
S4. CLINICAL PERSPECTIVE OF HERBAL POISONING IN EMERGENCY ROOM

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In recent years, there is an increase in herbal product consumption, since herbal products are presented as harmless under the mask of the term "natural". It is obviously seen in the clinical evaluation of the intoxication cases that the most plant exposures in children are unintentional and in contrast to that, adults tend to intake herbal products for self-treatment against chronic illnesses such as cancer, obesity, thyroid, erectile dysfunction etc. Although most herbal products may be used without any adverse reaction, some may have serious toxicities depending to dose, duration, or concomitant pharmaceutical drug usage. Herbal products may produce multiple symptoms, and may affect multiple organ systems, including cardiovascular, renal, hepatic, nervous, gastrointestinal (GI), and hematologic systems. Additionally, herbal products are including heavy metals such as lead, mercury, and arsenic along with active substance.

The incidence of the severe intoxications is higher in elder patients, who have chronic illnesses, impaired organ functions or multiple drug treatment especially with a narrow therapeutic margin such as warfarin. In Turkey, there is no toxicological herbal database recording epidemiologic data in emergency clinics, except some special case reports. Some exposure cases were encountered in Cerrahpaşa Emergency service up to the present including Aconitum, Datura stramonium, Mandragora autumnalis, Ecballium elaterium, Nerium oleander poisoning. In this presentation, the clinical approach to "real" herbal intoxication cases, including findings and treatment managements of patients will be discussed.

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