Poster Abstracts

PO-47

ADRENAL INSUFFICIENCY AND OVERWHELMING SEPSIS FROM CHRONIC INTAKE OF ADULTERATED HERBAL COFFEE SEHAT BADAN®

<u>John David L. Comandante¹, MD*</u>, John Paul E. Ner², MD, DPBEM and Lynn Crisanta R. Panganiban², MD, DPAFP, FPSCOT

¹Department of Emergency, Prehospital, Disaster, and Ambulatory Care Medicine, Ospital ng Makati, Makati City, Philippines, ²National Poison Management and Control Center, Philippine General Hospital, Manila, Philippines

Introduction: The Indonesian herbal coffee *Sehat Badan*® (literally translated as "healthy body") has been widely used as panacea for all inflammatory condition. Anecdotal reports noted rising cases of cushingoid features after intake [1]; moreover, the Philippine Food and Drug Administration (FDA), banned its use due to improper labeling and adulteration of arsenic, mercury, diclofenac, paracetamol, ibuprofen [2] and recently, dexamethasone [3].

Case Presentation: A 63 year old male with gouty arthritis, on frequent *Sehat Badan*® intake (>3x/ day), was seen at the Emergency Department for fever, decreased sensorium, severe respiratory distress, hypotension, tachycardia with generalized body weakness. Manifestations appeared after patient stopped taking *Sehat Badan*® in preparation for an elective eye surgery. He was diagnosed as a case of Methicillin-resistant *Staphylococcus aureus* (MRSA) pneumonia and complicated urinary tract infection with Acute Kidney Injury and relative Adrenal Insufficiency. He was intubated, started on fluids, inotropes and managed with Vancomycin and Meropenem. He was given Hydrocortisone because of persistent hypotension. Blood pressure improved after 2 days of hydrocortisone use. Emergency hemodialysis (10 sessions) was done. Arthocentesis revealed fungal arthritis and was started on Fluconazole. He was sent home after 10 days of hospitalization with regular out-patient follow-up

Discussion: This case presents adverse effects of prolonged *Sehat Badan*® use which was apparent after withdrawal. Recent tests done by FDA confirmed the adulteration of dexamethasone in its preparation [3]. The presence of corticosteroids in the product taken by patient was not documented. However, the overwhelming infection (fungal arthritis and MRSA pneumonia) indicated degree of immunosuppression possibly from chronic corticosteroid intake. The adrenal insufficiency also supported the probability of steroids in the product. On the basis of available evidence, irrespective of the results of adrenal testing, hydrocortisone should be given soon after the onset of septic shock in patients who remain hypotensive despite adequate administration of fluids and vasopressor agents [4]. This case underscores the importance of taking a careful medical history, with special interest on the use of regular and alternative (herbal) drugs and early diagnosis and management of adrenal insufficiency

References:

1. Jimenea, LM. Docs alarmed on bad effects of Indo "health supplement". The Freeman. 2014. http://www.philstar.com/region/2014/10/19/1381936/docs-alarmed-bad-effects-indo-health-supplement Accessed March 25, 2016.

2. Food and Drug Administration Advisory 2014-056. Reiteration of public health warning against the use of unregistered food supplement *Sehat Badan* powder http://www.fda.gov.ph/advisories/food/175545-fda-advisory-no-2014-056 Accessed September 1, 2015.

3. Food and Drug Administration Advisory 2015-072. Reiteration of public health warning against the use of unregistered and adulterated *Sehat Badan* powder http://www.fda.gov.ph/advisories-2/ pharmaceutical-2/280197-fda-advisory-no-2015-072> Accessed March 25, 2016.

4. D'Bornstein SR. Predisposing Factors for Adrenal Insufficiency. N Engl J Med 2009; 360:2328-39.