RETROSPECTIVE EVALUATION OF THE PATIENTS ADMITTED TO ICU WITH ACUTE POISONING

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Background: Information on the treatment and follow-up of patients admitted to intensive care due to the poisoning was investigated and statistically evaluated to improve the medical approach to these cases.

Material & Methods: Patients over 17 years admitted to intensive care unit due to the poisoning diagnosis between Jan' 2015 – Dec' 2017 were included in study. Age, gender, educational status, chronic diseases history, type of the exposed toxic material, the way of exposure, length of intensive care stay, mechanical ventilation requirement, Glasgow Coma Scale (GCS) score, Acute Physiology and Chronic Health Evaluation II (APACHE II) Score and the prognosis of the patients were recorded.

Results: The patients were of 61.16% males. 41.7% of patients have a substance abuse history. Multiple substance intakes were the most common type of poisoning (24.3%). The GCS was found to be 8 or less in 85.7% of exitus patients and this rate was 14.3% in the survivors and were found to be statistically significant different (p=0.00). There was statistically significant difference between the APACHE II scores of death and surviving patients (p<0.001). The mean duration of intensive care unit stay was 3.17 days and the mortality rate during the intensive care unit follow-up was determined as 7.3%. 100% of the patients with exitus were male patients.

Conclusion: Most of the cases of toxicities treated in ICU were male patients, although majority of suicide cases were female patients. New types of synthetic drugs are seriously affecting mortality because of the increased abuse and ease of acquisition. GCS and APACHE II scores at the time of arrival and the length of hospital stay are still important indicators of mortality. Planning the treatment according to the characteristics of the patients will be meaningful not only to increase the survival rates but also to decrease the treatment costs.

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