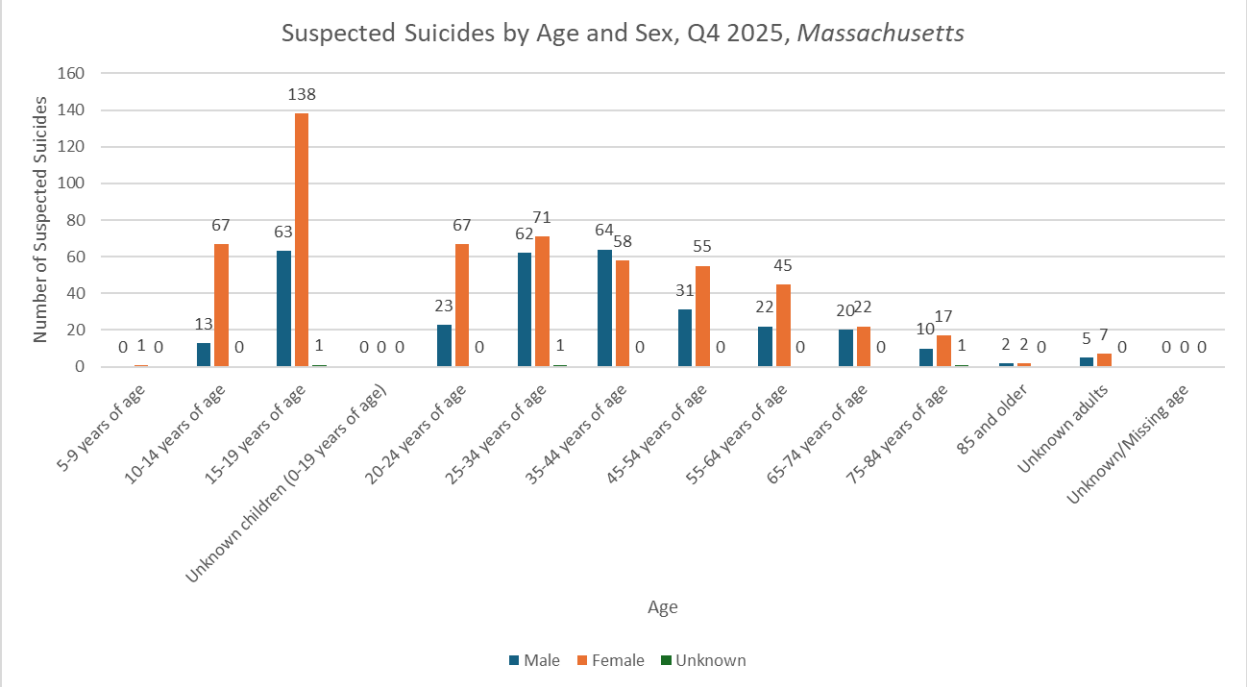
Suspected Suicide Cases

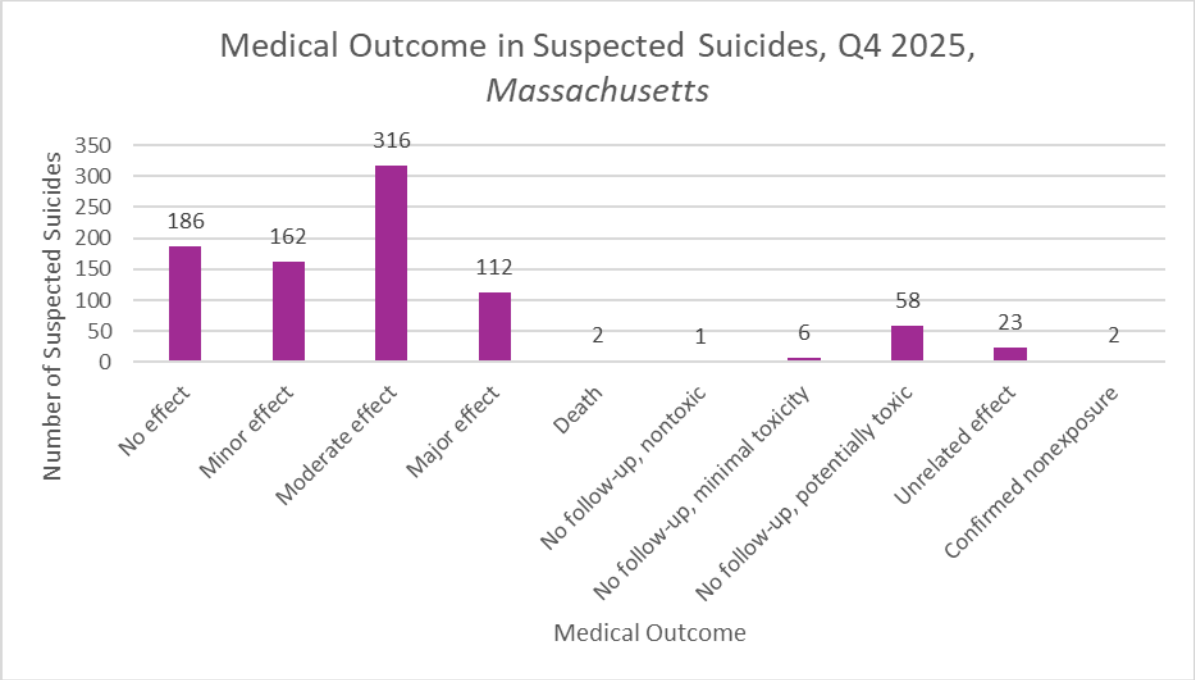
In Q4 2025, 868 calls were recorded as suspected suicides. The age category with the most suspected suicides was the 15-19 year old age group (n= 202), followed by those aged 25-34 years old (n= 134) and those aged 35-44 years old (n= 122). About two-thirds of all suspected suicides in Q4 2025 were female (64%), similar to the previous quarters. There were significantly more females involved in suspected suicides in the pediatric age group (n= 206), compared to males (n= 76), also similar to the previous quarters. The most common medical outcome in suspected suicides in Q4 2025 was a moderate effect (n= 316), followed by no effect (n= 186), and then minor effect (n= 162). There were 2 deaths from suspected suicides. About 18% of all substances used in suspected suicides were analgesics, about 17% were antidepressants, and about 15% were sedatives, hypnotics, and antipsychotics. The most common non-pharmaceutical substance category was alcohol, at 7% of all substances used.



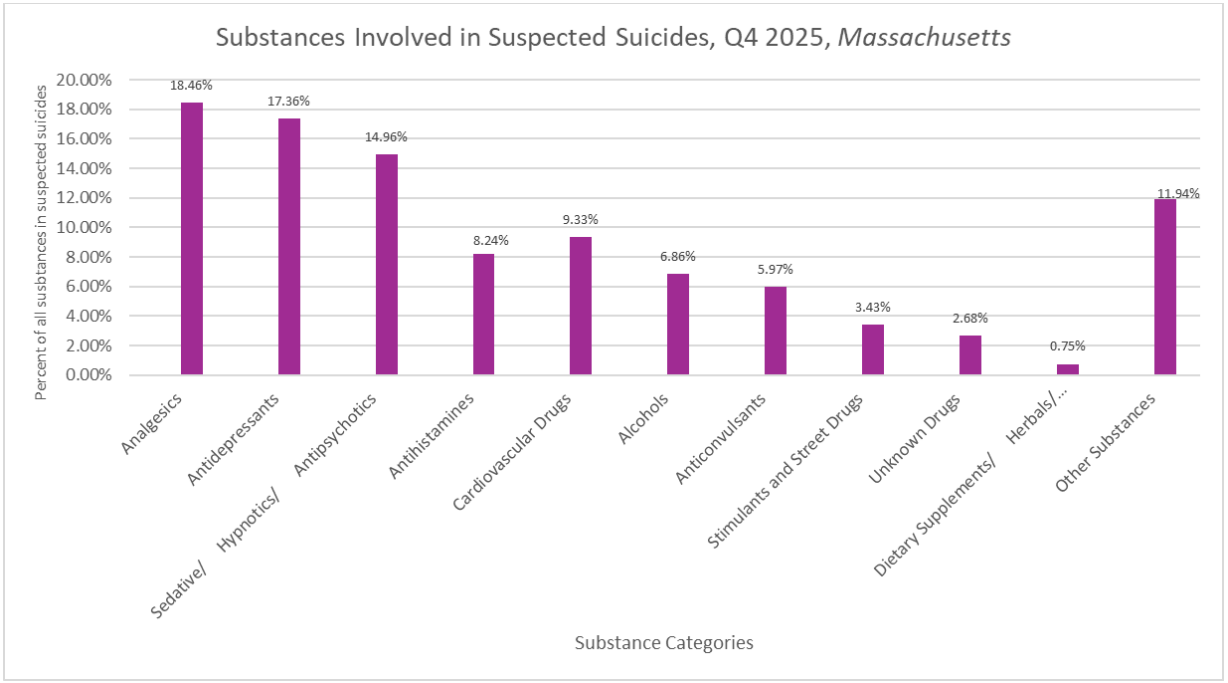
Age Cohort	Q1 2025 Total	Q2 2025 Total	Q3 2025 Total	Q4 2025 Total	2025 Total
5-9 years of age	0	0	1	1	**2**
10-14 years of age	69	70	79	80	**298**
15-19 years of age	178	195	193	202	**768**
Unknown children (0-19 years of age)	0	1	1	0	**2**
20-24 years of age	84	90	115	90	**379**
25-34 years of age	126	152	152	134	**564**
35-44 years of age	120	114	146	122	**502**
45-54 years of age	78	99	99	86	**362**
55-64 years of age	63	75	85	67	**290**
65-74 years of age	29	56	37	42	**164**
75-84 years of age	16	18	23	28	**85**
85 and older	11	2	4	4	**21**
Unknown adults	12	14	11	12	**49**
Unknown/Missing age	0	1	0	0	**1**


Suspected Suicides Categorized by Sex, Q4 2025, *Massachusetts*
Unknown 0%
Male 36%
Female 64%
Male
Female
Unknown


Suspected Suicides by Age and Sex, Q4 2025, *Massachusetts*
Number of Suspected Suicides
160
140
120
100
80
60
40
20
0
0 1 0
13 67 0
63 138 1
0 0 0
23 67 0
62 71 1
64 58 0
31 55 0
22 45 0
20 22 0
10 17 1
2 2 0
5 7 0
0 0 0
5-9 years of age
10-14 years of age
15-19 years of age
Unknown children (0-19 years of age)
20-24 years of age
25-34 years of age
35-44 years of age
45-54 years of age
55-64 years of age
65-74 years of age
75-84 years of age
85 and older
Unknown adults
Unknown/Missing age
Age
Male
Female
Unknown



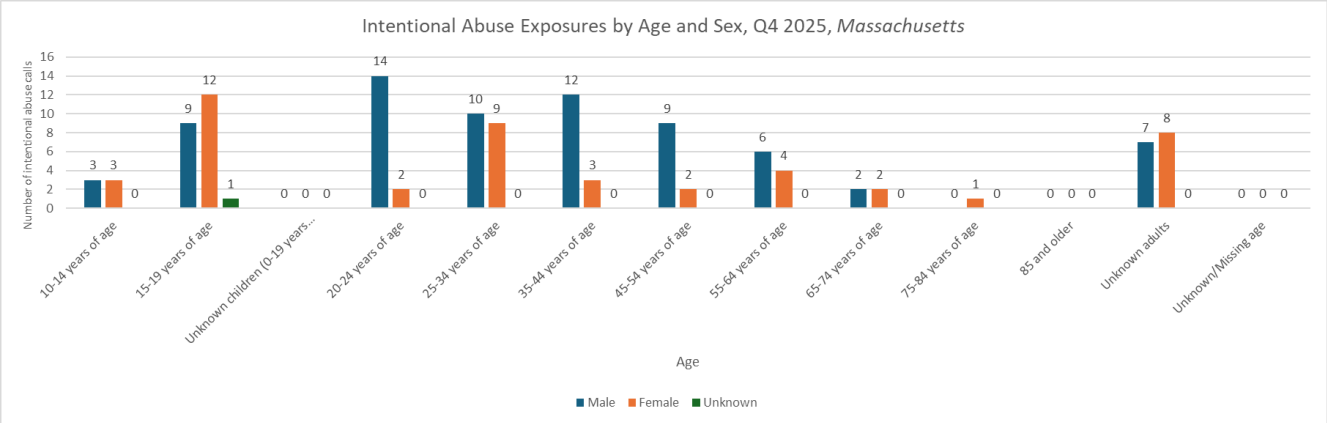
Medical Outcome for Suspected Suicides	Q1 2025	Q2 2025	Q3 2025	Q4 2025	2025 Total
No effect	161	196	212	186	**755**
Minor effect	142	120	162	162	**586**
Moderate effect	277	320	322	316	**1235**
Major effect	103	118	152	112	**485**
Death	2	5	2	2	**11**
No follow-up, nontoxic	2	1	0	1	**4**
No follow-up, minimal toxicity	15	8	10	6	**39**
No follow-up, potentially toxic	66	94	67	58	**285**
Unrelated effect	13	23	18	23	**77**
Confirmed nonexposure	5	2	1	2	**10**

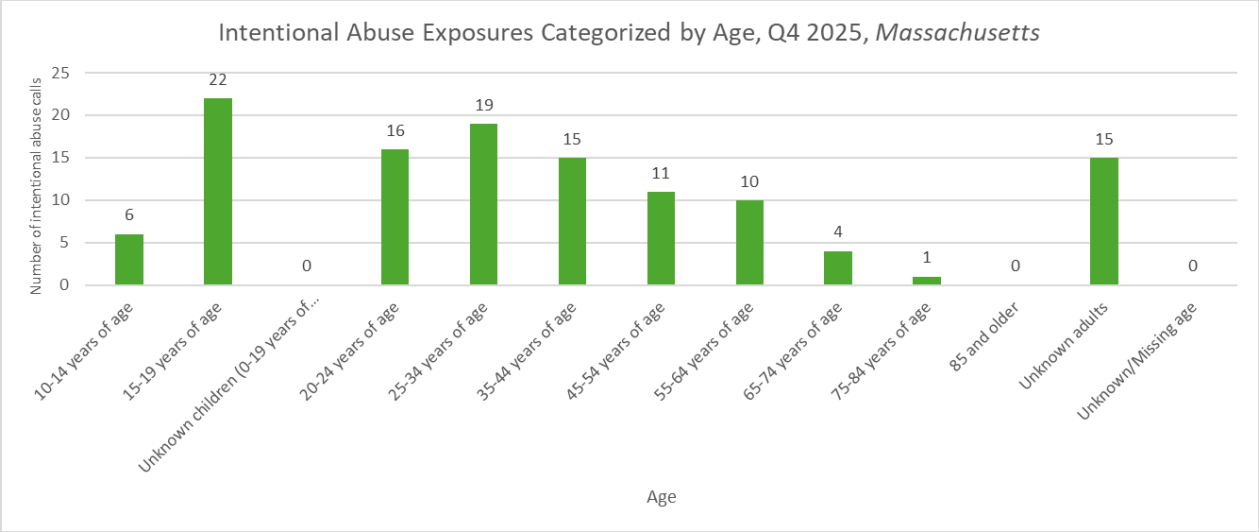


Substance Category	Q1 2025	Q2 2025	Q3 2025	Q4 2025
Analgesics	18%	15%	17%	18%
Antidepressants	17%	17%	16%	17%
Sedative/Hypnotics/Antipsychotics	15%	18%	14%	15%
Antihistamines	9%	8%	10%	8%
Cardiovascular Drugs	8%	10%	9%	9%
Alcohols	7%	6%	8%	7%
Anticonvulsants	7%	7%	6%	6%
Stimulants and Street Drugs	4%	3%	4%	3%
Unknown Drugs	3%	2%	2%	3%
Dietary Supplements/Herbals/Homeopat	2%	2%	1%	1%
Other Substances	11%	12%	12%	12%

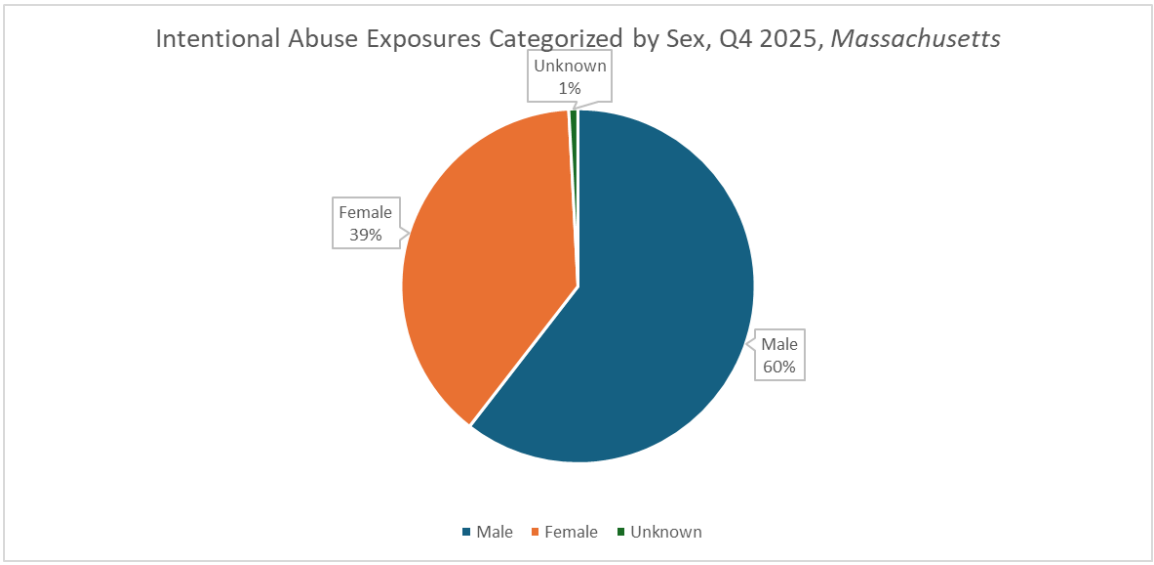
Intentional Abuse Cases

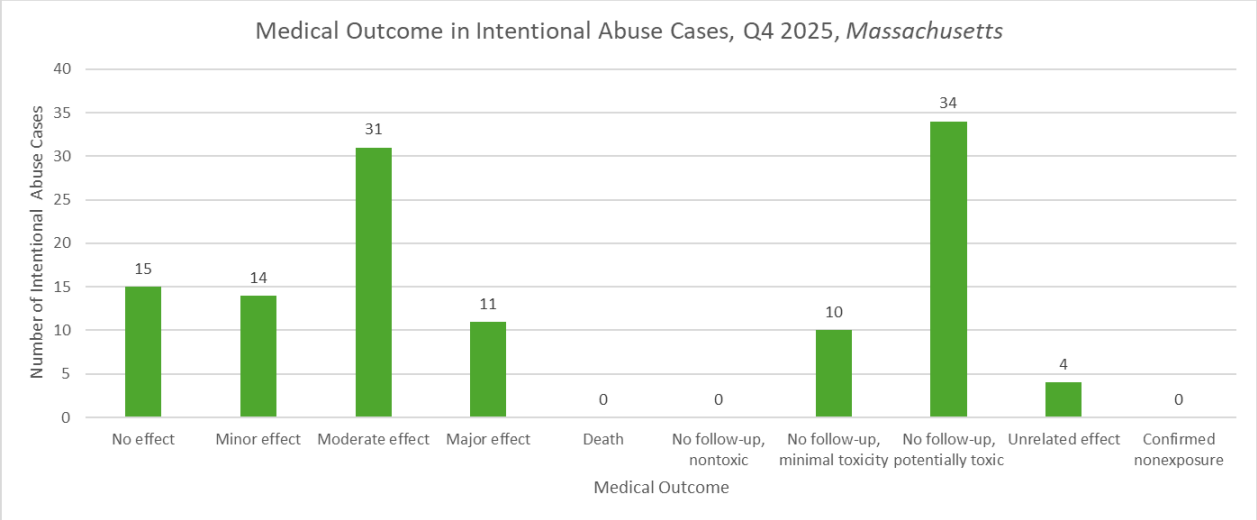
In Q4 2025, 119 calls were recorded as intentional abuse. The age category with the most intentional abuse cases was the 15-19 year old age group (n= 22). This was followed by those aged 25-34 years old (n= 19). Most intentional abuse cases in Q4 2025 were male (60%). The most common medical outcome in intentional abuse cases in Q4 2025 was no follow-up, potentially toxic (n= 34), followed by moderate effect (n= 31). There were zero deaths from intentional abuse cases. About 24% of all substances used in intentional abuse cases were stimulants and street drugs, about 16% were alcohols, and about 9% were analgesics. Specifically, there were 43 intentional abuse cases involving stimulants and street drugs.



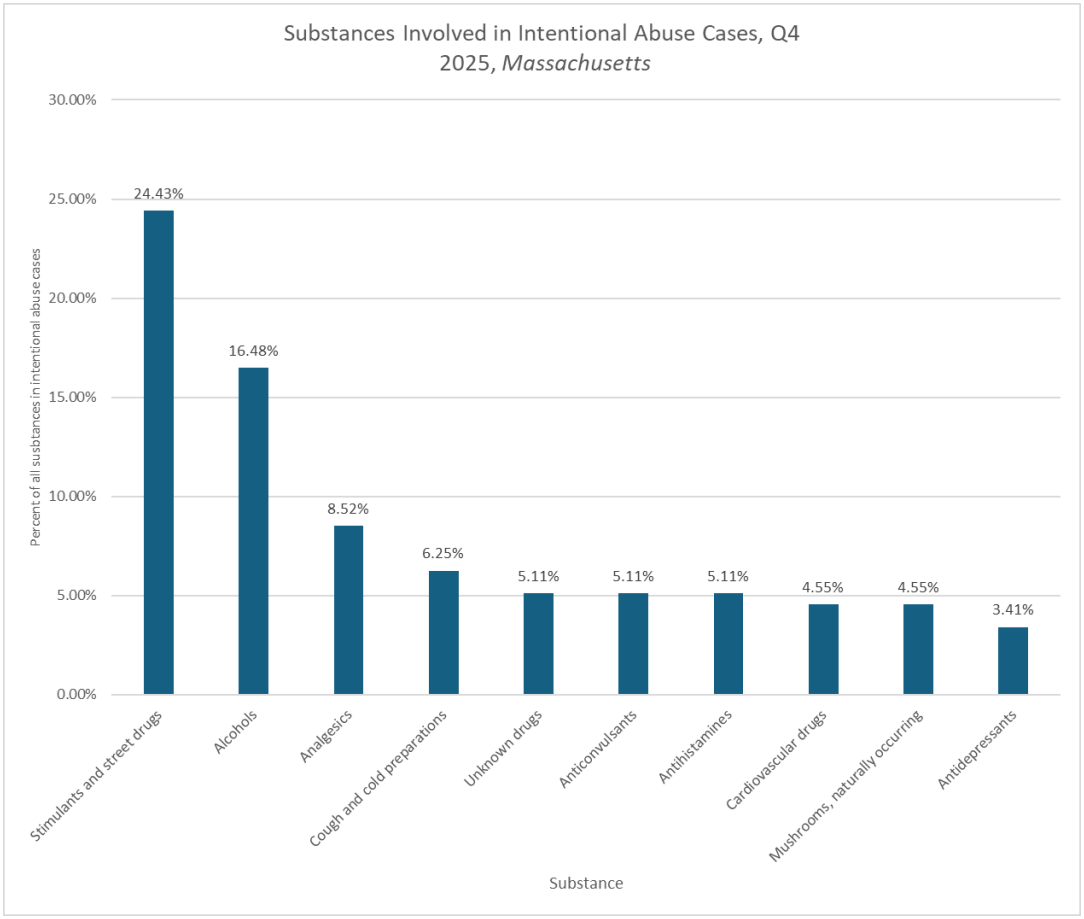


Age Cohort	Q1 2025 Total	Q2 2025 Total	Q3 2025 Total	Q4 2025 Total	2025 Total
10-14 years of age	3	8	3	6	**20**
15-19 years of age	13	10	22	22	**67**
Unknown children (0-19 years of age)	1	0	0	0	**1**
20-24 years of age	9	15	9	16	**49**
25-34 years of age	13	16	22	19	**70**
35-44 years of age	17	23	13	15	**68**
45-54 years of age	8	4	8	11	**31**
55-64 years of age	2	4	5	10	**21**
65-74 years of age	3	3	2	4	**12**
75-84 years of age	1	0	1	1	**3**
85 and older	0	0	0	0	**0**
Unknown adults	9	9	11	15	**44**
Unknown/Missing age	1	0	0	0	**1**





Intentional Abuse: Medical Outcome	Q1 2025	Q2 2025	Q3 2025	Q4 2025	2025 Total
No effect	5	8	4	15	**32**
Minor effect	5	10	11	14	**40**
Moderate effect	24	36	40	31	**131**
Major effect	11	9	13	11	**44**
Death	0	0	1	0	**1**
No follow-up, nontoxic	0	0	0	0	**0**
No follow-up, minimal toxicity	7	4	4	10	**25**
No follow-up, potentially toxic	23	24	21	34	**102**
Unrelated effect	5	1	2	4	**12**
Confirmed nonexposure	0	0	0	0	**0**

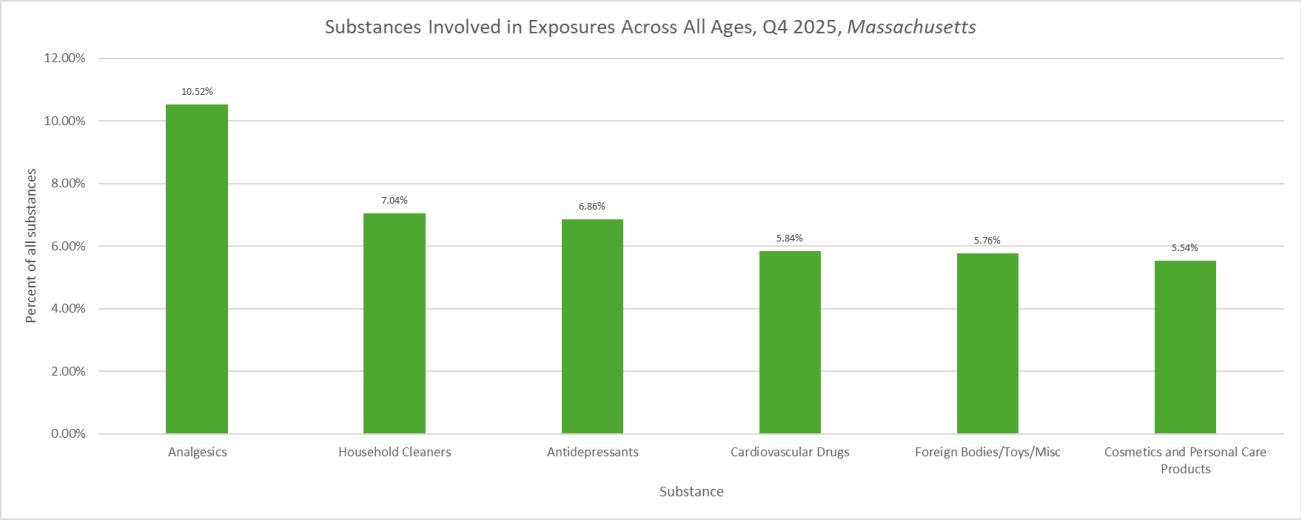


Top Substances Involved in Intentional Abuse Exposures, Massachusetts

Q1 2025	Q2 2025	Q3 2025	Q4 2025
Stimulants and Street Drugs - 30%	Stimulants and Street Drugs - 25%	Stimulants and Street Drugs - 22%	Stimulants and Street Drugs - 24%
Alcohols - 20%	Alcohols - 15%	Alcohols - 16%	Alcohols - 16%
Analgesics - 10%	Analgesics - 13%	Cough and Cold Preparations - 12%	Analgesics - 9%
Cough and Cold Preparations - 7%	Cough and Cold Preparations - 8%	Other Substances - 9%	Cough and Cold Preparations - 6%
Sedative/Hypnotics/Antipsychotics - 7%	Other Substances - 8%	Cosmetics and Personal Care Products - 8%	Unknown Drugs - 5%
Other Substances - 6%	Unknown Drugs - 8%	Analgesics - 7%	Anticonvulsants - 5%
Antidepressants - 6%	Sedative/Hypnotics/Antipsychotics - 6%	Unknown Drugs - 7%	Antihistamines - 5%

Substances

The top five substances involved in poison exposures in Q4 2025 across all age groups were analgesics (10.52% of all substances), household cleaners (7.04% of all exposures), antidepressants, cardiovascular drugs, foreign bodies/toys/misc, and cosmetics and personal care products respectively. Further breakdown based off age group is depicted in the table below. In Q4 2025, there were 357 calls regarding stimulants and street drugs, which is 3.07% of all substances involved in exposures across all age groups in MA.



Top Substances Involved in Exposures Across All Ages, Massachusetts

Q1 2025 - % of all substances	Q2 2025 - % of all substances	Q3 2025 - % of all substances	Q4 2025 - % of all substances
Analgesics - 10.89%	Analgesics - 8.77%	Analgesics - 9.02%	Analgesics - 10.52%
Household Cleaners - 7.14%	Household Cleaners - 7.27%	Household Cleaners - 7.08%	Household Cleaners - 7.04%
Cosmetics and Personal Care Products - 6.5%	Cardiovascular Drugs - 5.83%	Antidepressants - 6.39%	Antidepressants - 6.86%
Cardiovascular Drugs - 5.01%	Cosmetics and Personal Care Products - 5.78%	Cardiovascular Drugs - 5.95%	Cardiovascular Drugs - 5.84%
Antidepressants - 6.43%	Antidepressants - 5.73%	Cosmetics and Personal Care Products - 5.64%	Foreign Bodies/Toys/Misc - 5.76%
Foreign Bodies/Toys/Misc - 5.18%	Foreign Bodies/Toys/Misc - 5.42%	Plants - 4.96%	Cosmetics and Personal Care Products - 5.54%

Top Substances Involved in Exposures Across Age Cohorts, Massachusetts

Age Cohort; Quarter	Non Pharmaceutical	Pharmaceutical
<1 years of age		
Q1 2025	Household cleaning substances (n=32)	Analgesics (n=60)
	Cosmetics and personal care products (n=28)	Antihistamines (n=23)
	Foreign bodies/toys/misc (n=29)	Topical preparations (n=16)
	Food products and food poisoning (n=26)	Gastrointestinal preparations (n=16)
	Plants (n=19)	Vitamins (n=12)
Q2 2025	Foreign bodies/toys/misc (n=33)	Analgesics (n=41)
	Plants (n=33)	Antihistamines (n=23)
	Household cleaning substances (n=32)	Topical preparations (n=16)
	Cosmetics and personal care products (n=28)	Vitamins (n=16)
	Pesticides (n=24)	Antimicrobials (n=15)
Q3 2025	Plants (n=44)	Analgesics (n=52)
	Cosmetics and personal care products (n=36)	Antihistamines (n=23)
	Household cleaning substances (n=27)	Topical preparations (n=17)
	Foreign bodies/toys/misc (n=22)	Gastrointestinal preparations (n=15)
	Pesticides (n=22)	Vitamins (n=15)
Q4 2025	Foreign bodies/toys/misc (n=53)	Analgesics (n=52)
	Cosmetics and personal care products (n=31)	Antihistamines (n=21)
	Household cleaning substances (n=28)	Topical preparations (n=17)
	Plants (n=22)	Vitamins (n=16)
	Food products and food poisoning (n=20)	Antimicrobials (n=15)
1-4 years of age		
Q1 2025	Cosmetics and personal care products (n=309)	Analgesics (n=298)
	Household cleaning substances (n=230)	Vitamins (n=142)
	Foreign bodies/toys/misc (n=225)	Topical preparations (n=128)
	Arts/crafts/office supplies (n=66)	Dietary Supplements/herbals/homeopathic (n=117)
	Chemicals (n=51)	Elecrolytes and minerals (n=95)
Q2 2025	Cosmetics and personal care products (n=278)	Analgesics (n=246)
	Household cleaning substances (n=238)	Antihistamines (n=148)
	Foreign bodies/toys/misc (n=236)	Vitamins (n=129)
	Pesticides (n=141)	Dietary Supplements/herbals/homeopathic (n=96)
	Plants (n=119)	Topical preparations (n=95)
Q3 2025	Plants (n=288)	Analgesics (n=221)
	Cosmetics and personal care products (n=284)	Vitamins (n=115)
	Foreign bodies/toys/misc (n=265)	Dietary Supplements/herbals/homeopathic (n=114)
	Household cleaning substances (n=254)	Topical preparations (n=103)
	Pesticides (n=147)	Antihistamines (n=99)
Q4 2025	Household cleaning substances (n=346)	Analgesics (n=315)
	Cosmetics and personal care products (n=272)	Dietary Supplements/herbals/homeopathic (n=143)
	Foreign bodies/toys/misc (n=216)	Vitamins (n=118)
	Plants (n=112)	Electrolytes and minerals (n=114)
	Chemicals (n=53)	Antihistamines (n=107)

5-9 years of age		
Q1 2025	Foreign bodies/toys/misc (n=92)	Analgesics (n=65)
	Cosmetics and personal care products (n=61)	Elecrolytes and minerals (n=48)
	Arts/crafts/office supplies (n=60)	Vitamins (n=39)
	Chemicals (n=39)	Dietary Supplements/herbals/homeopathic (n=37)
	Household cleaning substances (n=31)	Cough and Cold Preparations (n=31)
Q2 2025	Foreign bodies/toys/misc (n=105)	Antihistamines (n=68)
	Plants (n=68)	Analgesics (n=35)
	Cosmetics and personal care products (n=65)	Dietary Supplements/herbals/homeopathic (n=35)
	Household cleaning substances (n=42)	Vitamins (n=31)
	Arts/crafts/office supplies (n=41)	Stimulants/street drugs (n=27)
Q3 2025	Foreign bodies/toys/misc (n=100)	Antihistamines (n=57)
	Cosmetics and personal care products (n=62)	Dietary Supplements/herbals/homeopathic (n=43)
	Plants (n=58)	Vitamins (n=42)
	Pesticides (n=32)	Analgesics (n=39)
	Arts/crafts/office supplies (n=31)	Cardiovascular drugs (n=33)
Q4 2025	Foreign bodies/toys/misc (n=138)	Antihistamines *n=49)
	Cosmetics and personal care products (n=69)	Analgesics (n=44)
	Arts/crafts/office supplies (n=58)	Stimulants/street drugs (n=41)
	Chemicals (n=46)	Electrolytes and minerals (n=40)
	Plants (n=29)	Dietary supplements/herbals/homeopathic (n=37)
10-14 years of age		
Q1 2025	Cosmetics and personal care products (n=48)	Analgesics (n=55)
	Foreign bodies/toys/misc (n=44)	Antidepressants (n=47)
	Arts/crafts/office supplies (n=21)	Antihistamines (n=39)
	Household cleaning substances (n=18)	Stimulants/street drugs (n=30)
	Chemicals (n=13)	Cardiovascular drugs (n=24)
Q2 2025	Foreign bodies/toys/misc (n=53)	Antihistamines (n=51)
	Cosmetics and personal care products (n=41)	Analgesics (n=48)
	Arts/crafts/office supplies (n=26)	Stimulants/street drugs (n=45)
	Household cleaning substances (n=26)	Antidepressants (n=40)
	Plants (n=13)	Cardiovascular drugs (n=28)
Q3 2025	Cosmetics and personal care products (n=41)	Analgesics (n=70)
	Plants (n=28)	Antidepressants (n=52)
	Foreign bodies/toys/misc (n=25)	Antihistaminess (n=45)
	Household cleaning substances (n=23)	Stimulants/street drugs (n=42)
	Arts/crafts/office supplies (n=19)	Cardiovascular drugs (n=35)
Q4 2025	Cosmetics and personal care products (n=59)	Analgesics (n=85)
	Foreign bodies/toys/misc (n=53)	Stimulants/street drugs (n=58)
	Arts/crafts/office supplies (n=33)	Antihistamines (n=54)
	Household cleaning substances (n=30)	Antidepressants (n=46)
	Chemicals (n=23)	Cardiovascular drugs (n=28)

15-19 years of age		
Q1 2025	Household cleaning substances (n=21)	Analgesics (n=102)
	Cosmetics and personal care products (n=17)	Antidepressants (n=106)
	Chemicals (n=15)	Antihistamines (n=47)
	Foreign bodies/toys/misc (n=10)	Cough and Cold Preparations (n=28)
	Alcohols (n=9)	Stimulants/street drugs (n=28)
Q2 2025	Cosmetics and personal care products (n=21)	Analgesics (n=105)
	Foreign bodies/toys/misc (n=18)	Antidepressants (n=94)
	Household cleaning substances (n=14)	Antihistamines (n=63)
	Alcohols (n=11)	Sedative/hypnotics/antipsychotics (n=42)
	Chemicals (n=8)	Stimulants/street drugs (n=34)
Q3 2025	Cosmetics and personal care products (n=25)	Analgesics (n=131)
	Household cleaning substances (n=25)	Antidepressants (n=100)
	Alcohols (n=18)	Antihistamines (n=65)
	Plants (n=11)	Stimulants/street drugs (n=42)
	Hydrocarbons (n=10)	Sedative/hypnotics/antipsychotics (n=33)
Q4 2025	Household cleaning substances (n=29)	Analgesics (n=148)
	Cosmetics and personal care products (n=25)	Antidepressants (n=98)
	Alcohols (n=25)	Antihistamines (n=65)
	Foreign bodies/toys/misc (n=13)	Stimulants/street drugs (n=48)
	Chemicals (n=11)	Cardiovascsular drugs (n=40)
Unknown children (0-19 years of age)		
Q1 2025	Foreign bodies/toys/misc (n=25)	Electrolytes and minerals (n=5)
	Cosmetics and personal care products (n=13)	Cough and Cold Preparations (n=2)
	Chemicals (n=11)	Analgesics (n=2)
	Arts/crafts/office supplies (n=9)	Cardiovascular drugs; diuretics (n=1)
	Household cleaning substances (n=5)	Vitamins; hormones and hormone antagonists (n=1)
Q2 2025	Foreign bodies/toys/misc (n=25)	Vitamins (n=16)
	Plants (n=13)	Dietary Supplements/herbals/homeopathic (n=13)
	Household cleaning substances (n=8)	Analgesics (n=3)
	Cosmetics and personal care products (n=7)	Elecrolytes and minerals (n=3)
	Pesticides (n=7)	Antimicrobials; Gastrointestinal prep (n=2)
Q3 2025	Cosmetics and personal care products (n=17)	Vitamins (n=5)
	Household cleaning substances (n=12)	Eye/ear/nose/throat preparations (n=3)
	Arts/crafts/office supplies (n=11)	Antimicrobials (n=3)
	Foreign bodies/toys/misc (n=10)	Analgesics; Veterinary drugs (n=2)
	Plants (n=9)	Electrolytes and minerals; Topical preparations (n=2)
Q4 2025	Foreign bodies/toys/misc (n=27)	Electrolytes and minerals (n=7)
	Cosmeics and personal care products (n=16)	Analgesics (n=3)
	Arts/crafts/office supplies (n=12)	Dietary supplements/herbals/homeopathic (n=3)
	Heavy metals (n=10)	Topical preparations (n=3)
	Household cleaning substances (n=8)	Antidepressants; Antimicrobials (n=1)

20-44 years of age		
Q1 2025	Household cleaning substances (n=115)	Antidepressants (n=192)
	Alcohols (n=91)	Analgesics (n=181)
	Chemicals (n=83)	Sedative/hypnotics/antipsychotics (n=168)
	Fumes/gases/vapors (n=41)	Anticonvulsants (n=109)
	Cosmetics and personal care products (n=39)	Antihistamines (n=82)
Q2 2025	Household cleaning substances (n=133)	Antidepressants (n=228)
	Alcohols (n=79)	Analgesics (n=185)
	Chemicals (n=72)	Sedative/hypnotics/antipsychotics (n=181)
	Pesticides (n=42)	Antihistamines (n=106)
	Fumes/gases/vapors (n=39)	Cardiovascular drugs (n=103)
Q3 2025	Household cleaning substances (n=114)	Antidepressants (n=269)
	Alcohols (n=94)	Analgesics (n=215)
	Chemicals (n=80)	Sedative/hypnotics/antipsychotics (n=166)
	Pesticides (n=52)	Cardiovascular drugs (n=132)
	Cosmetics and personal care prodcuts (n=43)	Antihistamines (n=107)
Q4 2025	Household cleaning substances (n=148)	Antidepressants (n=335)
	Alcohols (n=118)	Analgesics (n=276)
	Chemicals (n=78)	Sedative/hypnotics/antispychotics (n=210)
	Fumes/gases/vapors (n=53)	Cardiovascular drugs (n=126)
	Cosmetics and personal care products (n=41)	Stimulants and street drugs (n=101)
45-64 years of age		
Q1 2025	Alcohols (n=50)	Antidepressants (n=107)
	Household cleaning substances (n=38)	Analgesics (n=102)
	Chemicals (n=31)	Cardiovascular drugs (n=95)
	Cosmetics and personal care products (n=18)	Sedative/hypnotics/antipsychotics (n=68)
	Fumes/gases/vapors (n=14)	Anticonvulsants (n=45)
Q2 2025	Household cleaning substances (n=54)	Cardiovascular drugs (n=108)
	Alcohols (n=41)	Sedative/hypnotics/antipsychotics (n=102)
	Pesticides (n=33)	Analgesics (n=95)
	Chemicals (n=28)	Antidepressants (n=92)
	Cosmetics and personal care products (n=21)	Anticonvulsants (n=69)
Q3 2025	Alcohols (n=69)	Antidepressants (n=133)
	Household cleaning substances (n=54)	Analgesics (n=114)
	Chemicals (n=28)	Sedative/hypnotics/antipsychotics (n=105)
	Pesticides (n=21)	Cardiovascular drugs (n=103)
	Cosmetics and personal care products (n=18)	Anticonvulsants (n=70)
Q4 2025	Alcohols (n=59)	Analgesics (n=149)
	Household cleaning substances (n=58)	Antidepressants (n=147)
	Chemicals (n=30)	Cardiovascular drugs (n=144)
	Cosmetics and personal care products (n=30)	Sedative/hypnotics/antispychotics (n=128)
	Fumes/gases/vapors (n=21)	Hormones an dhormone antagonists (n=68)

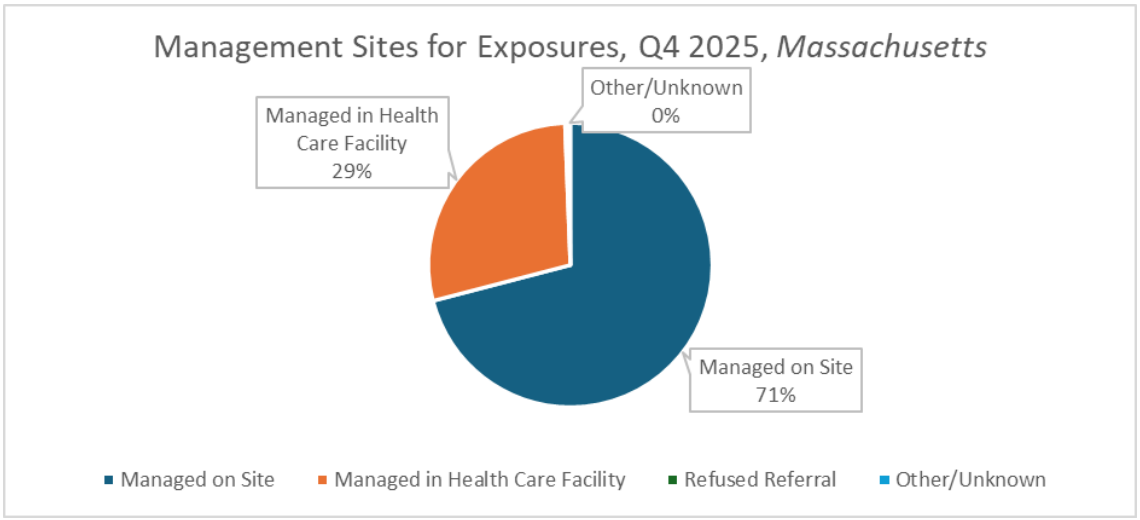
65-74 years of age		
Q1 2025	Household cleaning substances (n=21)	Analgesics (n=51)
	Cosmetics and personal care products (n=9)	Cardiovascular drugs (n=46)
	Plants (n=4)	Sedative/hypnotics/antipsychotics (n=34)
	Pesticides (n=4)	Antidepressants (n=31)
	Alcohols (n=4)	Anticonvulsants (n=22)
Q2 2025	Household cleaning substances (n=27)	Cardiovascular drugs (n=94)
	Alcohols (n=14)	Analgesics (n=52)
	Plants (n=11)	Sedative/hypnotics/antipsychotics (n=44)
	Cosmetics and personal care products (n=10)	Hormones and hormone antagonists (n=42)
	Chemicals; Pesticides (n=8)	Antidepressants (n=35)
Q3 2025	Household cleaning substances (n=26)	Cardiovascular drugs (n=87)
	Alcohols (n=10)	Analgesics (n=44)
	Pesticides (n=9)	Antidepressants (n=39)
	Cosmetics and personal care products (n=8)	Hormones and hormone antagonists (n=35)
	Chemicals; Plants (n=6)	Anticonvulsants (n=29)
Q4 2025	Household cleaning substances (n=18)	Cardiovascular drugs (n=104)
	Cosmetics and personal care products (n=13)	Antidepressants (n=63)
	Pesticides (n=10)	Analgesics (n=58)
	Alcohols (n=10)	Sedative/hypnotics/antipsychotics (n=49)
	Chemicals (n=6)	Hormones and hormone antagonists (n=34)
75-84 years of age		
Q1 2025	Cosmetics and personal care products (n=14)	Cardiovascular drugs (n=78)
	Household cleaning substances (n=5)	Analgesics (n=31)
	Infectious and Toxin-Mediated Diseases (n=5)	Antidepressants (n=22)
	Heavy Metals (n=3)	Hormones and hormone antagonists (n=21)
	Fumes/gases/vapors (n=3)	Anticoagulants (n=15)
Q2 2025	Household cleaning substances (n=13)	Cardiovascular drugs (n=72)
	Pesticides (n=5)	Analgesics (n=25)
	Alcohols (n=4)	Hormones and hormone antagonists (n=23)
	Foreign bodies/toys/misc (n=3)	Other Misc. Drugs (n=22)
	Fumes/gases/vapors; Essential oils (n=3)	Anticonvulsants (n=20)
Q3 2025	Cosmetics and personal care products (n=18)	Cardiovascular drugs (n=91)
	Household cleaning substances (n=12)	Hormones and hormone antagonists (n=37)
	Pesticides; Plants (n=6)	Analgesics (n=31)
	Foreign bodies/toys/misc; Alcohols (n=4)	Anticoagulants (n=26)
	Paints and stripping agents (n=4)	Antidepressants (n=20)
Q4 2025	Household cleaning substances (n=16)	Cardiovascular drugs (n=110)
	Cosmetics and personal care products (n=12)	Analgesics (n=43)
	Arts/crafts/office supplie (n=5)	Hormone and hormone antagonists (n=39)
	Pesticides (n=4)	Antidepressants (n=31)
	Alcohol (n=4)	Sedative/hypnotics/antipsychotics (n=26)

85 and older		
Q1 2025	Household cleaning substances (n=3)	Cardiovascular drugs (n=39)
	Chemicals (n=2)	Analgesics (n=21)
	Infectious and Toxin-Mediated Diseases (n=1)	Other Misc. Drugs (n=15)
	Hydrocarbons; Essential Oils (n=1)	Diuretics (n=10)
	Cosmetics and personal care products; Arts/Crafts/office supplies (n=1	Hormones and hormone antagonists (n=8)
Q2 2025	Cosmetics and personal care products (n=7)	Cardiovascular drugs (n=32)
	Household cleaning substances (n=6)	Analgesics (n=10)
	Infectious and Toxin-Mediated Diseases (n=2)	Antimicrobials (n=8)
	Essential Oils (n=2)	Anticonvulsants (n=6)
	Pesticides; Plants; Chemicals; Alcohol (n=1)	Diuretics; GI preparations; Hormones and hormone antagonists (n=5)
Q3 2025	Household cleaning substances (n=6)	Cardiovascular drugs (n=40)
	Cosmetics and personal care products (n=5)	Analgesics (n=23)
	Pesticides (n=3)	Antidepressants (n=13)
	Arts/crafts/office supplie (n=2)	Hormones and hormone antagonists (n=13)
	Other/unknown nondrug substances (n=2)	Anticoagulants (n=11)
Q4 2025	Household cleaning substances (n=11)	Cardiovascular drugs (n=57)
	Cosmetics and personal care products (n=7)	Analgesics (n=19)
	Plants (n=2)	Antidepressants (n=16)
	Chemicals (n=2)	Anticoagulants (n=15)
	Alcohols; arts/crafts/office supplies; Batteries (n=1)	Hormones and hormone antagonists (n=13)
Unknown adults		
Q1 2025	Household cleaning substances (n=166)	Analgesics (n=86)
	Cosmetics and personal care products (n=70)	Antidepressants (n=56)
	Fumes/gases/vapors (n=59)	Hormones and hormone antagonists (n=50)
	Chemicals (n=49)	Topical preparations (n=49)
	Foreign bodies/toys/misc (n=38)	Cardiovascular drugs (n=43)
Q2 2025	Household cleaning substances (n=143)	Cardiovascular drugs (n=58)
	Pesticides (n=79)	Analgesics (n=51)
	Cosmetics and personal care products (n=64)	Hormones and hormone antagonists (n=50)
	Fumes/gases/vapors (n=54)	Antimicrobials (n=42)
	Chemicals (n=47)	Antidepressants (n=41)
Q3 2025	Household cleaning substances (n=226)	Analgesics (n=85)
	Pesticides (n=112)	Hormones and hormone antagonists (n=71)
	Cosmetics and personal care products (n=85)	Cardiovascular drugs (n=64)
	Fumes/gases/vapors (n=70)	Antidepressants (n=59)
	Plants (n=62)	Topical preparations (n=54)
Q4 2025	Household cleaning substances (n=233)	Analgesics (n=141)
	Cosmetics and personal care products (n=89)	Antidepressants (n=116)
	Pesticides (n=69)	Cardiovascular drugs (n=94)
	Foreign bodies/toys/misc (n=68)	Hormones and hormone antagonists (n=71)
	Fumes/gases/vapors (n=68)	Topical preparations (n=69)

Unknown/Missing age		
Q1 2025	Household cleaning substances (n=8)	Stimulants and street drugs (n=3)
	Fumes/gases/vapors (n=5)	Hormones and hormone antagonists; anticonvulsants; anticholinergic dru
	Foreign bodies/toys/misc (n=4)	Eye/ear/nose/throat preparations; analgesics (n=1)
	Food products/food poisoning (n=3)	Electrolytes and minerals; antidepressants (n=1)
	Bites and envenomations; Chemicals; Cosmetics and Personal Care Prc	Cardiovascular drugs; Asthma therapies (n=1)
Q2 2025	Cosmetics and personal care products (n=5)	Cold and cough preparations (n=3)
	Fumes/gases/vapors (n=4)	Antihistamines (n=2)
	Household cleaning substances (n=2)	Antidepressants (n=2)
	Bites and envenomations (n=2)	Analgesics; Veterinary drugs (n=1)
	Foreign bodies/toys/misc; Unknown/nondrug substances (n=2)	Eye/earn/nose/throat preparations; Antimicrobials (n=1)
Q3 2025	Chemicals (n=5)	Sedative/hypnotics/antipsychotics (n=2)
	Pesticides (n=4)	Analgesics; antidepressants (n=1)
	Household cleaning substances (n=2)	Dietary Supplements/herbals/homeopathic; Topical preparations (n=1)
	Alcohols (n=2)	Hormones and hormone antagonists; Vitamins (n=1)
	Unknown/nondrug substances (n=2)	Unknown drugs; Other misc drugs (n=1)
Q4 2025	Arts/crafts/office supplies (n=16)	Cardiovascular drugs (n=2)
	Foreign bodies/toys/misc (n=2)	Antimicrobials (n=2)
	Pesticides (n=2)	Hormones and hormone antagonists (n=2)
	Cosmetics and personal care products (n=2)	Veterinary drugs (n=2)
	Buildings and construction products (n=2)	

Management Site

The majority of exposure calls in Q4 2025 were managed on-site (71%) and did not require treatment at a health care facility, compared to 29% of exposure calls that were treated at a health care facility, illustrating the reduction in unnecessary emergency room and primary care provider visits.

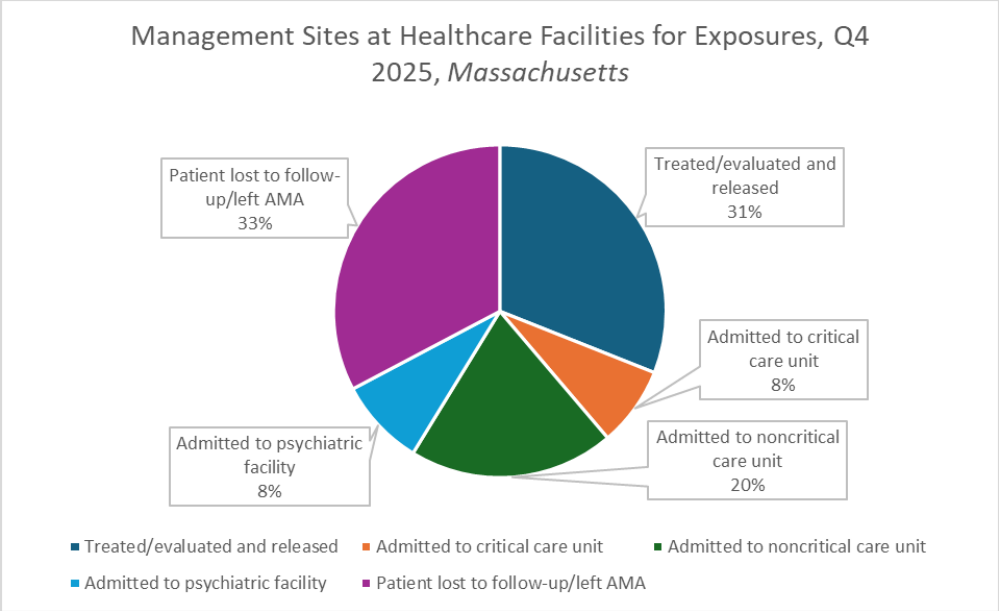


Management Sites for Exposures, Massachusetts

	Q4 2024 Calls (n)	Q1 2025 Calls (n)	Q2 2025 Calls (n)	Q3 2025 Calls (n)	Q4 2025 Calls (n)	2025 Total (n)
Managed on Site	6,056	5,882	6,119	6,775	7,142	**25,918**
Managed in Health Care Facility	2,482	2,397	2,649	2,952	2,863	**10,861**
Refused Referral	36	43	30	31	44	**148**
Other/Unknown	14	25	33	27	17	**102**
Total Exposures	8,588	8,347	8,831	9,785	10,066	**37,029**

Management Sites at Healthcare Facilities

In Q4 2025, 2,863 exposures were managed at healthcare facilities. Of these, about a third were treated/evaluated and released, and about another third were lost to follow-up and left against medical advice (AMA).

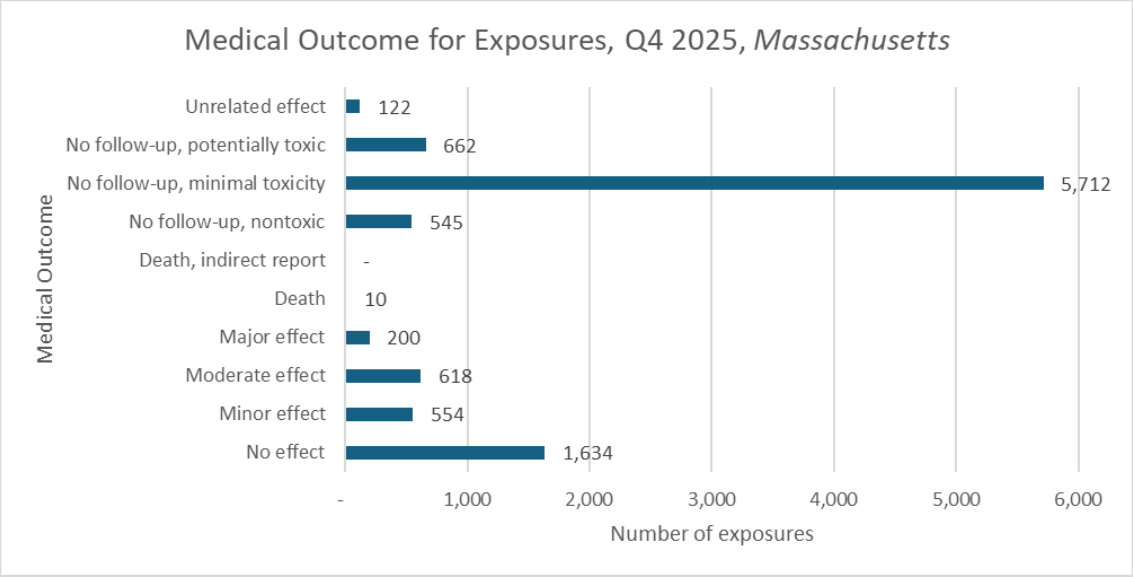


Management Sites at Healthcare Facilities	Q1 2025 (n)	Q2 2025 (n)	Q3 2025 (n)	Q4 2025 (n)	2025 Total (n)
Treated/evaluated and released	749	884	974	888	**3,495**
Admitted to critical care unit	185	215	262	222	**884**
Admitted to noncritical care unit	452	456	465	572	**1,945**
Admitted to psychiatric facility	263	278	278	244	**1,063**
Patient lost to follow-up/left AMA	748	816	973	937	**3,474**
Unspecifed level of care	-	-	-	-	**-**
Total: Managed in healthcare facility	2,397	2,649	2,952	2,863	**10,861**

Medical Outcome

The total number of exposures resulting in deaths for Q4 2025 was 10 (0.1%). 16.2% of total exposures resulted in no effect, 5.5% of exposures were classified as minor effect, 6.1% of exposures were categorized as moderate effect, and 2.0% of exposures were categorized as major effect. There was no follow-up for 5.4% of exposures as they were judged non-toxic. There was no follow-up for 56.8% of exposures that were judged to be minimally toxic nor for 6.6% of exposures that were judged to be potentially toxic.

Medical Outcome	Q4 2024 (n)	Q1 2025 (n)	Q2 2025 (n)	Q3 2025 (n)	Q4 2025 (n)	2025 Total
No effect	1,309	1,251	1,376	1,366	1,634	**5,627**
Minor effect	566	479	463	528	554	**2,024**
Moderate effect	579	553	628	653	618	**2,452**
Major effect	193	190	201	241	200	**832**
Death	6	7	10	7	10	**34**
Death, indirect report	-	-	-	-	-	**-**
No follow-up, nontoxic	509	459	461	423	545	**1,888**
No follow-up, minimal toxicity	4,735	4,703	4,923	5,761	5,712	**21,099**
No follow-up, potentially toxic	580	569	656	685	662	**2,572**
Unrelated effect	104	122	105	117	122	**466**
Total exposures	8,581	8,333	8,831	9,785	10,066	**37,015**



Trends

Nitrous Oxide Exposures

There is a national trend of exposures to unregulated (non-cannabinoid) psychoactive substances including nitrous oxide.[1] Nitrous oxide is widely available and being sold online and at retailers.[2] For MARI PC, there has been a 333.33% increase in exposures to nitrous oxide from 2019 to 2024. However, 2025 had similar numbers compared to 2023 (n= 7).

Trend	2019	2020	2021	2022	2023	2024	2025
Nitrous Oxide Exposures	3	1	6	5	7	13	7

[1]Devitt, S. (2025, February 6). *America's Poison Centers® Annual Report Highlights the Latest Poisoning Trends Across U.S. Poison Centers*. America's Poison Centers - America's Poison Centers® Annual report highlights the latest poisoning trends across U.S. Poison Centers. https://poisoncenters.org/news-alerts/13459961

[2]Food and Drug Administration. (2025, June 4). *FDA Advises Consumers Not to Inhale Nitrous Oxide Products*. U.S. Food and Drug Administration. https://www.fda.gov/food/alerts-advisories-safety-information/fda-advises-consumers-not-inhale-nitrous-oxide-products

Vitamin A Exposures

There is a national trend of increased vitamin A exposures in children during measles outbreaks.[3] Recent reports suggest people are using Vitamin A or Cod Liver Oil to prevent measles infection.[3] In Q1 2025, national data shows there have been 86 pediatric vitamin A exposures reported to U.S. Poison Centers, which is a 38.7% increase compared to Q1 2024.[3] For MARI PC, in Q1 2025 in Massachusetts, there have been 4 pediatric vitamin A exposures, which is a significant increase compared to this same quarter last year.

Trend	Q1 2024	Q1 2025
Pediatric Vitamin A Exposures	0	4

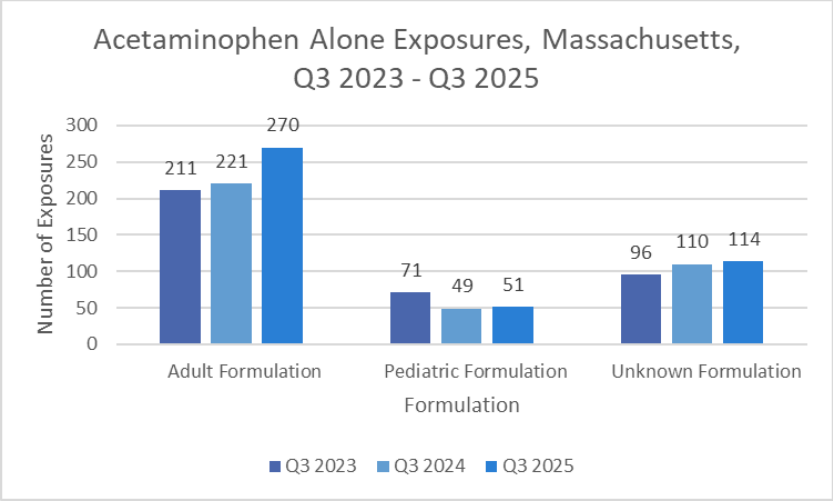
[3]Devitt, S. (2025, April 7). *Poison Centers Observe Increased Vitamin A Exposures in Children During Measles Outbreak*. America's Poison Centers. *https://poisoncenters.org/news-alerts/13484508*

Acetaminophen Exposures

MARI PC looked at acetaminophen exposures in Quarter 3 over the past three years (2023 through 2025). Exposures in adult formulation have slightly increased over the three-year period, with a 22.2% increase from Q3 2024 to Q3 2025. Information calls about acetaminophen have remained consistent through the years. The percentage of adult formulation exposures remain consistent in terms of gender throughout the three-year period (about 60-65% female exposures and about 35-40% male exposures).

This varies from national data which reports that there is no national increase in acetaminophen related exposures in Q3 of 2025 compared to the same period in 2024.[4] Similar to local data, national trends also report more acetaminophen exposures among females (61%).[4]

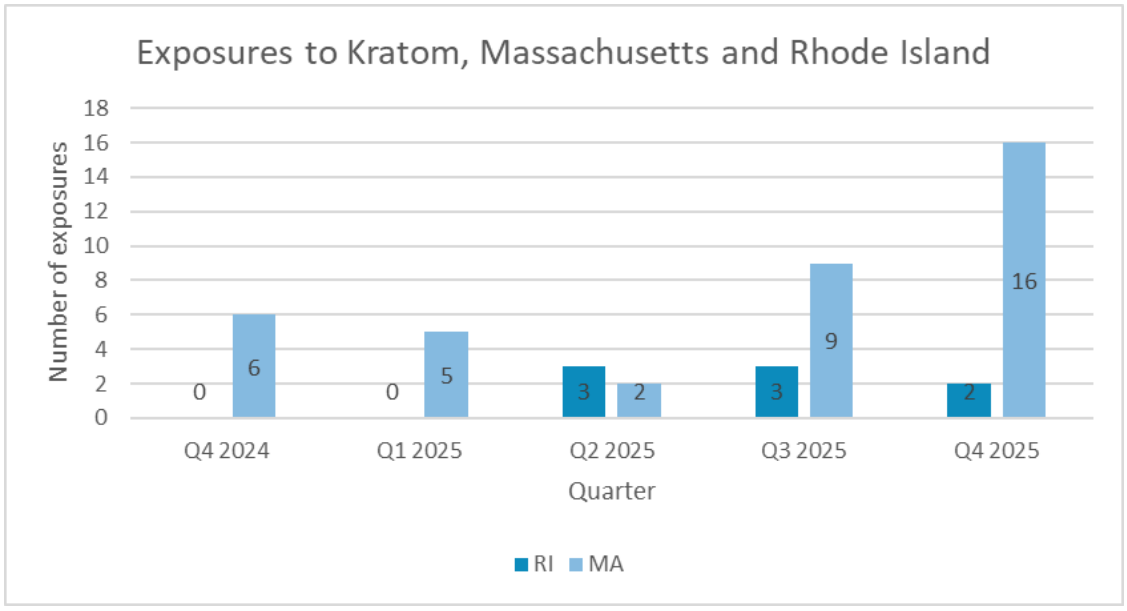
Trend	Q3 2023	Q3 2024	Q3 2025
Acetaminophen Alone Exposures			
Adult Formulation	211	221	270
Pediatric Formulation	71	49	51
Unknown Formulation	96	110	114
Total Acetaminophen Alone Information Call	2	3	2



[4]Maloney, M. (2025, October 23). *U.S. Poison Centers Report No National Increase in Acetaminophen Exposures*. America's Poison Centers. *https://poisoncenters.org/news-alerts/13555295*

Kratom Exposures

The graph below illustrates the number of exposures to kratom per quarter in both Massachusetts and Rhode Island. There has been a significant increase in exposures in Massachusetts from Q4 2024 to Q4 2025 (167% increase).



Educational Outreach

Materials Distributed

The data below reflects the 3,580 total educational materials distributed throughout Massachusetts in Q4 2025. All materials were in English except 15 Spanish brochures, 40 Portuguese brochures, 20 Haitian-Creole brochures, 20 Arabic brochures, and 650 Spanish stickers. These materials were given to various organizations, including, but not limited to: pediatric health care centers/hospitals, community health centers, child care providers, public schools, community-based organizations, libraries, WIC nutrition program, senior housing communities, and more, to hit a target audience of seniors, children ages 0-4 years old, children ages 0-19 years old, and those who are classified as low-income.

In total, in 2025, MARIPC distributed 22,478 educational materials throughout Massachusetts and Rhode Island.

Type of Agency	Name of Organization	Intended Audience	Outreach: Email or Letter	State	Material Distribution Date	English Brochures Distributed	Spanish Brochures Distributed	Other Language Brochures Distributed	English Magnets Distributed	English Stickers Distributed	Spanish Stickers Distributed	Magnifiers Distributed	Bags	Misc Distributed
Health Center/Clinic	East Boston Neighborhood Health Center	Patients	In person	MA	10/8/2025	100				100				
State/Gov't Health Center	North Attleborough Board of Health	Community	Email	MA	10/17/2025	50	5	10 Portuguese, 10 Haitian-Creole, 10 Arabic	100			10		50 Bookmarks; 10 Plastic Disposable Syringe; 5 Poison Look Alike Poster
Hospital	Sturdy Health - LDRP	Labor and Delivery Patients	Fax	MA	10/17/2025	100								
School of Nursing	Anna Maria College	Pediatric Patients in ER	Fax	MA	10/17/2025	5			50	20				
Healthcare Provider	Middleboro Pediatrics	Pediatric Patients	Fax	MA	10/17/2025				200					
Municipal Board of Health	Billerica Board of Health	Young Parents for Community Baby Shower	Email	MA	10/17/2025	300	5		400					
School	Stetson School	Students	Email	MA	10/17/2025				50	100	200			
Public Service	Ashfield Fire Department	Community	email	MA	11/17/2025	150	5	10 Portuguese, 10 Haitian Creole, 10 Arabic	150	100	200			30 Bookmarks
School District	Hampden Wilbraham Regional School	Students	Email	MA	11/17/2025	10			25	0				
Hospital; Community Organization	Injury Prevention Center at Hasbro Children's Hospital	Patients and Families	Email	RI	11/17/2025				200		100			
Child Care Provider	Northampton Area Pediatrics	Pediatric Patients	Fax	MA	11/17/2025				150		50			
Hospital	MiraVista	Patients	email	MA	11/17/2025				25					
State/Gov't Health Center	Martha's Vineyard Community Services	Community	fax	MA	12/5/2025	10		20 Portuguese	100					20 Pencils
Healthcare Provider	Umass Amherst Nursing	Students and Community	Email	MA	12/5/2025				200		100			
Hospital	MiraVista	Patients	email	MA	12/5/2025					25				

Educational Trainings

The data below reflects the educational presentations conducted in 2025, including Q4 2025 in Massachusetts. Pre and post tests surveys were given, targeting community leaders and others. 100% of participants said they strongly agree or agree that they feel equipped with the understanding and knowledge to share poison safety information and resources with families in the community. After the presentation, 100% of participants said they strongly agree or agree that they feel confident in calling the hotline. In total, about 80 people, including community leaders and EMS providers, who will share with their own organization, were directly educated and engaged throughout the quarter.

In total, in 2025, MARIPC conducted 26 outreach events, presentations, and trainings throughout Massachusetts and Rhode Island, reaching over 1,222 community leaders and residents. Further information about these events are found below.

Date	Training/Presentation Name	Topic	Audience	Location	Attendance Total (estimate)
3/11/2025	Health Fair	Everett Council on Aging Health Fair	Older Adults	Everett Senior Center	300 (personally engaged/educated ~90 people)
3/17/2025	Tabling for Awareness	NPPW	Parents, families, children, HCP	Boston Children's Hospital	personally engaged/educated ~60 people
3/18/2025	State House Briefing	NPPW	Government	Massachusetts State House	21
3/20/2025	Poison Centers for School-Based HCP	Webinar; NPPW	School HCP	Zoom; MA & RI	46 people registered; 36 people attended
3/21/2025	Tabling for Awareness	NPPW	Parents, families, children, HCP	Boston Children's Hospital	personally engaged/educated ~50 people
4/8/2025	Poison Prevention Education - Community Connections Coalition	Statewide Coordinators' Meeting	Community providers/leaders, managers and leadership of Family Resource Centers, Department of Children and Families	UMass in Shrewsbury, MA	25
4/10/2025	Community Resource Fair	Lowell Public School District	Children, families, students	Lowell, MA (Lowell High School)	personally engaged/educated 83 people
4/11/2025	Poison Prevention Education - WIC Nutritionist Workgroup Meeting	WIC Nutritionist Workgroup Meeting	Senior Nutritionists who oversee the nutrition staff at the 31 local WIC centers	Zoom; MA	34
5/13/2025	Beverly Council on Aging Informational Table	Poison Safety for Older Adults	Older Adults	Beverly, MA	personally engaged/educated 25 people
5/16/2025	Community Baby Shower	Poison Prevention for Families, Women, and Caregivers	Women and Families with small infants or expecting children	Roxbury Branch of the Boston Public Library	personally engaged/educated ~30 people
5/20/2025	Marshfield Council on Aging Health Fair	Poison Safety for Older Adults	Older Adults	Marshfield, MA	personally engaged/educated 77 people
5/22/2025	Health and Wellness Resource Fair for Older Adults	Poison Safety for Older Adults	Older Adults	Mystic Valley YMCA in Malden, MA	personally engaged/educated 54 people
6/4/2025	Wood River Health - Community Health Center	Poison Safety to RI Community	Patients including residents of small mill villages and farms & members of the Narragansett Indian Tribes & RI community	Westerly, RI	personally engaged/educated 57 people
6/5/2025	South Shore Public Health Collaborative Summer Health Fair	Poison Prevention in the Summer for All Ages	All ages of the community	Cohasset, MA	personally engaged/educated ~20 people
6/9/2025	Tabling for Awareness	Poison Prevention to patients, families, children, and healthcare staff	Poison Prevention to patients, families, children, and healthcare staff	Boston Children's Hospital	personally engaged/educated ~80 people
6/10/2025	Tabling for Awareness	Poison Prevention to patients, families, children, and healthcare staff	Poison Prevention to patients, families, children, and healthcare staff	Brigham and Women's Hospital	personally engaged/educated ~50 people
6/16/2025	WIC Family Support Coordinators Meeting Presentation	Poison Prevention for Families, Women, and Caregivers	Poison Prevention for Families, Women, and Caregivers	Framingham, MA	13
6/18/2025	WIC Quarterly Meeting Presentation	Poison Prevention for Families, Women, and Caregivers	Poison Prevention for Families, Women, and Caregivers	Framingham, MA	33
6/24/2025	Medford Council on Aging Presentation	Poison Safety for Older Adults	Older Adults	Medford, MA	~25
6/25/2025	The Arc Rhode Island Presentation	Poison Safety for Individuals with IDDs	General Community, caretakers of & individuals with IDDs	Virtual	5 attended & webinar recording be sent to all members
7/15/2025	Elderly Housing Development & Operations Corporation Presentation - South Boston	Poison Safety for Older Adults	Older Adults living in low-income housing option who speak a variety of languages	South Boston, MA	~20
7/17/2025	Elderly Housing Development & Operations Corporation Presentation - Charlestown	Poison Safety for Older Adults	Older Adults living in low-income housing option who speak a variety of languages	Charlestown, MA	~15
7/30/3025	RIDOH Home Visitors Presentation	Poison Safety for new parents/families	Family Visitors	Rhode Island	6 attended & recording will be shared with all Family Visitors across all agencies
8/29/2025	Mission Hill Health Movement / Parker Hill Branch of the Boston Public Library Informational Table	Poison Safety for All Ages	All ages of the community	Roxbury, MA	~15
9/22/2025	Safe Kids Boston	Poison Safety for All Ages, including children; Boston-specific data	Community leaders throughout Boston	Virtual	8 attended live; will share the presentation with various other groups
11/12/2025	Poison Help: A Valuable Resource for EMS Providers	EMS Providers	MGB Cooley Dickinson; For any EMS/Paramedic Providers across Western MA; presented at the monthly Morbidity and Mortality Conference	Virtual	~80 attended live

Social Media Analytics

The data below reflects the number of interactions the public had with MARI PC's Facebook and X (previously known as Twitter) social media accounts in Q4 2025.

	X (previously known as Twitter)			Facebook	
	Number of Tweets/ Posts	Number of Impressions	Number of Current Followers	Followers	Page Reach
2025 Total	**225**	**9,621**	**369 (+12)**	**371 (+16)**	**9,949**
Q4 2025	54	2,340	369 (-1)	371 (+4)	2,444
Q3 2025	58	2,172	370 (+2)	367 (+2)	2,347

Q2 2025	54	2,600	368 (+7)	365 (+9)	2,398
Q1 2025	59	2,509	361 (+4)	356 (+1)	2,760
2024	7	312	357 (+19)	355 (+15)	n/a

Newsletter Analytics

Seasonal Newsletters			
	Newsletters Sent	**Open Rate**	**Click Rate**
Q4 2025	1	54.5%	11.6%
Q3 2025	1	63.9%	17.5%
Q2 2025	1	75.4%	7.7%
Q1 2025	0	n/a	n/a
Non-Profit Industry Average	*n/a*	*40.04%*	*3.27%*

Staff Publications

Meyer J, Burns MM. Current recommendations in the diagnosis and management of cannabinoid hyperemesis syndrome. Curr Opin Pediatr. 2025 Jun 1;37(3):240-243. doi: 10.1097/MOP.0000000000001464. Epub 2025 Apr 1. PMID: 40172286.

Simpson MD, Tang KB, Donnino MW, Chai PR, Culbreth R, Campleman S, Wax P, Manini AF, Burns MM; Toxicology Investigators Consortium. Clinical Factors Associated With Ventricular Dysrhythmia in Emergency Department Patients With Severe QTc Prolongation After Drug Overdose. Acad Emerg Med. 2025 Jun 10. doi: 10.1111/acem.70083. Epub ahead of print. PMID: 40492421.

Watson CJ, Monuteaux MC, Tang KB, Burns MM. Variable Toxicity by β-Blocker Class in Intentional Overdoses Reported To U.S. Poison Centers. J Med Toxicol. 2025 Oct;21(4):409-413. doi: 10.1007/s13181-025-01088-3. Epub 2025 Jul 31. Erratum in: J Med Toxicol. 2025 Oct;21(4):446. doi: 10.1007/s13181-025-01094-5. PMID: 40745147; PMCID: PMC12511491.

Sheykhsoltan M, Drobina J, Burns MM, Fox ER, Mazer-Amirshahi M. Drug Shortages for Prescription Amphetamine Derivatives. J Pediatr Pharmacol Ther. 2025 Apr;30(2):206-211. doi: 10.5863/1551-6776-30.2.206. Epub 2025 Apr 14. PMID: 40717757; PMCID: PMC12288551.

Tuttle MG, Montague AJ, Halmo LS, Burns MM. Prevention of Childhood Poisoning. Pediatr Clin North Am. 2025 Dec;72(6):1147-1161. doi: 10.1016/j.pcl.2025.08.003. PMID: 41193142.

Watson CJ, Monuteaux MC, Tang KB, Burns MM. Correction: Variable Toxicity by β-Blocker Class in Intentional Overdoses Reported to U.S. Poison Centers. J Med Toxicol. 2025 Aug 25. doi: 10.1007/s13181-025-01094-5. Epub ahead of print. Erratum for: J Med Toxicol. 2025 Jul 31. doi: 10.1007/s13181-025-01088-3. PMID: 40853536.

Watson CJ, Monuteaux MC, Tang KB, Burns MM. Variable Toxicity by β-Blocker Class in Intentional Overdoses Reported To U.S. Poison Centers. J Med Toxicol. 2025 Jul 31. doi: 10.1007/s13181-025-01088-3. Epub ahead of print. Erratum in: J Med Toxicol. 2025 Aug 25. doi: 10.1007/s13181-025-01094-5. PMID: 40745147.

Watson CJ, Monuteaux MC, Tang KB, Burns MM. Variable Toxicity by β-Blocker Class in Intentional Overdoses Reported To U.S. Poison Centers. J Med Toxicol. 2025 Oct;21(4):409-413. doi: 10.1007/s13181-025-01088-3. Epub 2025 Jul 31. Erratum in: J Med Toxicol. 2025 Oct;21(4):446. doi: 10.1007/s13181-025-01094-5. PMID: 40745147; PMCID: PMC12511491.

Glossary

- **Unintentional General:** All unintentional exposures not otherwise defined below.
  - **Environmental:** Any passive, non-occupational exposure that results from contamination of air, water, or soil. Environmental exposures are usually caused by human made contaminants.
  - **Occupational:** An exposure that occurs as a direct result of the person being on the job or in the workplace.
  - **Therapeutic error:** An unintentional deviation from a proper therapeutic regimen that results in the wrong dose, incorrect route of administration, administration to the wrong person, or administration of the wrong substance. Only exposures to medications or products used as medications are included. Drug interactions resulting from unintentional administration of drugs or foods which are known to interact are also included.
  - **Unintentional misuse:** Unintentional, improper or incorrect use of a non-pharmaceutical substance. Unintentional misuse differs from intentional misuse in that the exposure was unplanned or not foreseen by the patient.
  - **Bite/sting:** All animal bites and stings, with or without envenomation, are included.
  - **Food poisoning:** Suspected or confirmed food poisoning; ingestion of food contaminated with microorganisms is included.
  - **Unintentional unknown**: An exposure determined to be unintentional, but the exact reason is unknown.
- **Intentional General**
  - **Suspected suicidal:** An exposure resulting from the inappropriate use of a substance for reasons that are suspected to be self-destructive or self-harm.

- **Intentional misuse**: An exposure resulting from the intentional improper or incorrect use for reasons other than the pursuit of a psychotropic effect.
- **Intentional abuse:** An exposure resulting from the intentional improper or incorrect use where the patient was likely attempting to gain a high, euphoric effect or some other psychotropic effect, including recreational use of a substance for any effect.
- **Contaminant/tampering:** The patient is an unintentional victim of a substance that has been adulterated (either maliciously or unintentionally) by the introduction of an undesirable substance.
- **Malicious:** Patients who are victims of another person's intent to harm them.
- **Withdrawal**: Inquiry about or experiencing of symptoms from a decline in blood concentration of a pharmaceutical or other substance after discontinuing therapeutic use or abuse of that substance.

- **Adverse Reactions**
  - **Adverse Reaction Drug:** Unwanted effects due to an allergic, hypersensitivity, or idiosyncratic response to the active ingredient(s), inactive ingredient(s) or excipient of a drug, chemical, or other drug substance when the exposure involves the normal, prescribed, labeled or recommended use of the substance.
  - **Adverse Reaction Food**: Unwanted effects due to an allergic, hypersensitivity, or idiosyncratic response to a food substance.
  - **Adverse Reaction Other**: Unwanted effects due to an allergic, hypersensitivity, or idiosyncratic response to a substance other than drug or food.
  - **Unknown Reason:** Reason for the exposure cannot be determined or no other category is appropriate.
- **Medical Outcomes**
  - **No effect**: The patient did not develop any signs or symptoms as a result of the exposure.
  - **Minor effect:** The patient developed some signs or symptoms as a result of the exposure, but they were minimally bothersome and generally resolved rapidly with no residual disability or disfigurement. A minor effect is often limited to the skin or mucus membranes (e.g., self-limited gastrointestinal symptoms, drowsiness, skin irritation, first degree dermal burn, sinus tachycardia without hypotension, and transient cough).
  - **Moderate effect:** The patient exhibited signs or symptoms as a result of the exposure that were more pronounced, more prolonged, or more systemic in nature than minor symptoms. Usually, some form of treatment is indicated. Symptoms were not life-threatening, and the patient had no residual disability or disfigurement (e.g., corneal abrasion, acid-base disturbance, high fever, disorientation, hypotension that is rapidly responsive to treatment, and isolated brief seizures that respond readily to treatment).
  - **Major effect:** The patient exhibited signs or symptoms as a result of the exposure that were life-threatening or resulted in significant residual disability or disfigurement (e.g., repeated seizures or status epilepticus, respiratory compromise requiring intubation, ventricular tachycardia with hypotension, cardiac or respiratory arrest, esophageal stricture, and disseminated intravascular coagulation).
  - **Death:** The patient died as a result of the exposure or as a direct complication of the exposure.
  - **Not followed, judged as nontoxic exposure:** No follow-up calls were made to determine the outcome of the exposure because the substance implicated was

nontoxic, the amount implicated was insignificant, or the route of exposure was unlikely to result in a clinical effect.

- **Not followed, minimal clinical effects possible:** No follow-up calls were made to determine the patient's outcome because the exposure was likely to result in only minimal toxicity of a trivial nature. (The patient was expected to experience no more than a minor effect.).
- **Unable to follow, judged as a potentially toxic exposure:** The patient was lost to follow-up, refused follow-up, or was not followed, but the exposure was significant and may have resulted in a moderate, major, or fatal outcome.
- **Unrelated effect:** The exposure was probably not responsible for the effect.

End of Report.