

≈ ORAL PRESENTATIONS ≈

OP 007

From 2 PAM to No PAM: Has It Made Any Difference?**Bhalla A**, Mohan H, Singh S*Department of Internal Medicine, Post Graduate Institute Of Medical Education And Research,
Chandigarh. India 160012***Abstract**

Objectives: To study the effects of No PAM on mortality and morbidity in organo phosphorus compound poisoning.

Methods: This retrospective study was undertaken to evaluate the effects of No PAM strategy on morbidity and mortality over last 3 years and compare the results with previously reported studies from our institute. The study population included 137 cases admitted to PGIMER, Chandigarh, from January 2010 to October 2013. All patients with clinical features suggestive of organophosphorus compound poisoning were eligible for recruitment. Patients with a doubtful history of organ phosphorus poisoning and other pesticide / herbicide poisoning were excluded. clinical presentation, baseline laboratory parameters were noted at admission and every 48 hours. All patients received standard treatment (atropinization till dry lungs, benzodiazepines for seizures and ventilation for respiratory distress). Pralidoxime was not used in our study group. The primary outcome was in hospital mortality. these secondary outcomes noted were duration of hospital stay and intermediate syndrome.

Results: A total of 160 patients of organophosphate poisoning reported to the emergency during the study period, but 23 cases were excluded due to lack of complete data. Among these 53% were females and 47% were males. mean age was 27.14 years. Modes of poisoning were suicidal in 85% of cases and route of consumption was oral. dichloro and chlorpyrifos were the commonest compounds reported. mean interval between consumption and first aid was 130.6 minutes, mean interval for reporting to emergency was 665.5 minutes. Intermediate syndrome was noted in 14.8%. Duration of hospitalization was 9.9 days and mean duration of ventilation was 4.06 days. These findings are comparable to the reported mortality and morbidity from our center in the past.

Conclusions: The change in strategy from 2 PAM to No PAM at our institute has not significantly affected the morbidity and mortality at our institute in last 3 years.