

Clandestine Methamphetamine Labs Frequently Asked Questions

FAQ #3 – How to Care for Children Removed from a Drug Endangered Environment

How should a child removed from a drug endangered environment be cared for?

All children removed from drug endangered environments need as much, if not more, love and kindness as any other child placed away from their biological home. Often children in drug endangered environments are witnesses to violence and may even be victims of neglect and abuse. Therefore, they need an environment that ensures as much stability, consistency and safety as possible. Like all children, above all, they need love, patience and compassion. Children removed from an environment where illegal substances are manufactured may have some special needs.

What signs and symptoms would a child likely display after being exposed to the environment containing a clandestine laboratory? These children are usually asymptomatic.

Children removed from homes where illegal drugs are being manufactured should be evaluated medically before being placed in care. If this has not occurred, they need to undergo an initial medical evaluation, followed by a complete physical (if not done at the time of the initial evaluation) within 24-48 hours of placement. Most of the children removed from these homes have normal initial medical evaluations. However, because of the potential chemical exposure the child may have had in the home from which they were removed, the caretaker should pay special attention to any respiratory symptoms (difficulty breathing, excessive cough, shortness of breath) as well as changes in mental status (confusion, excessive sleepiness, excessive hyperactivity). Although unlikely, if present these symptoms should be evaluated urgently by a medical provider. If the onset of symptoms occurs greater than 24 hours after the exposure, it likely unrelated to the clandestine laboratory though the child still should be medically evaluated.

Should I have concerns about a child that was removed from a drug endangered home that did not contain a clandestine lab?

These children should be cared for in the same manner as any child that is removed from their biologic home for any reason. All of these children need complete medical evaluations as required by the Department of Social Services. If the child exhibits any abnormal signs or symptoms prior to or following that evaluation, they need to be re-evaluated by a medical provider. Again, homes in which there is drug or alcohol use are often lacking the consistency which children need to thrive. Therefore, providing these children with an environment where there is consistency, compassion and kindness is critical for optimal development.

What should I do with the clothing of children removed from drug endangered environments?

All children that have been removed from homes containing clandestine labs should be decontaminated and dressed in clean clothing prior to placement. Therefore, their clothing is safe. If they have not been decontaminated, all clothing should be removed and discarded and they should be thoroughly washed with soap and water in a warm shower as soon as possible. Also, they should not come into your care with any personal items from their homes (e.g. toys, blankets, etc.) other than those provided by responders on scene or by medical professionals at evaluation. All clothing and personal items including toys contained in a home in which there was a clandestine lab are to be considered contaminated and need to be properly disposed of at the scene. There may be an exception for certain personal items (such as eyeglasses, but not contact lenses!) that may have been cleaned by the professionals on scene. These exceptions would need to be approved by the HAZMAT commander at the scene. The clothing and personal items of children removed from drug endangered environments that do not house clandestine labs should be safe. It is probably a good idea to wash all of the child's clothing once the child is received. Also, be aware that there have been many cases in which the child's caregiver has placed drugs and possibly needles/syringes in the child's toys, diaper bag, or other personal belongings in an effort to hide them. If you find anything suspicious, do not touch the item and call your local law enforcement agency or caseworker immediately.

Under what conditions are children addicted to methamphetamine? What are the symptoms? Will a child experience withdrawal?

It is difficult to know if children living in homes with methamphetamine use can actually become addicted to the drug. Some studies have shown that in homes where methamphetamine is manufactured up to half of the children living there test positive for the drug at the time of removal. In homes with heavy use, studies have shown about 10% of those children test positive for methamphetamine at removal. We do not know how many children actually get the drug into their system at some time while living in these homes. However, a positive screen does not equate with addiction, which is very hard to define in this setting. Symptoms of drug exposure may be rapid heart rate, high blood pressure, high body temperature, and agitation. All of these symptoms should have been assessed for during the initial medical evaluation and may be related to a serious medical condition unrelated to drug exposure. If the child was not evaluated medically before placement and is displaying these symptoms, they should be medically evaluated as soon as possible. There have been no adequately documented cases of true withdrawal in children environmentally exposed to drugs, unless the child actually ingested the drug, was clinically ill, and was evaluated at a medical facility. However, in cases of heavy use, methamphetamine is known to deplete dopamine levels in the brain, ultimately causing the user to become very sleepy and lethargic. If the child displays these symptoms, they should also be evaluated medically. It is possible that mood swings and unusual behavior may be related to the recent changes in the child's living status or underlying psychological or psychiatric illness and not drug exposure. Finally, there have been reports of caregivers giving children other drugs or medications such as sedatives or antihistamines in an effort to get them to sleep. Therefore, any child that begins to behave unusually or have unexplained symptoms should be evaluated medically. The physical manifestations of withdrawal in an infant are similar to those in an adult.

What behaviors would one expect to see in a child removed from a methamphetamine lab?

The behaviors displayed by these children vary greatly. As the specific environment to which the child was exposed are likely unknown in these children, it is important to use care in determining the level of supervision that these children may need to assure their safety and the safety of others in your home.

What symptoms would one expect to see in an infant that was exposed to methamphetamine before birth?

Infants exposed in utero to methamphetamine are typically very sleepy the first few weeks of life, often not even waking to feed. After the initial period of sleepiness, these infants then become very jittery and irritable, much like a cocaine-exposed infant. The drug can affect the development of any major organ system but these abnormalities would usually be detected at birth.

How would one care for an infant that is drug exposed before birth?

Certainly, you should speak with the infant's physician about concerns regarding a newborn's health, as there are many reasons why the child may be excessively sleepy or fussy. If other potentially serious causes are excluded, these infants need an environment that is peaceful and calming. If possible, turn the lights low when the infant is trying to rest. In the first few weeks of life, the baby may need to be awakened for feedings. After that time, try to reduce the amount of unneeded excessive stimulus in the infant's environment.

Does a child from a clandestine lab pose a toxic risk to me, my children or to other members of my family?

Absolutely not. Once the child removed from the lab has been decontaminated, he or she poses no toxic risk to other persons whatsoever. Depending upon the medical indications, viral studies for hepatitis and/or HIV may be warranted.

**Who should I contact if I have any questions about this
FAQ sheet?**

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