

Publication

Acute cocaine-related health problems in patients presenting to an urban emergency department in Switzerland: a case series

JournalArticle (Originalarbeit in einer wissenschaftlichen Zeitschrift)

ID 3454148

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Year 2014

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Journal BMC Research Notes

Volume 7

Pages / Article-Number 173

Emergency departments may be a useful information source to describe the demographics and clinical characteristics of patients with acute cocaine-related medical problems. We therefore conducted a retrospective analysis of 165 acute, laboratory-confirmed cocaine intoxications admitted to an urban emergency department in Switzerland between January 2007 and March 2011.; A total of 165 patients with a mean age of 32ăyears were included. Most patients were male (73%) and unemployed (65%). Only a minority (16%) had abused cocaine alone while 84% of the patients had used at least one additional substance, most commonly ethanol (41%), opioids (38%), or cannabis (36%) as confirmed by their detection in blood samples. The most frequently reported symptoms were chest pain (21%), palpitations (19%), anxiety (36%) and restlessness (36%). Psychiatric symptoms were present in 64%. Hypertension and tachycardia were observed in 53% and 44% of the patients, respectively. Severe poisonings only occurred in patients with multiple substance intoxication (15%). Severe intoxications were non-significantly more frequent with injected drug use compared to nasal, oral, or inhalational drug use. Severe complications included acute myocardial infarction (2 cases), stroke (one case), and seizures (3 cases). Most patients (75%) were discharged home within 24ăh after admission. A psychiatric evaluation in the ED was performed in 24% of the patients and 19% were referred to a psychiatric clinic.; Patients with acute cocaine intoxication often used cocaine together with ethanol and opioids and presented with sympathomimetic toxicity and/or psychiatric disorders. Severe acute toxicity was more frequent with multiple substance use. Toxicity was typically short-lasting but psychiatric evaluation and referral was often needed.

Publisher BioMed Central **ISSN/ISBN** 1756-0500

edoc-URL http://edoc.unibas.ch/56144/

Full Text on edoc Available;

Digital Object Identifier DOI 10.1186/1756-0500-7-173

PubMed ID http://www.ncbi.nlm.nih.gov/pubmed/24666782

ISI-Number MEDLINE:24666782

Document type (ISI) Journal Article