

Oral Abstracts

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PATTERN AND OUTCOME OF PATIENTS ADMITTED WITH DELIBERATE SELF HARM IN MEDICAL WARDS OVER 5 YEARS – A RETROSPECTIVE STUDY

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Objectives and Methods: A retrospective analysis of case records of patients admitted with DSH in medical wards during 5 years from January 2010 to January 2015 was done to find out the various agents used for DSH, to find out the case fatality rate (CFR) of each agent and to identify the more harmful agents.

Results:

During 2010 to 2015, 3906 patients were admitted with self-poisoning (805, 710, 868, 784, 741 in each year). There were 2215 males and 1691 females. Mean age of study population was 35±15.7. There were 1518(38.8%) cases of insecticide exposure, 753 (19.3%) plant poisonings, 603(15.4%) drug over dosage, 487 (12.5%) rodenticide exposure, 181 (4.6%) petroleum product exposure, 58 (1.5%) corrosive ingestion, 190 (4.9%) cases of exposure to miscellaneous agents, 103 (2.6%) cases of exposure to unidentified agents and 15 cases of exposure to (0.4%) multiple agents.

Among the study population, 397 (10.2%) patients expired, with a case fatality rate (CFR) of 13.8%, 11.4%, 8.1%, 9.3%, and 8.6% in each year from 2010 to 2014 respectively. CFR of corrosives was 22.4%, insecticides 18.7%, rodenticides 6.8%, plant poisons 4.8%, drugs 1.8%, unidentified agents 9.7%, miscellaneous agents 4.3%, multiple agents 6.7% and petroleum products 0%.

During 2010 to 2014 corrosives constituted 1.9%, 1%, 1.8%, 1.4%, 1.2% of cases in each year respectively; insecticides constituted 46.1%, 41%, 36.9%, 37.2%, 33%; rodenticides constituted 11.7%, 13.2%, 13%, 12.5%, 11.9%; plant poisons constituted 15.8%, 17.7%, 20.4%, 20.7%, 21.8%; drugs constituted 12.5%, 13.8%, 15.2%, 15.6%, 20.3%; petroleum products constituted 5%, 4.6%, 3.8%, 5.1%, 4.7%.

Conclusion:

Mortality by DSH is coming down over the past years. Use of insecticides with relatively high CFR declined whereas use of drugs and plant poisons with lesser CFR was rising. This may be due to recent restriction on the sale of pesticides resulting in lower mortality in patients admitted with DSH.