

CASE REPORT 3 [ID#91]

Paraquat Poisoning

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OBJECTIVE: To describe a case of severe paraquat toxicity who received early dialysis.

CASE REPORT: A 58 year old male presented to the emergency department (ED) after having ingested a mouthful of gramoxone 250 (paraquat 250 g/L). He had a history of hypertension, asthma and prostate cancer (resected). His regular medications included lercanidipine and salbutamol puffer. On examination, he was alert and haemodynamically stable. Investigations revealed an unremarkable 12-lead ECG, normal renal function (Creatinine 84 $\mu\text{mol/L}$ & eGFR 88) and an undetectable paracetamol level. The patient received 50g of oral activated charcoal, and was treated with intravenous acetylcysteine and dexamethasone. Sustained low efficiency dialysis was commenced within 3.5 hours of arriving into ED. Qualitative dithionite testing confirmed the presence of paraquat in his urine. The renal function began to deteriorate on day 2, finally peaking around day 5 (Creatinine 646 $\mu\text{mol/L}$ and eGFR 7). Quantitative testing later revealed a paraquat concentration of 7.3 mg/L on arrival. Despite the presence of poor prognostic markers, the patient never developed hypoxia and was eventually discharged on day 18 with a Creatinine of 295 $\mu\text{mol/L}$ (eGFR 19).

CONCLUSION: The present case highlights the prognostic value of commencing immediate dialysis when treating patients with paraquat ingestion who present early.