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Factors Associated with Major or Death Outcomes in Thai Population

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BACKGROUND: Hymenoptera sting patients have a variety of clinical outcomes. Organ dysfunction can complicate the disease course.

METHOD: This is a retrospective cross-sectional study described all hymenoptera envenomation reported to Ramathibodi Poison Center from January 2015 to June 2019. Factors associated with composite outcome of major effect or death were determined.

RESULT: During study period, there were 114 hymenoptera envenomations (wasp 48%, bee 33%, honest 14% and carpenter bee 8.8%). The median age was 36.5 years old. Seventy-two patients (63%) were male. Most cases showed local skin reactions. Severe clinical effects included rhabdomyolysis (18.4%), acute kidney injury (12.3%), anaphylactic shock (15.8%) and respiratory failure (7.9%). Hemodialysis was performed in 6 cases. There were 7 cases with major outcome and 10 deaths. Patients received antihistamine (42.1%), steroid injection (36.8%) and adrenaline injection (19.4%). Univariate analysis demonstrated that wasp sting (p0.017), clinical presentation of anaphylaxis (p<0.001), sting during monsoon season (p0.021), ten or more stings (p<0.001) and all cases with red urine (p<0.001) were associated with major or death outcomes. Within first 24 hours, laboratory result abnormalities associated to major or death outcome were AST \geq 120 u/L (p<0.001), ALT \geq 120u/L (p<0.001), CPK \geq 1000 IU/L and HCO3<20 mEq/L (p<0.001). None of the cases with ALT<120u/L developed major or death outcomes.

CONCLUSION: In hymenoptera envenomation, factors associated with major or death outcomes were wasp sting, ten or more stings, red urine, sting during monsoon season, clinical anaphylaxis, $AST \ge 120u/L$, $ALT \ge 120u/L$, $CPK \ge 1000IU/L$ and HCO3 < 20mEq/L.