

Case Report**Camphor poisoning - An unusual cause of seizure**Deshmukh D P¹, Nakhle B D¹, Bhagat J², Singh R³**ABSTRACT**

Camphor is a common, pleasantly smelling house-hold substance with spiritual, medicinal and aromatic uses. However it has potential neurotoxicity. We report a patient who presented with generalized tonic clonic seizure and transient psychotic behavior following consumption of camphor as a traditional remedy for anal fissure.

Key words : Camphor poisoning, Seizures, Neuro Toxicity.

Introduction -

Camphor is a cyclic ketone of hydro aromatic turpine group traditionally obtained from distillation of bark of camphor tree *Cinnamomum camphora*. It is topically used to relieve pain, as a cold remedy, for hemorrhoids and in various over the counter topical applications¹.

Majority of reported cases are as a result of accidental consumption by children, and some cases of poisoning due to topical application, and inhalation. Its use as a traditional remedy for various ailments is not uncommon in India and awareness about its potential toxicity is lacking².

Case Report -

A 35 year old female was brought to casualty with history of one episode of generalized tonic clonic seizures followed by loss of consciousness for half hour. On regaining consciousness, she had violent behaviour. Relatives denied any history of fever, head injury, consumption of any drug or poison or any prior seizure episode.

On examination, patient was highly irritable, disoriented, incoherent, violent, intimidating and had to be restrained. Patient had to be sedated with injectable haloperidol, phenargan and lorazepam on

advice of psychiatrist. Systemic examination revealed no further abnormality. Her metabolic parameters and CT head was within normal limits. On day 2, patient was in sedated state, but there was no seizure episode or violent behavior. On day three, she was fully alert and well oriented. Since she was a young healthy female without any obvious cause for seizures and psychotic behavior, she was again questioned for any potential cause of her symptoms. She admitted to have consumed approximately 5 gm. of camphor (dagdi kaapur), mixed in a pedha on advise of a quack for relief of her anal fissure. Within 10 minutes of consumption, patient fell giddy and did not remember the course of events over next 30 hours.

Patient was given supportive treatment and was discharged on 5th day and has had no further symptoms over last 5 month follow up.

Discussion -

Camphor poisoning is usually accidental in children. Very few cases have been reported in adults. The exact mechanism of toxicity is unknown³. Neurological toxicity occurs with dose >50 mg/kg⁴. It easily penetrates skin and mucous membrane, as it is highly lipophilic. Symptoms appear within 5-15 minutes after ingestion and include nausea, vomiting and burning in oral cavity. This is followed by restlessness, delirium, and convulsions, which can occur soon after consumption as was seen in our patient. Death usually results from respiratory failure or status epilepticus. Cases of camphor poisoning have been reported after chronic dermal application too⁵.

There is no antidote and treatment is supportive with focus on airway management and seizure control.

¹Associate Professor, ²Assistant Professor,

³Junior Resident

Dept. of Medicine,

Indira Gandhi Govt. Medical College, Nagpur

Address for Correspondence -

Dr. Deepti Deshmukh

E-mail : pradeepti2001@yahoo.com

As it is absorbed very rapidly, there is no role of gastric lavage or activated charcoal.

Many patients visit quacks for anal ailments as our patient did in hope of low cost, surgery-free cure and shyness to consult appropriate experts, ultimately end up paying for the complications⁶.

Conclusions -

This case report emphasizes the need to revisit the history about consumption of potentially toxic household chemicals in patients with first episode of seizures and increase awareness about potential hazards of alternative medicine.

Conflicts of interest : None reported by Author.

References :

1. Chowdareddy N, Anil Kumar YC, Reshad. Camphor Poisoning - A Cause of Seizure : Case Report. *Sch J Med Case Rep* 2014;2(1): 57-58.
2. Agarwal A, Malhotra HS. Camphor Ingestion : An Unusual Cause of Seizure. *JAPI* 2008 ;56:123-124.
3. Manoquerra AS, Erdman AR, Wax PM et al. Camphor Poisoning : An evidence based practice guideline for out-of-hospital management. *ClinToxicol (Phila)* 2006; 44:357-70.
4. Bekjarovski N Radulovikj B, Snezhana. Unique Case With Seizures After Prolonged Use of Camphor Crème In Elderly Patient. *J Clinic Toxicol* 2012, 2:4.
5. Narayan S, Singh N. Camphor Poisoning - An Unusual Cause of Seizure. *Medical Journal Armed Forces India*. 2012 68(3)252-253.
6. Gupta PJ. The role of quacks in the practice of proctology. *European Review for Medical and Pharmacological Sciences* 2010; 14: 795-798.