Poster Abstracts

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ABDOMINOPELVIC COMPUTED TOMOGRAPHY FINDINGS AND CLINICAL MANIFESTATIONS IN METHAMPHETAMINE BODY STUFFERS

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Objectives: Little is known about methamphetamine body stuffers and correlation of clinical manifestations with imaging studies. We aimed to determine abdominopelvic computed tomography (CT) findings and clinical manifestations in methamphetamine body stuffers.

Methods: In a routine data base study, demographic characteristics, clinical findings, and CT results of 70 methamphetamine body stuffers were retrieved from the hospital files and evaluated. According to the clinical manifestations, the patients were categorized into either benign- or severe-outcome group. Those with hypertensive urgency (systolic blood pressures above 180 mmHg or diastolic blood pressure above 120 mmHg) and any end organ damage were put in the severe-outcome group. End organ damage was defined as seizure, decreased level of consciousness mandating intubation, rhabdomyolysis (creatine phosphokinase [CPK]>5000 U/L), increased troponin (> 0. 1 ng/mL), doubling of the level of creatinine, increased liver transaminases (>1000 U/L), or death. Also, they were determined to have positive or negative CT results. In the group with positive results, number and place of the baggies were determined, as well. Results of the CT were compared between the two groups.

Results: Almost 43% of the patients had positive abdominopelvic CT results (between 1 to 6 baggies). Place of the baggies was determined in 21 cases (9 in the stomach, 3 in the colon, 2 in the ileum, 2 in the cecum, 2 in the stomach and colon, 1 in the stomach and ileum, 1 in the cecum and colon, and 1 in the rectosigmoid). Mean density of the packs was 176.2±152.7 HU. Based on the clinical grounds, 57% of the patients were in the benign- and 33% were in the severe-outcome group. In the benign group, 45% of the patients had positive CTs while in the severe-risk group, this was 40% (P>0.05). Although except variables defined as severe outcome (seizure, intubation, Cr, AST, CPK, troponin) also agitation, on-arrival pulse rate, LDH, HCo_3, base excess, loss of consciousness and hospitalization period were correlating factors, but in regression analysis, we couldn't find a significant variable that prognosticate severe outcome.

Conclusion: It seems that there is no relation between CT findings and clinical manifestations of the methamphetamine body stuffers. Also, CT scanning cannot be relied on for diagnosis and determination of the prognosis in body stuffers and even ngative CT findings may lead to severe outcomes. Clinical findings particularly pulse rate may prognosticate outcome.