



Poison HOTLINE

Partnership between Iowa Health System and
University of Iowa Hospitals and Clinics

March 2013



Did you know

2C-I, 2C-E and 2C-B are part of a class of psychedelic drugs known as phenethylamines and have recently been linked to multiple overdoses and deaths. The "2C drugs" are known for their stimulant hallucinogenic effects. 2C-I, also known as "Smiles," is most commonly found as a white, crystalline powder which is usually snorted or ingested. The effects of 2C-I are likened to a combination of Ecstasy (MDMA) and LSD, only more intense. 2C-I overdoses have caused seizures, kidney failure and fatally high blood pressure. Like other synthetic drugs of abuse, the 2C drugs are not detected in routine urine drug tests.

Huffing: A Gateway to Drug Abuse

Inhalant abuse ("huffing") is the intentional inhalation of chemical fumes with the goal of getting high. A wide variety of household products can be abused. The typical age range of inhalant abusers is 12-25 years of age.

The onset of effects is quick, usually within a few minutes, and can last for minutes to hours, depending upon the substance and amount inhaled. Initial symptoms include drowsiness, lightheadedness and loss of inhibitions. Other acute symptoms may include dizziness, hallucinations, delusions, belligerence, apathy and impaired judgment. Chronic huffing may lead to depression, personality changes, weight loss, ataxia, muscle weakness, and may eventually cause permanent brain and organ (kidney, bone marrow, etc.) damage. Sudden sniffing death can occur from lethal arrhythmias induced by the inhalant. Death from huffing can also be caused by asphyxiation, aspiration or suffocation.

Some of the substances commonly abused include paint thinner, gasoline, felt-tip markers, nail polish remover, glue, spray paint, spray deodorant, hair spray and keyboard dust removers. These products are easily purchased and inexpensive, making them attractive and "user friendly" for teens. Abusers can inhale the vapors from a plastic bag held over the mouth, by breathing through a chemical-soaked cloth, or by inhaling directly from an open container.

There is no readily available test to verify that a person has been abusing inhalants, but there are many clues that suggest a person has been huffing. An inhalant abuser may have a rash around the nose or mouth; there may be odor of paint or solvents on their clothing, breath, or body; the person exhibits symptoms of intoxication; and the hands or skin may be discolored from spray paint. Chronic huffers may show signs of diminished cognitive functioning or damage to the kidney, liver, brain or lungs.

Poison center specialists may recommend checking blood studies for liver or kidney damage and obtaining a chest x-ray and ECG. Treatment is symptomatic and supportive, along with a chemical dependency evaluation.

For questions regarding either exposure to, or management of, inhalant abuse, call the Iowa Statewide Poison Control Center at 1-800-222-1222

*Pat Gunia RN, BSN, CSPI
Certified Specialist in Poison Information*

POISON
Help
1-800-222-1222

The logo for Poison Help. It features the word "POISON" in a bold, sans-serif font above the word "Help" in a larger, bold, sans-serif font. To the right of "Help" is a red pill bottle with a white cap and a white skull and crossbones symbol on its side. Below "Help" is the phone number "1-800-222-1222" in a bold, sans-serif font.

Post and share this edition of **Poison Hotline** with your colleagues. Send comments or questions to Poison Hotline, 712-234-8775 (fax) or nobletf@ihs.org. To subscribe or unsubscribe from this distribution list, contact the Iowa Poison Center education office at 712-279-3717. Read past issues of **Poison Hotline** at www.iowapoison.org.