CHAPTER 32: POISONING, TOXIC EFFECTS, ADVERSE EFFECTS, AND UNDERDOSING OF DRUGS

Exercise 32.1 (numbers 1-8)

1. Coma due to acute barbiturate intoxication, attempted suicide
   
   T42.3x2A
   R40.20

2. Two-year-old patient ingested an unknown quantity of mother's Enovid
   
   T38.4x1A

3. Syncope due to hypersensitivity to antidepressant medication
   
   R55
   T43.205A

4. Hypokalemia resulting from reaction to Diuril given by mistake in physician's office
   
   T50.2x1A
   E87.6

5. Diplopia due to allergic reaction to antihistamine, taken as prescribed
   
   H53.2
   T45.0x5A

6. Lethargy due to unintentional overdose of sleeping pills
   
   T42.71xA
   R53.83

7. Electrolyte imbalance due to interaction between lithium carbonate and Diuril, both taken as prescribed
   
   E87.8
   T50.2x5A
   T43.595A

8. Parkinsonism, secondary to correct use of haloperidol
   
   G21.11
   T43.4x5A

Exercise 32.2

1. Muscle cramps of leg due to occupational use of arsenic pesticide
   
   T57.0x1A
   R25.2
   
   Table, arsenic

2. Systemic hypocalcemia and hypokalemia due to use of lye in household chores
   
   T54.3x1A
   E83.51
   E87.6
   Y92.099
   
   Table, lye
3. Bradycardia due to ingestion of oleander leaves

Table, oleander

Exercise 32.3

1. Extrapyramidal disease resulting from previous overdose of Thorazine in an attempted suicide six months ago

2. Bilateral neural deafness resulting from accidental overdose of streptomycin administered in physician's office two years ago

3. Anoxic brain damage secondary to previous accidental overdose of Nembutal nine months ago

4. Secondary parkinsonism due to poisoning by lithium four years ago

5. Patient recently discharged from the hospital with diagnosis of acute systolic congestive heart failure.

Discharged with a prescription for digoxin 200 mcg once daily, with instructions for a low-fat and low-sodium diet and avoidance of alcohol and caffeine. Two weeks later, patient is seen in the emergency department with shortness of breath on minimal exertion and severe edema.

On questioning, patient admits to having reduced digoxin to every other day because it is too expensive.

Diagnosis: Relapse of acute systolic congestive heart failure due to low dose of digoxin.