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Cyproheptidine Poisoning: A Report Of 8 Cases

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Abstract

Objective: We report our experience with the pattern of presentation of eight cases of acute cyproheptidine poisoning cases presented on a single day to our emergency in PGIMER.

Methods: This prospective study evaluated a total of 8 young male patients with alleged history of cyproheptidine poisoning from common source. All these patients consumed cyproheptidine at the pharmaceutical industry, where they used to work, for experiencing a high. The clinical features, baseline laboratory parameters, duration of hospitalization, complications and outcome are presented here. The catagoriacal data is expressed as mean and median. The results are presented as percentage.

Results The mean age of patients was 26.6 years (range 22-32years, SD ± 3.62 years). Meantime of hospital stay was 6 days (range 5- 10days). Out of 8 patients 87.5% patients presented to emergency within mean time of 4.6 ± 1.27 hrs (range 4 - 6.4hrs) of accidental poisoning. One patient presented 22hrs later accidental consumption of cyproheptidine. All 8 patients presented with altered behavior in the form of aggressiveness, agitation and drowsiness. During hospital stay patient none of the patients had seizures, bleeding manifestation. One patient developed fever. No metabolic derangement was noted. Urine Toxicology screening was done in all. It was positive for opioids in all, 12.5% (1 patient) was positive for barbiturates and 12.5% (1 patient) was positive for Tetra Hydro Cannabinoids (THC). None of the patients were noted to ahve seizures or rigidity but one patient also had CK-NAC 4724.6mg/dl possibly due to extreme agitation and physical restraint

All patients managed conservatively, intially with gastric lavage followed by I.V fluids and short acting benzodiazepam (to control agitation). 50% (4 patients) recovered within 5 days and 37.5% (3 patients) recovered in 6 days of treatment. 12.5% (1 patient) took 10 days to completely recover. No serious complications were noted during hospitalization. On follow up all the patients are doing well.

Conclusions: To the best of our knowledge, this is the largest reported series of acute cyproheptidine poisoning in the word. Conservative management would suffice in majority of cases.

