

ANALYSIS OF THE USE OF ANTIDOTES IN A UNIVERSITY HOSPITAL



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BACKGROUND

Although most poisonings are mild, about 5% of them may show severity requiring active therapeutic measures and being a cause of potentially serious hospitalizations. The treatment of the intoxications is commonly based on the use of specific antidotes, which have the most specific therapeutic action of all the methods or substances used in clinical toxicology.

PURPOSE

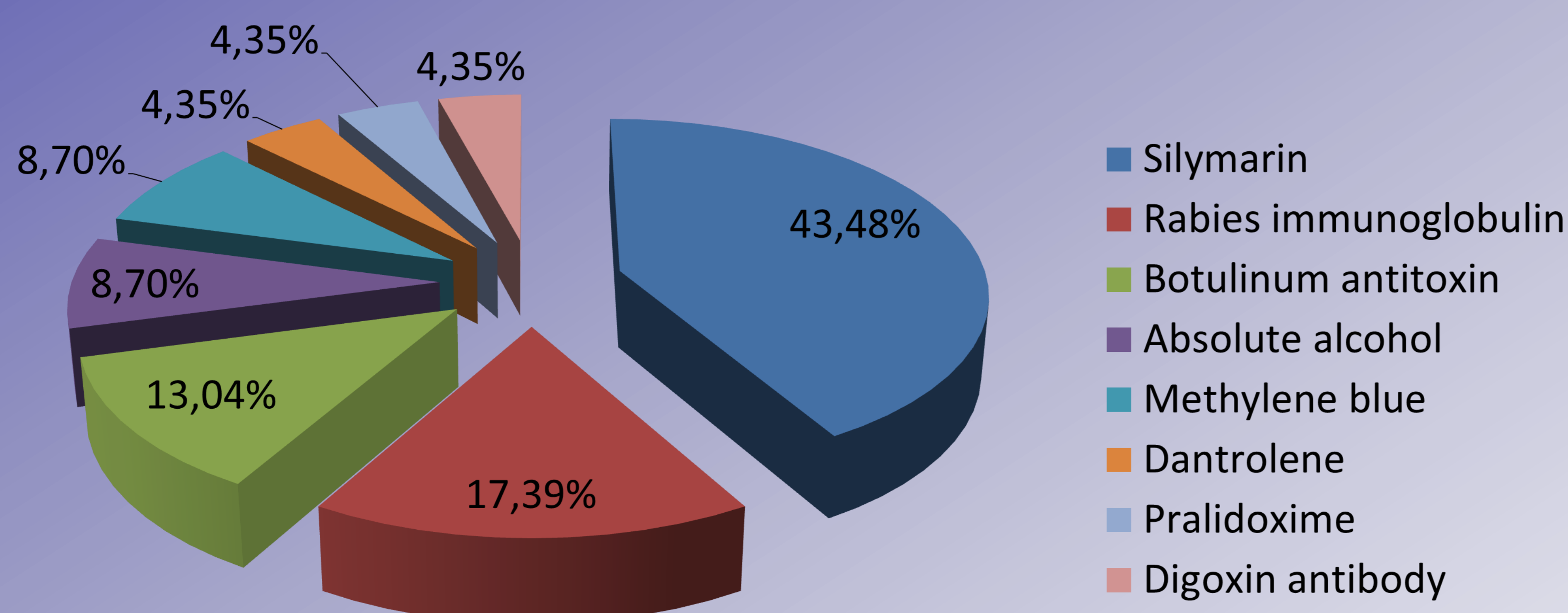
To analyze the use of specific antidotes for the treatment of rare poisonings in a tertiary care hospital.

MATERIAL AND METHODS

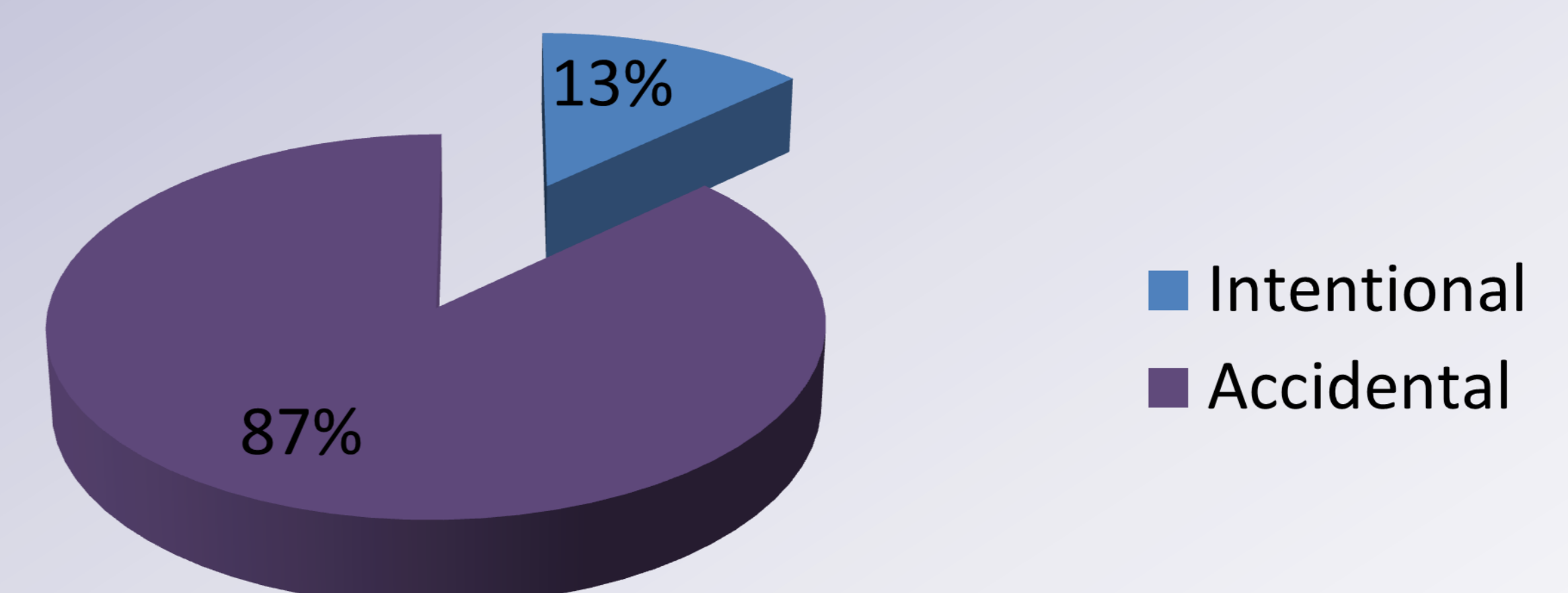
Retrospective longitudinal study. The analyzed period comprised between June 2013 and June 2015. The variables studied were: type of antidote, number of patients, sex, age, indication, clinical outcome and time from admission to drug administration.

RESULTS

A total of 33 patients (57.7% male) were analyzed, with a mean age of 48 years. Ten of whom were dismissed due to lack of data.



TYPE OF INTOXICATION



ANTIDOTES USED AND INDICATIONS

Silymarin	Mushroom poisoning
Rabies immunoglobulin	Prophylaxis after animal bites
Botulinum antitoxin	Food-borne botulism
Absolute alcohol	Methanol and ethylene glycol poisoning
Methylene blue	Methemoglobinemia after poisoning spinach Ifosfamide encephalopathy
Dantrolene	Neuroleptic malignant syndrome
Pralidoxime	Organophosphate insecticide poisoning
Digoxin antibody	Digoxin poisoning

- For 95.65% of the cases evaluated the antidote was administered within the first 24 hours after admission and diagnosis.
- In all cases, the antidote was effective in the specific treatment for which they were meant to be used.
- The average length of hospital stay after the start of treatment was 5.9 days.

CONCLUSIONS

The administration of antidotes is largely in line with the indications described in the bibliography. The use of these drugs at the right time is critical to reverse the effect of intoxications for which they are indicated.