

Ruptured Opium Packets: The Value of Abdominal CT without Contrast

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Objective : To present a case of comatose addicted patient presented to emergency department (ED) with suspected opium overdose and to describe the abdominal computed tomography (CT) findings. **Case Report :** A 42-year-old man, who had returned to a rehabilitation center after three days of leave, was brought by the police officers unconscious to the ED. At presentation, he was in respiratory depression with GCS (Glasgow Coma Scale) score of 8, and a cold skin. Vital signs were as follows: blood pressure 90/65; respiratory rate 10/min.; and pulse rate 60/min. The pupils were miotic (pinpoint), chest examination revealed difficulty in breathing. Because of clinical manifestations of opioid intoxication, several doses of naloxone were administered intravenously, but he did not regain consciousness. On his abdominal CT, several uniform oval hyperdense foreign bodies (20×25 mm) were seen throughout the stomach, small intestines, and colon. Hyperdense materials mixed with bowel contents were also detected. The foreign materials' Hounsfield Unit (HU) was 197 that were compatible with the density of opium. He underwent emergent exploratory laparotomy, that 52 intact packets were extracted. The packets were milked to the enterotomy site in the stomach or towards the rectum and evacuated manually. About 1 liter of disseminated opium mixed with gastric secretions was evacuated by suction as well. Post-operative CT was normal and no further foreign materials was seen. The presence of opium in the packets was confirmed by chemical analysis. **Conclusion :** In addition to high contrast resolution of CT, the advantage of measuring the density of foreign objects makes it more sensitive in detection of drug packets and elimination the projections of overlapping surrounding tissues. Using CT enabled us to propose the diagnosis of ruptured opium packets by a high probability, and to guide surgical team for prompt laparotomy for prevention of fatal complication of systemic absorption of opium.