

**CAMPHOR – THE HOUSEHOLD NOXIOUS!****Asafeya A.\*<sup>1</sup>, Dr. Britto Duraisingh<sup>2</sup>, Dr. Selvaraj<sup>3</sup> and Dr. S. Haja Sheriff<sup>4</sup>**<sup>1</sup>Pharm.D Intern Students, Nandha College of Pharmacy-Erode.<sup>2</sup>Clinical Pharmacist, Pharm.D., M. Sc (C&PT), Ganga Medical Centre & Hospitals (P)Ltd.<sup>3</sup>Neonatologist & Paediatrician, D.C.H., D.N.B (Paed)., Ganga Medical Centre & Hospitals (P)Ltd.<sup>4</sup>Professor & H.O.D of Pharmacy Practice, M. Pharm., Ph.D., Nandha College of Pharmacy.Article Received on  
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Pharmacy-Erode.**ABSTRACT**

A wide variety of medicines and substances can cause serious illness or kill a child who ingests just a single dose in small quantity. Camphor is one such substance easily available in many Indian households and is not a very well recognised potentially fatal toxic compound. We report the two cases presented with seizures due to ingestion of camphor.<sup>[8]</sup>

**KEYWORDS:** Camphor, Ingestion, Neurotoxicity.**INTRODUCTION**

Camphor is a commonly seen in many Indian household for religious purposes, which can cause severe poisoning when taken small amounts in children. Neurotoxicity in the form of seizure can occur soon after ingestion.<sup>[4]</sup>

**CASE REPORT****CASE -1**

A 2 years old boy was apparently well 15 minutes back when he developed convulsion. Child was playing at that time. Convulsion was in the form of sudden onset of unresponsiveness followed by up rolling of eyes, deviation of head towards right side followed by stiffness of all limbs which last about 10 minutes; He recovered consciousness after 30 minutes. No history of fall / trauma. No history of fever. No history of vomiting. No history of any unknown food / drug ingestion. History of playing an oil preparation which contains

camphor. The child was admitted and treated with nasal midazolam & IV fluids following which child Regained consciousness and as he was seizure free and accepting feeds well.

## CASE -2

A one year old developmentally normal thriving adequately immunised child was admitted with seizure following camphor ingestion. baby was apparently normal since evening 7.30PM after which she developed up rolling of eyeballs & clenching of teeth associated with frothy discharge from mouth associated with loss of consciousness following ingestion of camphor lasted for 15minutes till 7.45PM. History of vomiting 1 episode. After admission child was observed for 24 hours & as she does not have any seizure / respiratory depression during hospital stay she was discharged.

## DISCUSSION

mphor is a very toxic compound which can prove fatal for infants and children on ingestion even in very small doses.<sup>[1]</sup> The strong aroma associated with camphor has attracted its used in many oils, inhalants and ointments, especially as a remedy for the common cold. It is a component of many preparations available over the counter and has a potential for accidental ingestion by infants and small children.<sup>[5]</sup>

The site of action of camphor is supposed to be intraneuronal and on the oxidation cycle at the phase above the flavo protein. Cytochrome-B level of the cytochrome oxidase system. This has been supported by post-mortem changes of severe anoxia in the neurons.<sup>[3]</sup>

Mechanism of Camphor Toxicity: Camphor is readily and rapidly absorbed from the skin, gastrointestinal and respiratory tracts. Onset of symptoms is generally within 5-20mins of ingestion and peaks with in 90minutes. Convulsions or coma may appear without warning. Death in a small child may occur with ingestion of as little as 5ml of camphorated oil(1gram of camphor).<sup>[7]</sup> Odour of camphor on the breath and in the urine may assist in diagnosis of camphor poisoning.<sup>[2]</sup>

Treatment is primarily supportive with a focus on airway management and seizure control. Skin and ocular decontamination should be done by flushing with copious amount of water. Products with camphor inhalation should be moved to fresh air. Induction of emesis should not be performed. Gastric lavage is not helpful as camphor is rapidly absorbed. Activated charcoal may be considered if there are other ingredients that are effectively absorbed.<sup>[9]</sup>

Short acting anticonvulsants like lorazepam should be used to seizures. Barbiturates should be used if benzodiazepines are unsuccessful. Haemodialysis is not of much benefit.<sup>[8]</sup>

## CONCLUSION

The easy availability of camphor in various forms put children at high risk of camphor poisoning.<sup>[6]</sup> It is potentially fatal, even when taken in small doses in children. It is remarkable for its rapidity of action. Camphor containing products cannot exceed 11% of camphor as set by FDA, but in our country concentration of camphor is not mentioned in the products.<sup>[1]</sup>

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