THERAPEUTIC TREATMENT IN THE ACUTE POISONING FROM SECOBARBITAL: CLINICAL CASE

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[Trattamento terapeutico nell'intossicazione acuta da Secobarbital: caso clinico]

SUMMARY

The Authors, after to have examined the toxic effect of barbiturates, they take in consideration a clinical case of ingestion of secobarbital and espose the therapeutic treatment put into effect.

They conclude asserting the importance of a timely participation to the ends of one fast resumption and it completes of the clinical conditions of the subject

Key words: barbiturates, secobarbital, poisoning

RIASSUNTO

Gli Autori, dopo aver esaminato gli effetti tossici dei barbiturici, prendono in considerazione un caso clinico di ingestione di secobarbital occorso alla loro osservazione, ed espongono il trattamento terapeutico attuato.

Concludono affermando l'importanza di un intervento tempestivo ai fini di una ripresa rapida e completa delle condizioni cliniche del soggetto.

Parole chiavi: barbiturici, secobarbital, intossicazione

Introduction

The barbiturates are narcotic and ipnotic substances, that they act mainly depressing the central nervous system them, reducing the cardiac rhythm and rendering the respiration more superficial.

They are uses you therapeutic in the treatment of: anxiety and depression, hypertension, epilepsy, muscular tension; and in preanesthesia and anesthesia, where they can be associated you to other drugs like analgesics.

The somministration usually happens for oral way in compressed shape of, some case assumed under suspension shape liquid; is moveover available also inyectable shape.

A Secobarbital is a barbiturate to short duration of action, used mainly of treatment of insomnia or to sedative scope in order to reduce the anxiety in preanesthesia.

It usually comes prescribed and therefore ingest under shape of caps, metabolizzated to hepatic level and excrete for urinary way a lot; it have a emivita of approximately thirty hours.

Clinical case

Near the unit of intensive therapy, it is reached our observation, accompanied from the relatives, the patient of feminine sex, C.G., years 48, in state of unconscious.

The anamnesis of the patient, collection interrogating the relatives, made to bring back the use of secobarbital to disturb of the sleep of which it was slices and came moreover emphasized the abuse from part same of substances alcoholics. The patient had been found again in the own room lacking incoscience.

At the moment of the shelter it came executed a withdrawal for the determination of gases in the blood, one for the routine examinations and a screening toxicologic; it came moreover executed a ECG.

After monitoring of the cardiovascular and respiratory parameter (PA, Fc, SaO2), one came endured an infusion of bicarbonato of sodio, to the velocity of 120ml/h.

At the distance of some hours, it came carried out a new hematic withdrawal of money in order to

estimate the barbituriemia and in particular the presence of secobarbital in the blood: the levels was passed you from the 5000ng, which was at the moment of shelter, the 2000ng after 3 hours, the 1300ng after approximately 20 hours, and continued to come down, inasmuch as the therapy continued from 48 hours.

After 48 hours, the patient was able to resume to walk and came begun the feeding. In delays evening of the third day, came discharged.

Results

Already after 24 hours from the beginning administration of the alkalizeing solution, it was notied that the values of the barbituriemia were reduced and the patient improved clinical, with resumption of the state of acquaitance.

Consideration

The secobarbital it is apotentially dangerous drug, in how much its extended use and to high doses can provoke serious effects: sleepiness headache, depression, confusion, vertigos, respiratory depression, costipation, nausea, epigastric pain, nystagmus, cutaneus rash, ptosis, articular and muscular pains, fever, be of coma, like in the case from we described.

And moreover high also the risk of undesired interaction if its assumption is concomitant to the assumption of other drugs or alcohol; if is affection from renal, hepatic and respiratory insufficency, from porphyria, diabetes; if finally it is in course of pregnancy and breast-feeding.

The treatment of a patient poisoning with secobarbital consist in the first place in the support of the vital functions, maintaining pervious of the aereal ways, an adapted oxigenation and ventilation.

Very important in the monitoring of the system to cardiovascular and the employment of the measures of support.

Conclusion

The ingestion of the drug in our case has been such to determine serious toxic effect and to demand farmacologic an intensive treatment with substances mostly alkalizeing, of which the patient it has drawn benefit quickly and that it has allowed moreover the resolution of the case in the arc of 24 hours, concurring the resignation of the same one and limiting the period of shelter in a therapy intensive.

We feel of being able to assert that the poisoning from barbiturates, if dealt in timely way and adapted, estimating in the more serious cases also the vital parameters, it concurs with the fast resumption and completes of the clinical conditions.

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