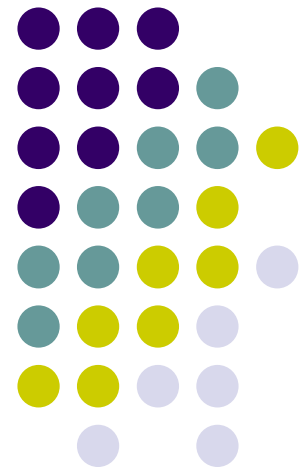


CLINICALLY RELEVANT DRUG INTOXICATIONS & INTERACTIONS

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DRUG INTOXICATIONS

(Basic principles)



- **stop** further poison **exposure** & **absorption**
- **start** poison **elimination**
- **counteract** poisoning with an **antidote**
- **correct** disorders with **symptomatic** therapy
- **maintain** **vital functions**
(consciousness, breathing, circulation, liver & kidney functions)
- **prevent** **complications**



Decontamination

(General principles)



- **surface decontamination**

- ✚ **skin, eyes** - remove contaminated clothing, rinse with water or saline (in eyes - 1 l each, apply anaesthetic)
- ✚ **inhalation - interrupt exposure** (apply oxygen)
- ✚ **gastric lavage** (contraindicated in unconscious patients, convulsions, in organic solvents & raw or refined oil products – risk of aspiration pneumonia)
- ✚ **sorbents - activated charcoal** (1 g/1 kg⁻¹, repeat after 1-2 hours, contraindicated in ileus)

- **elimination procedures**

- ✚ **forced diuresis** (in case the kidneys are the main excretion way)
- ✚ **haemodialysis** (applicable for low molecular weight, low albumin binding & water soluble substances)
- ✚ **haemoperfusion** (not affected by above mentioned properties)
- ✚ **peritoneal dialysis** (less effective than 2 previous methods)

Opioid analgesics

(*morphine, heroin*)



- **acute intoxication symptoms**

- ✚ dizziness, anxiety/euphoria, **miosis**

- ✚ face flush, itching

- ✚ drowsiness, conscience disturbances, **coma**

- ✚ ↓ GI motility, vomiting, nausea

- ✚ cyanosis, cell hypoxia, lung edema, respiratory **inhibition**/apnea – death

- **therapy**

- ✚ **antidote** - ***naloxone, nalorphine*** (***naltrexone*** - *in dependences*)

- ✚ **symptomatic therapy, vital function support**

Analgesics-antipyretics

(paracetamol)



- **acute intoxication symptoms**

- ✚ anorexia, nausea, vomiting – in first 24 h
- ✚ ↑ ALT, AST, ALP
- ✚ ↑ bilirubin, icterus
- ✚ encephalopathy, exitus
- ✚ rarely kidney failure

- **therapy**

- ✚ antidote - *N-acetylcysteine*
- ✚ must be applied up to first 12 h
- ✚ hemoperfusion is also effective

Analgesics-antipyretics

(salicylates - aspirine)



● acute intoxication symptoms

- ✦ hyperventilation ⇒ respiratory alkalosis ⇒ compensation & shift to metabolic acidosis
- ✦ vomiting, throat & stomach burning
- ✦ headache, vertigo, tinnitus
- ✦ sweating, thirst
- ✦ coma, cramps, hyperthermia, hypoglycemia - in severe intoxication
- ✦ uncoupling of oxidative phosphorylation (lactate production, lipolysis) ⇒
↑ acidosis ⇒ possible exitus in children
- ✦ CNS paralysis, cardiovascular colaps – exitus

● therapy

- ✦ no antidote available
- ✦ respiration support
- ✦ stomach lavage, charcoal
- ✦ prevention of acidosis & urine alcalisation
- ✦ bleeding control
- ✦ hemoperfusion is effective

Psychostimulants

(*amphetamine, metamphetamine, ephedrine*)



- **acute intoxication symptoms**

- ✚ euphoria, restlessness, anxiety, mydriasis, headache, convulsions
- ✚ hyperthermia, coma
- ✚ erythema, sweating, tremor, tachypnoe
- ✚ fasciculation, rigidity, dysrhythmia, MI, intracranial bleeding
- ✚ rhabdomyolysis & kidney failure

- **therapy**

- ✚ **no antidote available**
- ✚ **gastric lavage, sorbents**
- ✚ ***diazepam* & symptomatic therapy (tachycardia = β -blockers)**
- ✚ **assisted ventilation & forced diuresis**

Anxiolytics

(benzodiazepines)



- **acute intoxication symptoms**
 - + lethargy, speech problems
 - + hypothermia
 - + coma, respiratory arrest
 - + combination with alcohol !!!
 - + respiratory arrest in newborn – during delivery medication
- **therapy**
 - + symptomatic
 - + antidote – *flumazenil* (in case of coma)

AChE inhibitors

(organophosphates)



- **acute intoxication symptoms** (intoxication with endogenous ACh)

M-receptors

- ✦ anorexia, nausea, vomiting
- ✦ abdominal cramps, diarrhea
- ✦ bradycardia, bronchospasm, miosis
- ✦ salivation, bronchial secretion, sweating

N-receptors

- ✦ muscle, tremor, convulsions
- ✦ muscular weakness
- ✦ respiratory muscle paralysis

CNS

- ✦ confusion, irritability, coma, exitus

- **therapy**

- ✦ decontamination, charcoal (oral ingestion), ventilation
- ✦ antidote - *atropine*
- ✦ *oxims*
- ✦ *diazepam* (in case of cramps)

Antimuscarinics

(*atropine*)



- **acute intoxication symptoms**

- ✦ dry skin & mucosa, thirst, red face
- ✦ tachycardia & tachypnoe
- ✦ mydriasis, photophobia
- ✦ fever, urine retention, intestinal motility
- ✦ restlessness, muscle twitches, excitation, hallucinations
- ✦ ↑ BP, circulation failure (in severe intoxications)

- **therapy**

- ✦ stomach lavage & charcoal (oral ingestion)
- ✦ antidote - *physostigmin* 1-2 mg slow i.v. inj. (0,02-0,04 mg/kg in children)
- ✦ cathetrize urinary bladder
- ✦ *metoprolol* or *atenolol* slow i.v. inj. (in case of tachycardia)
- ✦ patient in a dark room

Anticoagulants

(warfarin)



- **acute intoxication symptoms**

- ✚ bleeding from different organs, mucosa, hematuria
- ✚ hematemesis, melena, petechiae, intracranial bleeding, hemorrhagic shock

- **therapy**

- ✚ **gastic lavage & activated charcoal**
- ✚ **prothrombin complex activity control**
- ✚ **antidote - *vitamin K*** (p.o. 10-20 mg 2x a day; 10-20 mg i.v. 2-4x a day in severe cases)
- ✚ ***plasma &/or concentrated coagulation factors* in case of severe bleeding & tranexamic acid** (competitively inhibits the activation of plasminogen to plasmin)

Anticoagulants

(heparine)



- **acute intoxication symptoms**
 - ✚ **bleeding**
 - ✚ **thrombocytopenia**
 - ✚ **antithrombin III consumption**
- **therapy**
 - ✚ **control thrombocytes, hemoglobin & serum electrolytes**
 - ✚ **antidote – *protamine sulfate* (in massive bleeding)**
 - ✚ **1 mg of protamine neutralizes 100 (to 150) I. U. of heparine**
 - ✚ **neutralizes also LMWH**

Alcohol

(*ethanol*)



- **acute intoxication symptoms**

- ✚ overall depressive effect
- ✚ mental confusion, stupor, coma, or person cannot be roused
- ✚ vomiting
- ✚ seizures
- ✚ slow breathing (fewer than eight breaths per minute)
- ✚ irregular breathing (10 seconds or more between breaths)
- ✚ hypothermia (low body temperature), bluish skin color, paleness

- **therapy**

- ✚ **no antidote** available
- ✚ fluids, glucose, Mg^{2+} , K^+ , thiamin
- ✚ acidobasis
- ✚ warming
- ✚ assisted ventilation
- ✚ stomach lavage (up to 30 min. after ingestion)
- ✚ hemodialysis, no hemoperfusion
- ✚ metabolic acidosis – *bikarbonate sodium*

Alcohol

(methanol)



- **acute intoxication symptoms**
 - ✚ metabolism - similar (slower) to *ethanol*
 - ✚ formaldehyde, formic acid
 - ✚ acidosis
 - ✚ optic nerv damage – blindness
- **therapy**
 - ✚ elimination of *methanol* residues
 - ✚ compensation of acidosis
 - ✚ *ethanol*
 - ✚ hemodialysis

Cardioglycosides

(*digoxin*)



- **acute intoxication symptoms**

- a) **moderate intoxication**

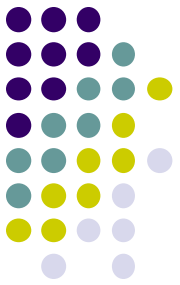
- ✚ anorexia, nausea, vomiting
- ✚ bradycardia
- ✚ headache

- b) **severe intoxication**

- ✚ disturbance of vision, disorientation
- ✚ diarrhea
- ✚ ventricular tachycardia, fibrillations
- ✚ SA & AV block

- **therapy**

- ✚ stop drug medication
- ✚ stomach lavage + charcoal
- ✚ antidote - **antibodies** - ***antidigoxin Fab*** (Digitalis-Antidot)
- ✚ ***potassium chloride***
- ✚ antidysrhythmics, Mg^{2+} (in case of dysrhythmias)
- ✚ **ECG & serum electrolyte control**

POISON/DRUG**ANTIDOTE**

paracetamol (*acetaminophen*)

***N*-acetylcysteine**

warfarin

vitamin K

opioids

naloxone

iron (& other heavy metals)

desferoxamine (other chelating agents)

benzodiazepines

flumazenil

ethylene glycol

ethanol or **fomepizole** & **thiamine**

methanol

ethanol or **fomepizole** & **folinic acid**

cyanide

amyl nitrite, **sodium nitrite** & **sodium thiosulfate**

magnesium

calcium gluconate

verapamil, **diltiazem**

calcium gluconate

β -blockers (*propranolol*, *sotalol*)

calcium gluconate and/or **glucagon**

isoniazid

pyridoxine

thallium

Prussian blue

antimuscarinics

cholinergics (& vice-versa)