

Aluminum Phosphide Poisoning: A Rare Presentation

Article · January 2018 *with* 30 Reads

[DOI: 10.5958/0973-9130.2018.00033.6](https://doi.org/10.5958/0973-9130.2018.00033.6)

Cite this publication



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Abstract

Aluminum phosphide (ALP) is extremely lethal and invariably suicidal in nature.¹ It is a major cause of suicidal poisoning in many countries.^{2,3} Toxicity by ALP is caused by the liberation of phosphine gas, which causes cell hypoxia due to inhibition of oxidative phosphorylation leading to circulatory failure.³ Treatment of ALP toxicity is mainly supportive as there is no specific antidote. Mortality with ALP poisoning is very high, ranging from 37% to 100%.^{4,5} A 40-year-old female was admitted to R.L Jalappa hospital kolar with complaints of nausea, vomiting and epigastric pain h/o after ingestion of 7 to 8 tablets of unknown composition and 20 tablets of cetrizine. She had a history of bronchial asthma. On arrival, she was alert and hemodynamic status with pulse rate of 130 beats/min and blood pressure 110/70 mm/hg. There was not any abdominal tenderness or guarding, no cyanosis, jaundice or edema of feet. Gastric lavage initiated, but after 2 hour her condition deteriorated with cardio toxicity, resistant hypotension, tachycardia, epigastric pain, generalized tonic-clonic seizure (GTCS), Arterial blood gas (ABG) showed severe metabolic acidosis. Electrocardiogram (ECG) showed

extensive inferolateral ST elevation myocardial infarction (STEMI). After few hours of admission, rhythm became ventricular fibrillation (VF) and cardiopulmonary resuscitation (CPR) began but it was unsuccessful. As aluminum phosphide poisoning leads to fatal condition, early diagnosis and proper management is warranted, this can be reduce the morbidity and mortality. But sometimes early diagnosis may not save the victim as in our case. We present a case wherein the victim succumbed to death due to acute respiratory failure and bleeding diathesis following consumption of aluminum phosphide. © 2018, Indian Journal of Forensic Medicine and Toxicology. All rights reserved.