Unknown herbal poisoning with fatal outcome


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Introduction:

- Herbs have been used worldwide.
- In Bangladesh, Conceptually, these are usually considered to be non-toxic by the general public due to their natural origin.
- In daily practice, health professionals, quacks and other non-medical professionals, such as witch doctors, for either therapeutic or tonic purposes, dispense herbs.
- Upon exposure, the clinical toxicity may vary from mild to severe and may even be life-threatening.
- Here, we report incidents of herbal poisoning and their grave ending.
Methodology:

Case series
gas chromatography with mass spectrometry
Results:

Four young patients rushed to Dhaka Medical College Hospital on 28\textsuperscript{th} July 2008 at early morning with the history of taking herbal medicine at 10 pm on that night.

Two of them presented with altered level of consciousness and restlessness, H/O repeated vomiting and abdominal pain 3-4 hours after taking medicine.

All of them were garments worker and found prepared an herbal stayed in the same house.
On quarry, one of them prepared the tonic by following a book of indigenous medicine for the purpose of getting gratification and power for masculinity.

He used pieces of Chandan wood, Ispagulahusk, Mymosapudica and few other materials.

About 3 to 4 hours after taking the medicine, they noticed repeated vomiting and abdominal Pain.

Amongst 2 Patients condition were progressively deteriorating.
They became restless and gradually developed unconsciousness.

The other two patients also complained of abdominal pain and vomiting but on examination they were hemodynamically stable.
On examination, one 35-year pulse was found 132/minutes regular, BP- 40/-- mm hg, Pupil– Dilated and non-reacting & GCS – 5.

The Patient died immediately before taking any life saving measure.

The other one 28-year, pulse was found irregularly irregular, BP- not recordable & GCS-6. ECG reported ventricular tachycardia.
Patient Name: Aminur, Age: 35 years
He was referred to CCU but died on that morning inspite of active treatment.

Rest of the others, were absconded from the hospital including the offender who prepared this medicine.
The analysis of the GC-MS, no single most likely toxic component has been identified.

As for the ingredients, Santalum album (Chandan wood), contains Santalol and other etheric oils; Plantago ovata, (Ispagula Husk) contains diverse alkaloids, phenols, etc.;

Mimosa pudica is the common Mimosa, contains the alkaloid Mimosin; all of this is supposed to be toxic by oral uptake only in large doses.
Conclusion:

Poisoning and snake bite are commonly encountered emergency situation in Bangladesh.

From record data of Poisoning cases in Dhaka Medical College for last 10 month, total 5,276 patients were admitted.

Amongst, 140 patients were died.
Conclusion:

Due to increased morbidity and mortality, poisonings associated with the use of herbs have raised universal attention in the last few years.

These incidents of herbal poisoning in Bangladesh highlight the need for awareness campaigns targeting the population at risk.
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