عنوان مقاله:

Acute Iron Poisoning in Tehran-Iran: A Five-Year Retrospective Study in a Referral Poison Center

محل انتشار:

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خلاصه مقاله:

Background: The present study was conducted to determine the prevalence of acute iron poisoning among patients in a referral poison control center located in Tehran. It also studied their clinical profile, treatment, and outcome. Methods: This retrospective cross-sectional study was conducted on acute iron poisoned patients, who were admitted to the poison center from March ۲۱, ۲۰۱۵ to March ۱۹, ۲۰۲۰. Some background variables such as age, gender, ingested dose, time interval between onset of poisoning to hospital admission, the need for antidote, clinical presentations, paraclinical findings and outcome of poisoning were extracted from patients' medical records. Data analysis was carried out using SPSS software. Results: A total of YF patients with acute iron poisoning with a mean age of 15.Aa ± 11.97 years included in this study. Sixty-one (AY.F%) patients were female and the most affected age group was 19-40. years (٣۵.1%). The ingestion dose median in patients under ۱λ years old was Υ۴۵۰ (IQR=۵۶۰۰, Min= ۱۲۰, Max= ٣٠٠٠٠) mg and in the group over ۱λ years old it was 9.00 (IQR= 1)11 β, Min= 9.00, Max= ٣0.00) mg. Vomiting (۶۶.۲%) and lethargy (YF. P%) were the most common clinical presentations on admission. Metabolic acidosis was the most common abnormality in blood gas analysis (FT.Y%). Positive findings in abdominal radiography have been observed in f (۵.۴%) cases. The serum iron concentration in the patients were ۲۵٩.۵f ± ነ۵٣.٩۶ μg/dL. Moreover, mortality was reported in one case (1.4%). There was a significant difference between the age of the patients whom received deferoxamine and more patients under 1A years of age received the antidotal therapy (p=o.oom). Conclusion: The present study showed a low mortality rate among the acute iron poisoning patients. From this view, it can be .concluded that adults have lower mortality rates than children

کلمات کلیدی: Iron, Poisoning, Epidemiology

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