MATERIAL AND METHODS

The present study was conducted in M.L.B. Medical College, Hospital, Jhansi. This study included a combined retrospective and prospective analysis of acute poisoning cases admitted in emergency ward during January, 1990 to December, 1992.

Retrospective study had been carried out from January 1990 to December, 1991. During above two years duration all bed head ticket of acute poisoning collected from record section, were analysed.

1. Name/address
2. Age/sex/Religion
3. Rural/urban area.
4. Type of poison
5. Cause of poisoning:
   - Suicidal
   - Homicide
   - Accidental
6. Alive/expired/LAMA/Absconded
7. Duration of stay in the hospital
   b. R.F.T. - Blood urea
   c. Serum creatinine.
   d. E.C.G.
Prospective study had been carried out from January, 1992 to December, 1992. During the study every case was subjected to a thorough history and clinical examination as listed below:

**HISTORY**

The diagnosis of poisoning was based on a reliable history given by patient own or by attendant or remaining tablet or empty container in his/her pocket. In history specific points, recorded like history of psychiatric illness such as depression, socio-economic status, single or joint family, history of drug addiction, failure in examination, termination from job, querells with family members and harrasment by family member or others.

A. **Name**  
   **Age/Sex**  
   **Rural/Urban**  
   **Religion/Caste**  
   **Marital status**  
   **Occupation**  
   **Name of poison**  
   **Solid/liquid/gaseous form**  
   **Type of poisoning**  
   **Cause of poisoning**  
   - Suicidal  
   - Accidental  
   - Homicidal  
   - Stupefying  

**Chief complaints**
B. PHYSICAL EXAMINATION

General condition  Icterus
Pulse rate/min  Cyanosis
Blood pressure  Clubbing
Temperature  Hydration
Respiratory rate  Oedema
Pallor  Lymphadenopathy

C. SYSTEMIC EXAMINATION

C.N.S.

a. Conscious/unconscious, if conscious then
   grade of unconscious according to Edinburgh
   method:
   Grade 0 - Fully conscious
   Grade 1 - Drowsy but responsive to vocal
      command.
   Grade 2 - Unconscious but responsive to
      minimum painful stimuli.
   Grade 3 - Unconscious but just responsive to
      strong painful stimuli.
   Grade 4 - Unconscious with no response to
      painful stimuli.

b. Pupil - Size
   - Light reflex.

c. Motor/sensory
2. C.V.S. (Cardiovascular system)

3. Respiratory system

4. Abdomen.

D. INVESTIGATIONS

1. TLC, DLC, ESR, Hb%

2. Liver function test:
   - Serum bilirubin, SGOT, SGPT, Serum protein.

3. Renal function test
   - Blood urea, serum creatinine.

4. Urine albumin sugar, microscopic examination.

5. Electrocardiography.

E. TREATMENT

a. Medicolegal formalities.

b. Identification of poison, because some poisons have selective antagonist.

c. Removal of poisons by vomiting and gastric lavage.

d. Prevention of further absorption of poison by specific antidote and universal antidote.

e. Forced diuresis.

f. Supportive management:
   i) Airway
   ii) Monitoring of blood pressure,
   iii) Care of back bladder and bowel.

   IV. Nutrition.

g. Haemodialysis.