

## Oral Abstracts

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#### MUSHROOM POISONING – THE TAIWAN EXPERIENCE

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**Introduction:** Accidental mushroom poisoning is constantly seen and regularly reported from all over world. This study aimed to review the clinical profile, source and treatment outcome of mushroom poisonings incidents and to point the importance of mushroom poisonings in Taiwan.

**Methods:** A retrospective descriptive/epidemiologic study was conducted by the Taiwan Poison Control Center and involved all cases of mushroom poisoning reported to the Center from July 1986 through June 2016.

**Results:** Overall, totally 253 cases, belonging to 114 incidents, of suspected mushroom poisoning were reported. All poisonings were accidental, the source of mushroom were wild (85%), purchased from market (8% ) or unknown (7%). Most poisoning cases occurred during rainy season from May to September with a frequency of 74%. The latent period for the symptoms were between 10 minutes and 6 hours for most cases, 7 hours in 3 and 12 hours in 3. Of these, 91% cases presented with gastrointestinal symptoms of nausea, vomiting, diarrhea, or abdominal pain. *Chlorophyllum molybdates* were responsible for most gastrointestinal toxidrome. Gastrointestinal symptoms were usually early onset and most cases recovered after symptomatic treatment and a short duration of hospital care. Other symptoms less recorded were dizziness, fever, chills, drowsiness, cold sweating, salivation, abdomen fullness, hypotension, chest tightness, hallucination, unconsciousness, weakness, myalgia, oliguria, jaundice, etc. No death was observed. In follow up recovery was complete in all subjects. Severe or life-threatening cases were related to *Russulasubnigricans*, *Amanita smithiana* and *Amanita virosapoisoning*. In all severe cases, the poisonous mushroom had been picked from the wild.

**Conclusion:** Most cases of mushroom poisoning in Taiwan presented with gastrointestinal symptoms and followed a benign course. Severe poisoning are occasionally seen. As most cases are poisoned following consumption of wild mushrooms, careful discrimination and ingestion of wild mushrooms are mandatory in further prevention of mushroom poisoning in Taiwan.

#### Learning Objectives

1. Under mushroom poisoning is an important medical emergency that may have serious clinical outcome.
2. Identify possible toxic mushroom ingestions by presentation.  
Differentiate between non-life-threatening and potentially life-threatening ingestions.

**Conclusion:** The public should be informed about the probable hazards of wild mushroom ingestion. The precise history of the patient and the collecting of mushroom remnants may help to identify the particular mushroom.