

MUSHROOM SOUP WITH AN EVIL TWIST

ALIF ABDUL RAHMAN¹, SE NG¹, AHMAD ZULKARNAIN AHMAD ZAHEDI¹

¹ ACADEMIC UNIT TRAUMA & EMERGENCY, FACULTY OF MEDICINE, UNIVERSITY OF MALAYA, KUALA LUMPUR, MALAYSIA.

Introduction

Eating mushrooms can be good for your health. While mushrooms look tame and tempting, foraging mushrooms on your own can be dangerous and fatal. Some mushrooms are edible, some are poisonous, and many have lots of medicinal values.

Case Presentation

A 55-year-old hypertensive lady presented with acute severe abdominal pain associated with diarrhea and vomiting more than twenty times. She had cooked "tom-yum soup" with the mushrooms that were handpicked from her backyard garden. No other family members affected.

examination, she On appeared dehydrated. She was hypotensive, and tachycardic. There's no sign of acute abdomen with hyperacute bowel sounds. Other systems were unremarkable. Blood investigations showed mild hepatitis with high inflammatory markers. Radiological investigations were Patient's husband brought normal. specimen of mushroom which confirm by a mycologist in Mushroom Research Centre, Biology Science Institute, Universiti that it belongs Malaya of to genus Leucoagricus and highly suspicious of new species based on the molecular study. After fluid resuscitation and close monitoring, patient was stabilized and admitted to medical ward for a few days and was discharged well.

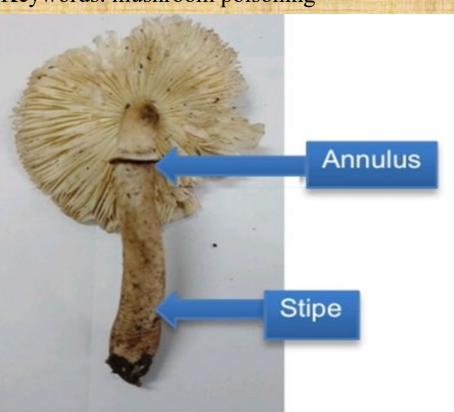
Discussion

A new mushroom poisoning classification include nephrotoxic, 2019 proposed in hepatotoxic, hallucinogenic, myotoxic, metabolic, gastrointestinal, and cholinergic manifestations.¹ Leucoagricus sp is one of the mushrooms that caused severe gastrointestinal symptoms. It is commonly consumed in North America and most frequently reported in Malaysia.² The mushroom is confused with Termitomyces mushroom, the edible type. Time from consumption to initial symptoms is important in determination of severity of toxicity. Immediate symptoms (less than 6 hours) usually indicate benign poisoning. On the other hand, delayed symptoms (more than 6 hours) indicate potentially life-threatening poisoning.³ Treatment is mainly aggressive supportive further prevent care as to complications of dehydration. Multiple doses of activated charcoal are associated with improved survival compared with supportive care alone. discharge, public awareness Prior to community education are essential to prevent recurrence of mushroom poisoning.⁴

Conclusion

Management of mushroom poisoning is dependent on description of the mushroom, the geographic distribution, the signs and symptoms of toxic principles and duration presenting symptoms of patient. It is difficult to know which wild mushrooms are safe, thus picking and consumption should be strongly discouraged as a precaution against mushroom poisoning.

Keywords: mushroom poisoning





Parts of Leucoagricus sp.

	2
Cap	flat or plane in shape; central cap dark brown, with light brown fibrillose scales on a creamy white background; edge of cap splitting radially, cap easily detached from the stipe.
Gills	white color to pinkish brown.
Annulus	membranous, fragile, easily detachable, light yellow and blackened with age.
Habitat	Grassy area
Toxicity	Unknown. However, other species in this genus are reported to be slightly poisonous

Reference

- 1. Julian White, Scott A Weinstein, Luc De Haro, Regis Bédry, Andreas Schaper, Barry H Rumack, Thomas Zilker. Mushroom poisoning: A proposed new clinical classification
- 2. Beug, Michael W. An Overview of Mushroom Poisonings in North America. Archived 2010-05-20 at the Wayback Machine The Mycophile, vol. 45(2):4-5, March/April 2004
- 3. Diaz JH. Evolving global epidemiology, syndromic classification, general management, and prevention of unknown mushroom poisonings. Crit Care Med. 2005 Feb. 33(2):419-26.
 4. Feinfeld DA, Rosenberg JW, Winchester JF. Three controversial issues in extracorporeal

toxin removal. Semin Dial 2006; 19:358.