

**PP116 THE ROOTS OF WOE**

CMLAU<sup>1</sup>, M AZMAN<sup>2</sup>

<sup>1</sup> *SHAH ALAM HOSPITAL,  
SELANGOR, MALAYSIA*

<sup>2</sup> *MIRI HOSPITAL, SARAWAK,  
MALAYSIA*

**Introduction**

The intake of traditional medicine postnatally is a common practice among Malaysians. Today we are discussing a case of aconitine toxicity after taking herbal packs supplied by a confinement centre.

**Case description**

We have a healthy 34-year-old female, postnatal 22 days. She was supplied with different packages of herbal packs daily from her confinement centre. She was well with the initial supplies of herbal packs. One day she developed diarrhoea, numbness of perioral area and all four limbs, after taking a newly cooked herbal pack. The ingested herbal pack contained aconitum. Upon arrival at the hospital, she was conscious, but hypotensive, bradycardic and experiencing chest discomfort. ECG showed bradycardia with bigeminy. A dose of IV Atropine and 50g of oral activated charcoal were given. Total 1.5L of normal saline were also infused. Her vital signs subsequently improved, and symptoms subsided. She was admitted to ICU for one day before being transferred to the general ward and discharged after three days of hospitalization.

**Discussion**

Aconitine is a main alkaloid contained in plant aconitum, also known as aconite. It has neurotoxicity and cardiotoxicity

properties that will result in numbness of perioral area, tongue, face and body, muscle weakness, gastrointestinal upset, hypotension and dyspnoea. These features are due to its actions on voltage-sensitive sodium channels. Life-threatening ventricular tachycardia may occur in severe toxicity. As little as 0.2 mg of aconitine is sufficient to cause severe poisoning, with no specific antidote available. Aconitum and its alkaloids are controlled as a scheduled poison under the Poison Act 1952 and its usage in traditional medicine in Malaysia is prohibited.

**Conclusion**

Traditional medicine usage is common in this country, unfortunately some of its potential lethal side effects are still not well known to the general public. A strict control of traditional medicine distribution and usage should further be enforced by the authorities.

**Keywords**

Aconitine, Traditional medicine, Toxicology