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Gamma-Hydroxybutyrate (GHB) Withdrawal, First Case Management Experience in the Philippine National Poison Management and Control Center: A Case Report

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INTRODUCTION: GHB tolerance can occur within 1 week to 6 months. The median time to experience withdrawal syndrome is 18 months. This depend on the duration of use and amount of GHB consumption. CIWA-Ar assessment tool play a critical role in the management of withdrawal symptoms.

CASE PRESENTATION: A case of a 28-year-old male, Filipino, presented at the emergency department (ED) with agitation, visual hallucination, and abdominal pain. Despite the administration of one dose each of diphenhydramine, haloperidol, propranolol, and omeprazole from the referring hospital prior to the transfer at PGH, patient's symptoms did not subside. Due to a recent methylenedioxymethamphetamine (MDMA) and "liquid ecstasy" use, patient was referred to Toxicology service. Active management with diazepam (total dose of 110mg) guided by CIWA-Ar scoring was done for 96-hours. It was observed that patient had a waxing and waning presentation of withdrawal symptoms such as agitation, hallucination and anxiety due to inconsistency of diazepam administration. Hence, alcohol withdrawal protocol, scheduled and symptom triggered approach was followed. Patient was discharged after clearance with Psychiatry with home medications of Topiramate and Vitamin B. Complex.

CONCLUSION: The first experience of GHB withdrawal at NPMCC was an eye opener to all the emergency physicians that not all "upper" symptoms of a patient known to be dependent on stimulants implicate a case of intoxication. Users have found a way to partner psychostimulants with depressants in order to achieve the desired effect. GHB withdrawal is potentially life threatening. Early recognition and management with the use of CIWA-Ar tool proved beneficial for this case.