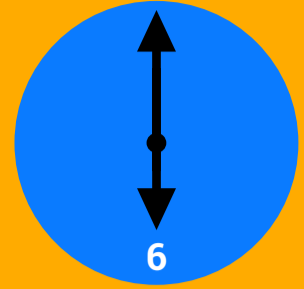
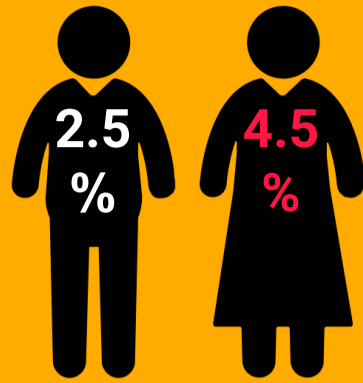


Could It Be Poison? - Little SMACC GOLD

5% of presentations to ED are with Deliberate Self Poisoning

Life Time Risk



More common in young women – presenting after 18:00

“All things are a poison and nothing is without poison, only the dose permits something not to be poisonous” – *Paracelsus*



ABC comes first...
but Don't Ever Forget Glucose!

TOX Arrest?
DON'T STOP!

Call a toxicologist and *keep going*

Modify ALS (ACLS):

1. Prolonged CPR
2. Tachyarrhythmias – think electrolytes
3. Remember Antidotes

“A patient under 40 who is unconscious has an 80% chance of it being due to a toxin!”



RISK Assessment:
WHAT? & HOW MUCH?
WHEN?

If you know the pharmacology you can predict the effects...



Only 2 tests are routinely needed...*

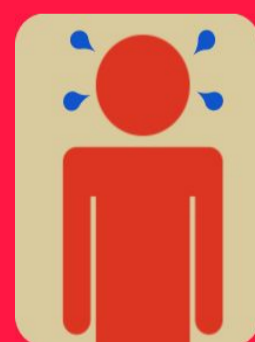
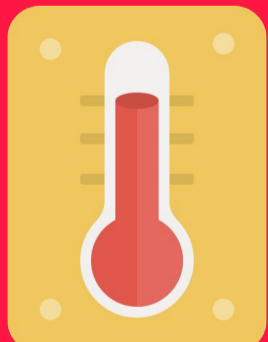
- 1) Paracetamol Level
- 2) ECG

*Unless others are specifically indicated

Not just prescription drugs...

- Herbal and Complementary Medicines
- Illicit Substances
- “Legal” Highs
- Ethylene Glycol
- Rat poison
- Just about anything else...

Look For Toxidromes:



CHILDREN: often Toddlers
and DOSE/Kg is Vital

TO UNDERSTAND
THE DUCK...



YOU HAVE TO LISTEN
TO THE TALK!

<http://bit.ly/em3smacbyte>

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East Midlands Emergency Medicine Educational Media