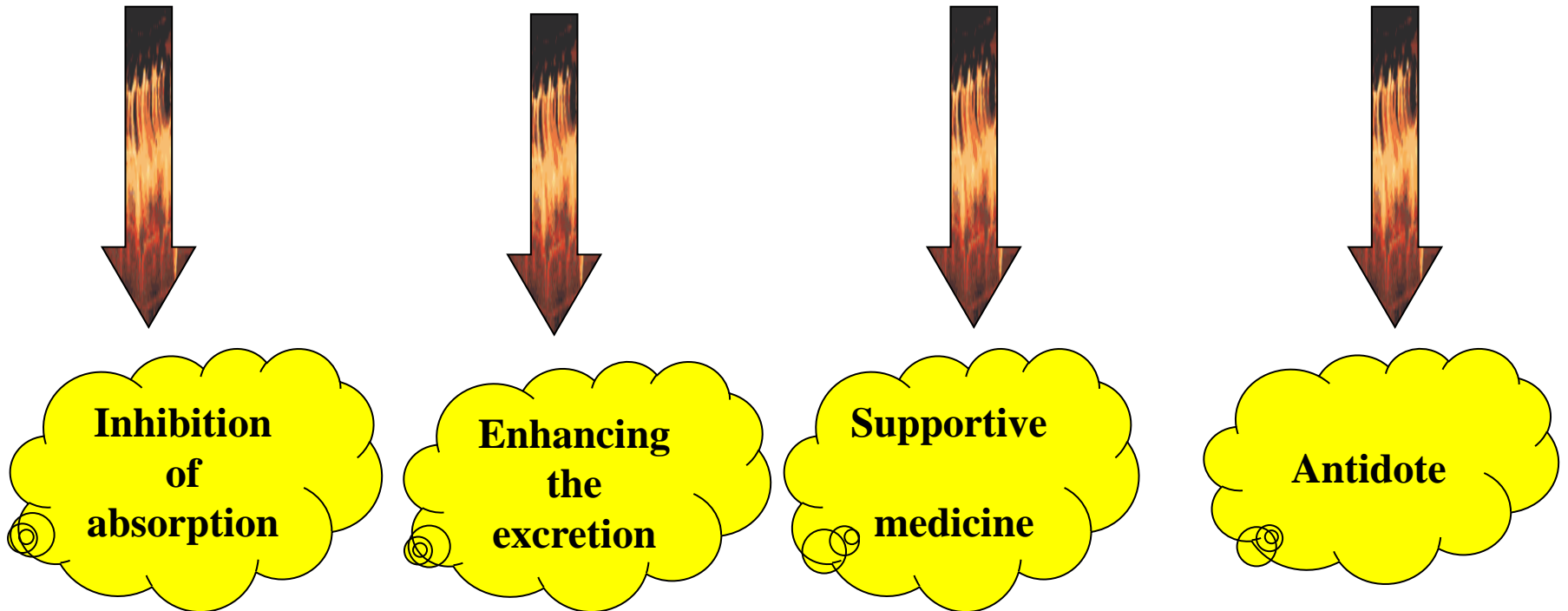


# **Drug Toxicology**

**By**

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# General strategy of poisoning treatment

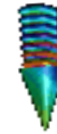


# 1- Inhibition of absorption



## Stomach lavage

- Is done as early as possible while the poison is still in the stomach
- Do not use in case of corrosives
- It can be used at late time in case of morphine and arsenic poisoning (they are excreted in the stomach)



## Emesis

vomiting animals

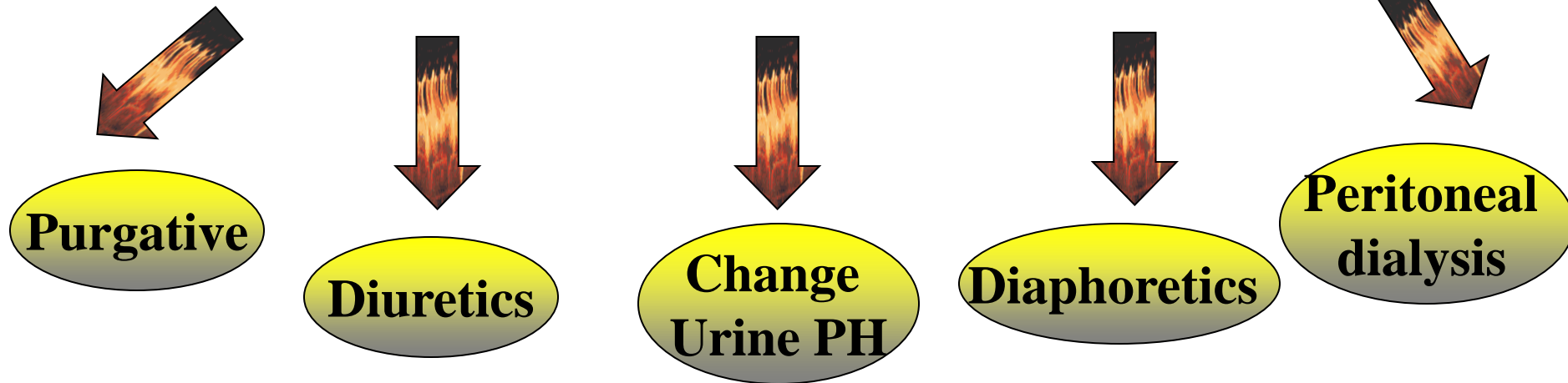
Sodium chloride

Copper sulphate

Apomorphine

- \* Not use apomorphine in case of CNS depressant.
- \* Not use emetics in case of corrosives you may perforate the esophagus or the stomach.
- \* Not use in case of the poisons that anaesthetize the stomach like the carbolic acid (phenol)

## 2- Enhancing the excretion

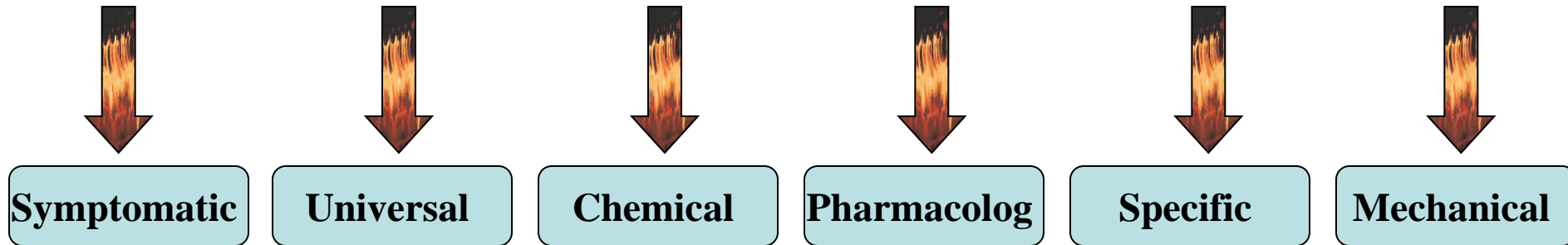


- **Using purgatives** like laxatives or in horse it is good to give cholinergic stimulant like arecoline and pilocarpine.
- **Using diuretics** as extra fluid infusion, caffeine or even strong diuretic .
- **Changing the urine pH** to favor the excretion of the poison:
  - \* In case of **acidic drugs** like sulphonamides they are ionized in an alkaline pH so we can trap them in the alkaline urine by using  $\text{NaHCO}_3$
  - \* In case of **alkaline drugs** like amphetamine is ionized and get trapped in the acidic urine so use **ammonium chloride** to lower the urine pH.
- **Using diaphoretics** like pilocarpine for dogs in case of poisoning with chemicals excreted in the sweat (potassium iodide is excreted in the sweat).
- **Peritoneal dialysis in small animals** by injecting physiological ringers solution intraperitoneally and remove it after 30 minutes.

## 3- Supportive medicine

- **Maintenance of the cardiovascular function:**
  - \* IV of physiological fluids or plasma if in case of shock.
  - \* Administration of glucocorticoids
- **Maintenance of the respiratory function:**
  - \* Mechanical ventilation
  - \* endotracheal intubation.
  - \* High oxygen chamber in of case gases suffocation
- **Maintenance of body temperature in case of comatosed or sedated animals by using hot pads, blankets or heating lamps.**

## 4- Administration of antidote



### 1- Symptomatic antidote

to prevent the general symptoms to appear on the animals:

- \* Antiemetics in vomiting.
- \* Astringents in diarrhea.
- \* Stimulants in depression.
- \* Artificial respiration in collapse.
- \* CNS depressant in case of excitement, convulsion and sedation.

## **2- Universal antidote:**

**2 parts activated charcoal powder,  
one part tannic acid and  
one part magnesium oxide.**

Take 15 gm in a half a gallon of worm water.

## **3- Chemical antidote**

by chemical precipitation, neutralization or decomposition

- \* starch for iodine
- \* lemon juice for strong alkali
- \* dilute ammonia water for strong acids.

#### **4- Pharmacological antidotes**

to counteract the pharmacological effect of the poison

- \* atropine for physostigmine
- \* barbiturates for strychnine.

#### **5- Specific antidote**

- \* mephnisine in case of strychnine,
- \* nalorphine in case of morphine
- \* 2-PAM in case of OP.

#### **6- Mechanical antidote**

- **Entanglers:** as cotton ball and high fiber ration in case of sharp objects
- **Magnetic bar** is used to keep a nail in the reticulum of the cattle to avoid reticulo-pericarditis when a cattle swallow a nail.
- **Charcoal** adsorbs poisonous gases on its surface in the intestine and getting it out with the feces without absorption.



## Chelating agents:

are materials that bind with the poisons and form inactive poorly dissociating complexes known as chelats.

### \* Dimercaprol, British Anti Lewisite (BAL)

provides 2 –SH groups to bind to the heavy metals (arsenic, mercury and cadmium) and make the –SH containing enzymes free from the metals.

### \* Penicillamine

to chelate copper, mercury, zinc and lead.

### \* Sodium calcium edetate:

used in case of lead poisoning and chelating the radioactive metals, and plutonium.

\* Desferrioxamine: for the ferric iron

\* Sodium ferrocyanide for ferrous iron.



**THANKS**