

Oral Abstracts

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AN INNOVATIVE APPROACH TO HANDLE OUTBREAKS OF METHANOL POISONING

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Medecins Sans Frontieres (MSF), which is an independent medical humanitarian organization, has for more than four decades worked in areas of conflicts and natural disasters taking a special interest in improving healthcare in areas with very limited resources. MSF has special experience in dealing with various kinds of outbreaks and mass casualties. In its work, MSF wants to challenge the double standard often faced in providing medical care in poor settings and abandon a concept of "poor man's medicine". To make this possible, MSF has initiated a lot of innovative projects both addressing improved diagnostics, treatment and access to patients.

Methanol poisoning outbreaks - occurring frequently every year - most often afflict the poorest of the poor, i.e. people who buy the cheapest liquor they can find, and then fall victims to criminals that mix ethanol with various amounts of methanol in order to increase profit. We do not fully know how widespread these intoxications are, but there are possibly thousands of people dying every year. Most of these incidents occur in a resource poor setting. Diagnosis is inherently difficult since acute methanol intoxication can mimic many different severe clinical conditions. Even the ability to detect a metabolic acidosis can be problematic, since blood gas machines rarely are available.

MSF has therefore taken a special interest in addressing the problems related to outbreaks of methanol poisoning. By establishing a close collaboration with toxicologists at Oslo University Hospital and providing logistical support and training, an innovative approach to handling outbreaks has been developed - The Methanol Poisoning Initiative. This concept, involving a small unit being sent to support in areas with large outbreaks, has been applied both in Libya and Kenya during major incidents recent years. The next step is a model of training MSF Field Missions in areas where the outbreaks are common. This concept was first applied in September 2015 in the MSF Mission in Nairobi, Kenya. We anticipate that this collaboration will further facilitate innovative operational research by which new diagnostic tools and simplified treatment protocols can be tested in the field during outbreaks and in areas where these poisonings may be characterized as endemic.

Acknowledging a significant number of methanol outbreaks in Asia and Africa, and the presence of toxicology problems in numerous areas where MSF is present, this approach may be the very beginning of an increased collaboration between MSF and clinical toxicologists around the world.