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Introduction Autointoxication with nutmeg in an emergency setting is a rare, but potentially a life-threatening event. Despite the low incidence of 'tentamen suicidii' (TS) with nutmeg, this substance is cheap and readily available. Early recognition of a suicide attempt with nutmeg poisoning can be extremely difficult, especially when nobody witnessed the nutmeg intake. Worldwide there are only a few cases reporting TS with nutmeg.

Objectives To present a case of TS with nutmeg committed by a suicide attempter.

Aims To review available literature on TS with nutmeg.

Methods A case report is presented and discussed, followed by a literature review.

Results Five published cases of suicide attempts with nutmeg were found while searching through PUBMED and Embase. Our case describes a 57-year-old female, diagnosed with borderline personality disorder, who has been admitted to the emergency department in a state of agitation, diminished cognition, respiratory difficulties and hemodynamic instability. Electrocardiography showed a fast sinus arrhythmia with no uschemic or hypertropic changes. Blood sampling, serum and urine toxicology did not reveal any abnormalities. In view of the complexity of her condition, she admitted to have taken a large dose of nutmeg. The patient was kept for observation, offered reassurance, and rehydration.

Conclusion The presentation of inexplicable clinical state accomplished by disturbances of central nervous, respiratory and hemodynamic systems in the population of patients with attempting suicide should alert the physician to the rare but probably underreported possibility of nutmeg autointoxication.

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EV630

Inhaled loxapine for the treatment of agitation in borderline personality disorder

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Introduction Inhaled loxapine has shown efficiency in the treatment of the mild-moderate agitation syndrome of schizophrenia and mania patients. Its rapid response and calming effect non-sedative allow to hypothesize reasonable efficiency and tolerability in borderline personality disorder diagnosed patients.

Aims Analyze the efficiency and tolerability of inhaled loxapine as a pharmacological approach in the treatment of agitation in borderline personality disorder (BPD) clinical diagnosed patients.

Materials and method An application was administered for every agitation episode in BPD patients treated with inhaled loxapine in the emergency room or the psychiatric ward, which included BARS and CGI-S scales for the evaluation of each episode and its severity, before and after its use. Other secondary measures of efficiency were taken into account, such as requirement of physical restraint.

Results In the majority of evaluated episodes inhaled loxapine decreased notably initial BARS and CGI-S values and no serious clinical side effects attributable to this medication were observed.

Conclusion In our sample, inhaled loxapine was efficiency and well tolerated pharmacological intervention for agitation in BPD patients.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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Psychiatric emergency prehospital: Incidence and management of agitation in Valladolid (Spain)

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Introduction Agitation is a frequent and complex emergency. Pre-hospital management of agitation requires appropriate measures to preserve patients' safety, stabilize the patient and alleviate suffering, and transfer to the hospital psychiatric services, including involuntary admission if needed.

Objectives To describe the incidence and management of agitation by the emergency medical service of Castilla y León (SACyL) in an area of Valladolid.

Methods Retrospective study of all psychiatric emergencies attended by a prehospital emergency medical service in 2014.

Results One hundred and twenty-one emergencies were attended over a catchment area that covered 170,000 inhabitants (1.4/1000 inhab.). Overall, 55% were men, mean age was 45 years, 60% were considered psychiatric, 29% organic and 11% mixed. However, men had a higher frequency of organic (39%) compared to psychiatric (48%) agitation than women (16% and 75%, respectively), and most of them were related to alcohol or drug use. Among patients with psychiatric or mixed agitation 81% had psychiatric history and the pharmacologic treatment most frequently used was intramuscular midazolam.

Conclusions The incidence of acute agitation accounts for almost half of the total psychiatric emergencies in the prehospital setting. Since there are different healthcare providers in charge, specific protocols as well as treatment procedures are needed to provide the most adequate management, in order to ensure the best psychiatric emergency chain.

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Do we know why we indicate a mechanical restraint?

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Introduction and objectives Mechanical restraint is a therapeutic procedure commonly applied in acute units in response to psychomotor agitation. Its frequency is between 21 and 59% of patients admitted. These patients represent a risk to both themselves and for health workers. There are not clinical studies that compared if there are differences of the frequency of the specific indication for the mechanical restraint.