

≈ ORAL PRESENTATIONS ≈

OP 011

Acute Maduramicin Poisoning**Jianfang Zou¹**, Huasaho¹, Joufang Deng²

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Abstract

Background: Maduramicin (MAD) is one of the polyether antibiotics used as anti-poultry coccidiosis infection, toxicity data among humans exposed has been lacking and reported in recent years, especially in China. *Objectives* to understand the clinical manifestation and treatment of human MAD poisoning.

Methods: Reported one case of MAD poisoning and review the literature of human toxicity. We retrieve Chinese (via Wanfang and Vip Database) and English full-texts via Medline from 1980-2012 using keywords MAD/human. *Results* There are 6 reports about MAD poisoning, 14 cases including 11 males and 3 females. 7 died (death rate 50%), 7 cases are from Chinese reports, the others are from India. The estimated poisoning dose are from 5.38mg to 62g for be lack of blood dose. MAD can be absorbed by oral, respiratory and sweating skin, the latency may be three hours to six days and different with dosages and route of entry. The clinical manifestations include nausea, vomiting, unsteady gait, fatigue, acroanesthesia, palpitation, dyspnea. Hemoglobinuria, albuminuria, and hematuria occurred in urine. Eliminating the poison, using glucocorticoid and blood plasma replacement in early period may be the effective treatments. The patients would be died of left ventricular, respiratory failure, and electrolyte imbalance. There would be left muscle atrophy in the prognosis.

Conclusion: The severe clinical presentation of MAD poisoning was rhabdomyolysis with acute renal failure and polyneuropathy. It was crucial to eliminate the toxicant, and take precautions to heart and respiratory function, hyperkalemia or hypokalemia.