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KUALA LUMPUR

*"A Multidisciplinary Approach in Strengthening the Chain of Survival"*

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**A. ORAL PRESENTATION**

**OP 1**

**PROSPECTIVE REVIEW ON THE  
PATTERN AND DISTRIBUTION OF  
ACUTE POISONING CASES IN  
HOSPITAL KUALA LUMPUR (HKL),  
MALAYSIA**

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**INTRODUCTION**

Acute poisoning is one of the common presentations in Emergency and Trauma Department requiring specific management approach based upon patient's characteristics. Patients' outcome are based on various factors

which includes types of poisons, amounts of poisons, level of toxicity and patient's pre-morbid status. Emergency and Trauma Department (ETD) toxicology cases compilation started from 1st October 2013 as databases for the purpose of management audit in poisoning cases.

**OBJECTIVE**

The objective is to evaluate the patterns of acute poisoning cases in relation to their epidemiological data, types of poisons, types of venoms and patient's outcomes. This review is also used to further understand the demographic data of acute poisoning cases in Kuala Lumpur.

## METHODS

A prospective study was conducted on poisoning cases attended at the ETD of Hospital Kuala Lumpur from 1st October 2013 until 31st March 2016. All cases of suspected or alleged ingestion of poison or drugs were included in this review. Descriptive analysis was carried out by looking at the types of poisoning, route of administration and patient outcome.

## RESULTS

A total of 708 cases labelled as poisoning which comprised of 64.4% (456) cases due to toxic agents and 35.6%(252) due to venoms. In subgroup venomology; 19.8% (50) patients aged were less than 18 years old with 2.3%(6) of cases were less than 2 years old, 3.9%(10) of cases more than 60 years old. 73.4%(177) involved was Malay, 17.8%(43) Indian and 8.7%(21) Chinese. 72.6%(183) was male patients and 27.3%(69) female. Types of venoms included bite cases 54.3%(137) and 45.6%(115) due to sting. In the sting category; 43.6%(110) were due bee stings, others were benign insect bites. 11.9%(30) snake bite reported. No mortality reported was in this subgroup.

For subgroup toxicology; 78.4%(357) patients aged between 18 to 60 years old, 9%(41) age between 5 to 18 years old. 45.4%(184) cases were Indians, and 38.5%(156) Malays. 61.8%(282) were female patients. 93.2%(425) of cases used oral administration followed by inhalation, which comprises of 6.3%(29). Toxic agents used were paracetamol 17.5%(80) cases, Clorox 13.8%(63) and cyanide inhalation, 22 cases. Accident ingestion was the most common cause of toxicology with 35%(160) cases, deliberate self-harm 25.4%(116) cases are suicidal with

23.9%(109) cases. N-Acetyl-cysteine was the most commonly used antidote 47.7%(21) cases followed by atropine 15.9%(7) cases and Ophanedrine 9%(4) cases. 5 reported deaths were in this subgroup.

## DISCUSSIONS

### *Venomology*

Patients mostly are within the productive age of 18 years to 60 years old corresponds to studies from Chew et al(2011) and Cesaretli Y el (2010).<sup>1,2</sup> and similar to the national statistics. Most of them presented to the hospital during the afternoon shift, 38.4%, corresponding to the norm of workload in emergency department. Jamaiah et al (2006) also reported highest snake bite incidence during the afternoon shift too (2pm to 9pm). This happens most likely because people are still at work and being out in the working field. Majority cases are bee sting (43.6%) and insect bite (39.2 %). In 2014, American Association of Poison Control (AAPC) centers reported 3968 cases of bee, wasp, or hornet stings, while other insect bites were 6049 cases. These two categories remain the top two cases among envenomation in Malaysia and America.

### *Toxicology*

Most of the patients were between 18 to 60 years old, comprising of 78.4% (351). Database from the American Medical Association (AMA) 2006 also reported the similar findings with 91.9% were aged between 18 to 54 years old and majority were of them were male with 67.1% among the unintentional pharmaceutical overdose fatalities. Regarding the route of administration, oral administration was the most with 93.2%(425) compared to inhalational with 6.3%(29). The data

from the "2014 Annual Report of the AAPCC" also recorded that ingestion was the highest cases reported with 83.7% followed by dermal (7.0%) and inhalation (6.1%). The top substance reported in this review was paracetamol at 17.5% (80).

### *Conclusion*

This review showed that the disease burden of acute poisoning cases in Kuala Lumpur City is enormous and it also contributed to our preparedness in managing such cases.

## **OP 2 "TEMPTING MUSHROOM WITH DEADLY BITES - DINNER THAT ALMOST KILL MY FAMILY"-CASE SERIES OF CHLOROPHYLLUM MOLYBDITES MUSHROOM POISONING**

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### **Introduction**

This is a case series of a family (4 people) presented with Chlorophyllum Molybdites mushroom poisoning which has been picked up by the roadside mistaken for edible "cendawan busut".

### **Case description**

Healthcare provider rarely encounters mushroom poisoning. We often misdiagnosed them as acute infective gastroenteritis. Meanwhile we found out that the content of the product might be poisonous and harmful to us which even cause death.

We tend to forget that some food product can be poisonous to some humans and even can cause death.

A 32 years old man presented to us with vomiting and diarrhoea after taking half a plate of wild mushrooms for dinner his family members. Patient was also complaining of throat discomfort and hence was sent to the Red Zone for possible anaphylactic reaction. Intramuscular adrenaline, intravenous hydrocortisone and chlorpheniramine and activated charcoal were administered. Continuous fluid replacement was done under ultrasound guidance until he was hemodynamically stable and was admitted in the medical ward.

The wife, a 29 years old pregnant woman at 20 weeks gestation has also taken some mushrooms for dinner. She developed vomiting and diarrhea in the emergency department. However she did not have any features of anaphylactic reaction. She was given IV fluids and was administered in the obstetrics ward. Their son, a 4 year old boy complained of vomiting at home after ingesting only a small piece of the mushroom. The child was admitted in the pediatric ward.

The mother to the woman, a 64 year old lady woman presented with vomiting multiple times vomiting at home after consuming the mushroom for dinner together with the others family member(above). However vital signs were still normal and hydration status was fair. She was stable hemodynamically and Patient was warded she was admitted for observation. under medical team for observation with continuous hydration.