

## **REVIEW OF DEATHS ON POISONING IN THE NATIONAL HOSPITAL OF SRI LANKA, COLOMBO (NHSL)**

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**Introduction:** Sri Lanka is an agricultural country. Approximately 1% from total population are farmers and 30% from total land area is under agriculture. So farmers are predominantly using a wide range of agrochemicals to achieve maximum harvest. According to the report from Censuses and Statistical Department 2007, deaths on poisoning came as the 7<sup>th</sup> place in Sri Lanka. **Objective:** 1. To understand the magnitude and the pattern of deaths on poisoning in NHSL. 2. To identify the possible preventive measures. 3. To work out a plan to reduce deaths on poisoning in NHSL. **Method:** Fifteen months retrospective study was conducted at NHSL from 1<sup>st</sup> January 2008 to 31<sup>st</sup> March 2009. A detailed victims profile was made based on Bed Head Tickets. **Results:** A total of 45 cases of deaths on poisoning were studied. Males were predominantly affected (66.6%) with the peak median in the 4<sup>th</sup> decade of life. But 17.7% were below the age of 19 years. In most deaths the circumstance of exposure was intentional (93.3%) Agrochemicals and plant poisoning was the main agent (37.7%) for deaths. From all cases 62.2% were transferred from peripheral hospitals. Most of the transferred cases (52.4%) reached after 10 hours of ingestion. All plant poisonings were due to “Kaneru” (*Thevetia peruviana*) poisoning and they all were transferred from peripheral hospitals, more than 100 km away from Colombo. In Kaneru poisoning on admission asystole occurred in 29.4% deaths and Temporary Pace Maker inserted in 58.9% deaths and most of the deaths occurred (52.9%) within 6 hours of admission. Only 15.5% cases had serious psychiatric illness and only 11.9% had chronic diseases. **Conclusion:** Easy availability of agrochemicals leads to intentional poisoning on deaths. To prevent these mortalities strict implementation and enforcement of laws should be done in control of sale, marketing, distribution and advertising of pesticides. Transferring patients from peripheral hospitals should be limited by improving health facilities in the General hospitals which are situated close by. Health education and public awareness specially, with regard of safety measures are recommended. Stress management and counseling are also recommended.