



Poison HOTLINE

1-800-222-1222

June 2023



Did you know

The IPCC receives the majority of calls about the ingestion of wild mushrooms in the late spring and early summer. Many of the calls involve children who taste or swallow mushrooms they find in the yard. Any time an unidentified mushroom is ingested, there is the potential for serious, possibly life-threatening poisoning as dangerous mushroom species do exist in Iowa.

Identification of a wild mushroom takes a trained mycologist. The IPCC closely monitors all mushroom exposures for symptoms. Delayed onset of symptoms can develop with poisonous mushrooms.

For questions regarding the ingestion of wild mushrooms or management of a wild mushroom ingestion, contact the Iowa Poison Control Center immediately at **1-800-222-1222**.

Serotonin Syndrome

Serotonin syndrome is a clinical diagnosis characterized by altered mental status, increased muscular tone, and autonomic instability in the setting of exposure to serotonergic medications. There is no test that confirms the diagnosis of serotonin syndrome. It can occur with both therapeutic use and acute overdose – particularly when two or more drugs that increase serotonin availability by different mechanisms are used simultaneously. A wide variety of drugs are implicated in serotonin syndrome such as psychiatric medications, neurologic medications, recreational drugs, antibiotics, opioids, and supplements. Some common examples include SSRI's, SNRI's, MAOI's, tricyclic antidepressants, venlafaxine, lithium, trazodone, buspirone, L-dopa, L-tryptophan, cocaine, amphetamines, MDMA, dextromethorphan, fentanyl, meperidine and linezolid.

Serotonin syndrome results from excessive stimulation of serotonin in the central and peripheral nervous system at serotonin 1A and 2A receptors. Common manifestations are altered mental status, tremors, hyperreflexia, clonus, muscular hypertonicity, hyperthermia, tachycardia, and hypertension. Severe cases can see severe hyperthermia, acidosis, rhabdomyolysis, renal failure, seizures, shock and death.

The Hunter Criteria are commonly used as a guide for the diagnosis of serotonin syndrome and summarized below:

The patient has been exposed to a serotonergic agent and other causes for the patient's condition have been ruled out, the patient likely has serotonin toxicity if any of the following are met:

- (1) Spontaneous clonus.
- (2) Inducible clonus AND [agitation OR diaphoresis].
- (3) Ocular clonus AND [agitation or diaphoresis].
- (4) Tremor AND hyperreflexia.
- (5) Hypertonia AND temperature $>38^{\circ}\text{C}$ AND [ocular clonus or inducible clonus].

For questions regarding serotonin syndrome and its management, please call the Iowa Poison Control Center at **1-800-222-1222**.

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