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Research Article

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Investigating the Frequency of Alcohol Intoxication in Referring Patients to Razi Hospital during 2005 to 2008

Ali Hasan Rahmani^{*1} and Farugh Parsipur²

¹Department of Clinical Toxicology, Razi Hospital, Ahvaz Jundishapur University of Medical Sciences, Ahvaz, Iran ²School of Medicine, Ahvaz Jundishapur University of Medical Sciences, Ahvaz, Iran *Email: rahmani-ah@ajums.ac.ir

ABSTRACT

In today's societies, alcohol is widely used and abused and thus it has caused many problems that by understanding its possible causes, prevalence and consumption pattern, an appropriate approach to deal with its adverse effects will be achieved. This was a descriptive study conducted on the medical records of the patients referring as alcohol intoxication patients to Ahvaz Razi Hospital during 2005 to 2008. The relevant data were obtained from the medical records. After studying the cases, a questionnaire was set based on the determined variables and the questionnaire was completed by the available data of the cases. Then, the data were analyzed with SPSS software. The level of significance was considered as $p \le 0.05$ for all statistical analyses of the study. A total of 121 cases had been referred to the Ahvaz Razi Hospital during the studied period. Two patients were passed away, but there was no significant association between mortality and the alcohol consumption type (p=0.349). Statistical analysis showed that the possibility of creating serious complications following the use of methanol is higher (p=0.000011). A significant association was observed between the alcohol consumption type and acidosis in patients (p < 0.000001). A significant association was found between the need for hemodialysis and the use of antidotes (p < 0.00001) that was related to the use of antidote in cases of needing hemodialysis when using homemade alcohol and methanol (p=0.011). In addition, there was a significant association between the alcohol consumption type and the need for ICU in patients (p = 0.006981). The results represented that alcohol consumption background in males is higher than females (p = 0.026). In this study, 10.6% of patients had acidosis.

Keywords: Acidosis, Mortality, Hemodialysis, Antidote, Alcohol

INTRODUCTION

Ethanol or ethyl alcohol normally is known as an alcohol and is probably the most common misused drug worldwide. According to international epidemiological studies, the misused rate among men is 3 times more than women and the consumption rate is higher below the age of 45 years. Alcohol directly or indirectly is a major killer of people aged 45-15 years. As, 50% of deaths are related to traffic accidents, and 5% of deaths related to fire, 67% of drowning and 67% of murder and killing others in this age group is associated with alcohol (1).

Genetic studies conducted on identical twins, have shown that genetic factors can affect the individual's control in normal alcohol consumption. Ethyl alcohol is an aliphatic hydrocarbon, odorless, colorless, with mild polarity that passes easily through cell membranes. Commercial products containing ethyl alcohol, including wine, aromatic solvents, mouthwash solution are medical solutions which contain almost 20% ethanol (2).

There is strong evidence that the ethanol effects by interfering with various neurotransmitters operations. Ethanol important actions include increasing the effect of gamma-amino butyric acid (GABA) in GABA receptors and block receptor is the subset of glutamate, N-methyl-D- Alpartat (NMDA) respectively. NMDA receptor by increasing neurons permeability to calcium influx will cause the neurotoxicity and long-term potentiating of neurons.

Animal studies have also shown that the acute effects of ethanol include competitive inhibition of Glysin connection to the NMDA receptor and blocking the neuronal glutamate transmission through NMDA receptors inhibition. Glutamate transmission undermining in long-term drinkers of alcohol will lead to excessive regulation and deficiency of NMDA receptors. The present study aimed to investigate the frequency of alcohol intoxication in referring patients to Ahvaz Razi Hospital during 2005 to 2008.

MATERIALS AND METHODS

This was a descriptive study conducted on the medical records of the patients referring as alcohol intoxication patients to Ahvaz Razi Hospital during 2005 to 2008. The relevant data were obtained from the medical records. After studying the cases, a questionnaire was built based on the determined variables and the questionnaire was completed by the available data of the cases. This was a descriptive study based on the medical records of patients. Then, the data were analyzed with SPSS software using descriptive statistics and Chi-square and Fisher tests.

RESULTS

A total of 121 cases had been referred to the Ahvaz Razi Hospital during the study period. Two patients were passed away, but there was no significant association between mortality and the alcohol consumption type (p=0.349). Of the total patients, 114 cases were male patients (94.2%) and 7 cases were female patients (5.8%) which is clearly alcohol intoxication had occurred more in males (p < .000001). 107 cases were single patients (88.4%), and 14 cases (11.6%) were married. Ethanol and handmade alcohol were used more than other alcohols.

The most common complaints of referring patients were decreasing the level of consciousness (81.8%), digestive problems (55.4%), and neurological symptoms (11.6%), respectively. In some cases, a symptom with other symptoms had occurred in the patient (Table1).

decreasing the level of consciousness	(%81.8) 99
digestive problems	(%.55.4) 67
neurological symptoms	(%11.6) 14
Malaise	(%10.7) 13
Visual impairment	(%8.3) 10
Cardiovascular symptoms	(%3.3) 4
Slight intoxication	(%1.7)2

 Table 1. Signs and symptoms of alcohol intoxication referring patients to Razi Hospital during 2005 to 2008

Of the total studied patients, 2 patients (1.9%) had died. Both patients were handmade alcohol consumer, but conducted analysis by the chi-square test didn't prove the relation between mortality and alcohol consumption type (p=0.349).

In all studied patients, only one patient (0.9%) was suffering a serious complication that due to methanol consumption his blindness was happening. Statistical analysis, which was performed by Chi-square test showed more possibility to create serious complications follow by methanol consumption (p=0.000011).

Among all studied patients, 11 patients (10.6%) suffered from acidosis that 4 cases were methanol consumers (100%), 1 case ethylene glycol consumer (50%), 3 cases were handmade alcohol consumers (7%) and 3 cases were ethanol consumers (5.3%), respectively. Using the chi-square test showed a significant correlation between alcohol consumption type and creating acidosis in patients (p < 0.000001) (Table 2) both deceased patients in this study had

acidosis that Fisher's exact test showed the higher mortality in patients with acidosis than other patients (p=0.009091).

	Acidosis				
	yes	yes no total			
Ethanol	3	54	57		
Methanol	4	0	4		
Ethylene Glycol	1	1	2		
Handmade	3	40	43		
Total	11	95	106		

Table 2. Acidosis based on the type of alcohol consumption in patients with alcohol intoxication

Among all the studied patients, 8 patients (7.5%) were required hemodialysis that 4 cases were the methanol consumer (100%) and 4 other cases were handmade consumers of alcohol (9.3%). Using the chi-square test showed a significant correlation between alcohol consumption type and creating acidosis in patients (p< 0.000001) (Table 3) that this relationship seems to be related to the higher need to hemodialysis in intoxicated patients with methanol, respectively.

Table 3. The need for hemodialysis, according to the type of alcohol consumption in patients with alcohol intoxication

	Need for hemodialysis			
	yes no total			
Ethanol	0	57	57	
Methanol	4	0	4	
Ethylene Glycol	0	2	2	
Handmade	4	39	43	
Total	8	98	106	

Among all patients, 36 patients (33.9%) were needed the antidote. 4 patients who were intoxicated with methanol had received ethanol and folic acid. Among consumers of ethylene glycol, one patient had received (50%) of folic acid, among handmade alcohol consumers, 13 patients had received folic acid (30.2%) handmade alcohol consumers) and one patient had received ethanol (2.3%) and among ethanol consumers, 16 patients had received (28.1%) folic acid. Using the chi-square test showed a significant correlation between alcohol consumption type and the use of antidote in patients (p < 0.000001) (Table 4).

Table 4. Antidote requirement based o	n the type of alcohol consumed	in intoxicated natients with alcohol
Table 4. Annuole requirement based o	in the type of alcohol consumed	in intoxicateu patients with alconor

	Need for hemodialysis				
	yes no total				
Ethanol	0	57	57		
Methanol	4	0	4		
Ethylene Glycol	0	2	2		
Handmade	4	39	43		
Total	8	98	106		

Among all patients, 18 patients (17%) were required ICU. Three intoxicated patients with methanol (75%), 9 handmade consumer alcohol patients (2.9%) and 6 ethanol consumers (10.5%) were required ICU. Using the chi-square test showed a significant correlation between alcohol consumption type and the ICU requirement in patients (p=0.006981) (Table 5).

Table 5. ICU requirement	t based on the type o	of alcohol consumption	n in patients with a	alcohol intoxication
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	Need for ICU		
	yes no total		
Ethanol	6	51	57
Methanol	3	1	4
Ethylene Glycol	0	2	2
Handmade	9	34	43
Total	18	88	106

Eighty two patients (77.4%) were hospitalized less than 24 hrs and 13 patients (12.3%) between 24 to 48 hrs, and 11 patients (10.4%) more than 48 hrs. Three consumers of ethanol patients, 4 methanol consumer patients, and 4

handmade alcohol consumer patients were more than 48 hrs in hospital. Analysis of the chi-square test indicated an association between alcohol consuming type and the duration of hospitalization (p=0.000002) (Table 6)

	The duration of hospitalization					
	Less than 24 hrs 24 to 48 hrs More than 48 hrs					
Ethanol	47	7	3	57		
Methanol	0	0	4	4		
Ethylene Glycol	2	0	0	2		
Handmade	33	6	4	43		
Total	82	13	11	106		

Table 6. The relation between the type of alcohol consumed and the patient's duration of hospitalization

About the referring time of the patient relation and the incidence of serious complications, analysis by chi-square test indicated a link between alcohol consumption type and the incidence of serious side effects in patients (p= 0.000064) (Table 7).

Table 7. The incidence of serious complications based on the referring time of the patients with alcohol intoxication

	Seriou	s comp	lication
	yes	no	total
Referred within the first 6 hours after consumption	92	0	92
Referred between 6:00 till 24:00 after consumption	23	0	23
Referred 24 hours after consumption	5	1	6
total	120	1	121

The relation between hospitalization length and the time interval of alcohol consumption to referring time was statistically significant (p< 0.00001), but an accurate analysis represents the dependence of this relation on the short duration of hospitalization in the patients who were consumed ethanol (p= 0.009) (Table 8).

Table 8. Patients	' hospitalization	period based	l on the ref	ferring time a	after consumin	g alcohol

	Referring time after alcohol consumption					
	Less than 6 hrs 6 to 24 hrs After 24 hrs to					
Less than 24 hrs	79	17	1	97		
24-48 hrs	9	3	1	13		
More than 48 hrs	4	3	4	11		
total	92	23	6	121		

In this study, 38 patients drank more than 250 cc alcohol, of which 35 patients (92.1%) were male and only 3 patients (7.9%) were female. However, statistical analyzes indicated that there was no relation between sex and alcohol consumption of the patients (p=0.327) (Table 9).

Table 9. The volume of consum	ning alcohol based	on alcohol intoxicated	patients' sex
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	The volume of consuming alcohol						
	< 250 cc	500 сс – 250 сс	> 500 cc	total			
male	28	19	16	63			
female	3	3	0	6			
total	31	22	16	69			

In this study, most male patients (51.7% men) had a history of alcohol consumption for more than once. However, only 14.3% of women had a history of previous alcohol consumption. In order to validate the Chi-square test results for patients who had a history of alcohol consumption for one time, were integrated with patients who had a history of alcohol consumption for one time, who had no history of alcohol consumption. The results showed that alcohol consumption in males was higher than females (p=0.026) (Table 10).

	Previous history of alcohol consumption					
	no	total				
male	36	7	46	89		
female	6	0	1	7		
total	42	7	47	96		

Table 10. Previous history of alcohol consumption based on the alcohol intoxicated patients' sex

Analysis of the chi-square test showed a significant relation between the need for hemodialysis and the use of the antidote (p < 0.00001). More accurate analysis of Fisher's exact test showed that this relation related to the consumption of antidote in requiring to hemodialysis cases while using handmade alcohol and methanol (p = 0.011) (Table 11).

Fable 11. A	ntidote consumpt	ion based on th	e need for l	hemodialysis and	the type of	consuming alcohol
	1				~ 1	0

Concuming alashal tura	Need for homodialusis	Antidote consumption			
Consuming alcohol type	ineed for hemodiarysis	had	Had not	total	
Ethanol	had	0	0	0	
Ethanoi	Had not	16	41	57	
Mathanal	had	4	0	4	
Methanol	Had not	0	0	0	
athylana alyaal	had	0	0	0	
entylene grycol	Had not	1	1	2	
Handmada alaahal	had	4	0	4	
Hallulliade alcollol	Had not	11	28	39	

Analysis of the chi-square test indicated a significant association between the incidence of vision problems and alcohol type (p= 0.000083) (Table 12). The direct calculated values for the chi-square test were suggested higher vision problems after using methanol.

Table 12. T	The vision problems	based on the type of a	alcohol consumption in patients
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	Vision problems		
	yes	no	total
Ethanol	3	54	57
Methanol	3	1	4
ethylene glycol	0	2	2
handmade	3	40	43
total	9	97	106

Among the patients, every patient over 30 years had a history of alcohol consumption more than once. Among 87 patients aged 15 to 30 years, 38 patients (43.7%) had a history of alcohol consumption more than once. Statistical analysis were performed by Chi-square test showed a relation between the patients' age and the history of alcohol consumption (p=0.034874) (Table 13).

Table 13. The previous history of alcohol consumption based on alcohol intoxicated patients' sex

	Previous history of alcohol consumption						
	no once More than once total						
15 to 30 years	42	7	38	87			
30 to 45 years	0	0	3	3			
More than 45 years	0	0	4	4			
total	42	7	47	96			

DISCUSSION AND CONCLUSION

According to the results of the study it can be concluded that the prevalence of alcohol intoxication in men was more common than in women that were consistent with a study conducted in Turkey (3). In this study, 1.9% of patients had died that were not consistent with the results of several other studies. The cause of this dispute was the reason that in some studies all patients were used ethanol, in another study, all patients were used only methanol, whereas in this study, all the poisoned patients with any type of alcohol were studied (3-5).

In this study, the most common complaints of referring patients, respectively were reduction of consciousness level, gastrointestinal symptoms and neurological symptoms that were consistent with previous similar studies in this area (3, 4) (6). Among patients, 100% of methanol consumers had received ethanol and folic acid as antidote agents. This rate of treatment is higher than the rate reported the study conducted study in Estonia (7). This higher rate of treated patients can be attributed to the earlier referring of the patients to the center of intoxication.

REFERENCES

[1] Noji EK, Kelen GD, Goessel TK. Manual of toxicologic emergencies: Year Book Medical Pub; 1989.

[2] Dryden CF. Medical Toxicology: A Synopsis and Study Guide. Elsevier; 2003.

[3] Schöberl S, Nickel P, Schmutzer G, Siekmeyer W, Kiess W. [Acute ethanol intoxication among children and adolescents. A retrospective analysis of 173 patients admitted to a university children hospital]. *Klinische padiatrie*. **2007**;220(4):253-8.

[4] Hassanian-Moghaddam H, Pajoumand A, Dadgar S, Shadnia S. Prognostic factors in methanol poisoning. *Human & experimental toxicology*. **2007**;26(7):583-6.

[5] Brahmi N, Blel Y, Abidi N, Kouraichi N, Thabet H, Hedhili A, et al. Methanol poisoning in Tunisia: report of 16 cases. *Clinical toxicology*. **2007**;45(6):717-20.

[6] Kalkan S, Cevik AA, Cavdar C, Aygoren O, Akgun A, Ergun N, et al. Acute methanol poisonings reported to the Drug and Poison Information Center in Izmir, Turkey. *Veterinary and human toxicology*. **2003**;45(6):334-7.

[7] Paasma R, Hovda KE, Tikkerberi A, Jacobsen D. Methanol mass poisoning in Estonia: outbreak in 154 patients. *Clinical toxicology*. **2007**;45(2):152-7.