

Nova Scotia Antidote Program

2021 Quarterly Report #4
Oct 1st, 2021 to Dec 31st, 2021

The Nova Scotia Antidote Program is pleased to present another Quarterly Report, which provides information on changes and trends in antidote therapy and reports ongoing Provincial Antidote usage.

Antidote usage Oct 1st, 2021 to Dec 31st, 2021						
Western Zone	Northern Zone	Eastern Zone	Central Zone	IWK	Quarterly Total	Year to Date
14	2	19	15	2	52	190

Antidote usage 2021 FULL YEAR					
Western Zone	Northern Zone	Eastern Zone	Central Zone	IWK	2021 total
45	22	42	77	4	190

Highlights of antidote use during the past 3 months

The use of **52 antidotes** were reported in **27 different patient cases** in Nova Scotia. Of these, 5 antidotes were used by community hospitals, 36 in regional facilities and 11 in tertiary hospitals.

- There were 5 beta-blocker, 2 calcium channel blocker and 2 mixed beta-blocker/calcium channel blocker toxicity cases. These cases often require a larger number of antidotes from the kit, ranging from 1-5 antidotes (avg 2.4/case). The antidotes used in these cases include high dose insulin, atropine, sodium bicarbonate, calcium chloride, calcium gluconate, glucagon, and fat emulsion.
- Naloxone was the most reported antidote at 17 uses in known or suspected opioid toxicity.

Reported Antidote Use in Nova Scotia 2021 – Year in Review

- Fomepizole was used for 7 patients with suspected toxic alcohol toxicity in 2021. This is a 65% decrease compared to 2020 where fomepizole was used 20 times.
- High-dose Insulin/Dextrose was used in 12 cases, a 71% increase over last year. High-dose Insulin/Dextrose is most often used for patients with beta blocker and calcium channel blocker toxicity, due to its strong inotropic effects.
- Use of Digoxin Fab Fragments was similar in 2020 to 2021, with 6 and 8 uses respectively.

In 2021, an antidote was used about every 2 days in an emergency department in Nova Scotia. This is consistent with previous years.

It is important to contact the Poison Centre for several reasons.

1. We can help with the management of patients with **acute or chronic drug toxicity** and with appropriate use of antidotes and other treatments. For example – we can help with assessing the need for fomepizole in the case of suspected or confirmed toxic alcohol exposures.
2. As part of the Provincial Antidote Program, we are required to track the use of all antidotes. We use this information to support the stocking of the antidote kits in order to serve each hospital best.
3. Data from the IWK Poison Centre is used to monitor and track exposures, including poisonings, overdoses, accidental exposures, adverse events etc. across Nova Scotia.

Contact the Poison Centre – 1-800-565-8161