

# **CASE OF TREATMENT OF BB AND CCB POISONING** **WITH HIGH-DOSE INSULIN EUGLYCEMIC** **THERAPY(HIET)**

**Author: Gowri Anur**

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**Affiliated Department: Emergency Medicine**

**Contact: +91 9632690116**

## **Introduction:**

The second leading cause of death by drug poisoning is by cardiovascular drugs according to NDPS, among them the most common is caused by CCB and BB overdose.

Common methods of treatment are glucagon therapy, phosphodiesterase inhibitors, and catecholamine treatment. The use of HIET is often unfairly neglected despite being an excellent way to treat toxicity, with an 84 to 100% success rate.

## **Case Report:**

The patient, a 60-year-old female, presented to the ED on April 17 2023 with complaints of fatigue and vomiting. The patient was a known hypertensive patient and had allegedly consumed 50 BP medication tablets (T atenolol and T amlodac) on April 11, 2023, following which she developed her symptoms.

On admission to the ED, vital signs of the patient were noted: pulse rate- 66 BPM, BP- 100/60 mmHg, and the patient was found to have tachypnoea and tachycardia.

On physical examination, the patient was found to have bipedal edema.

ECG findings reported the presence of a VSR.

Lab investigations of the patient revealed high pO<sub>2</sub>, hyperglycemia, mild hypokalemia, and hypochloremia.

## **Discussion:**

Treatment of amlodipine overdose was done initially with calcium gluconate. Then, the patient was started on high-dose insulin (10 IU/kg) and simultaneous euglycemia therapy (HIET). She was also on inotropic support for the hypotension through the administration of nor-adrenaline. This treatment method is often overlooked despite being cheap, effective, and readily available. Moreover, the adverse side effects of this treatment are easily treatable.

The patient was symptomatically and clinically stable after treatment and discharged.

**Keywords:** BB and CCB overdose, HIET treatment