

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, 2023 to Dec 31st, 2023						
Western Zone	Northern Zone	Eastern Zone	Central Zone	IWK	Quarterly Total	Year to Date
11	9	13	32	1	66	257

Antidote usage 2023 FULL YEAR					
Western Zone	Northern Zone	Eastern Zone	Central Zone	IWK	2023 total
54	32	51	114	6	257

### Highlights of antidote use during the past 3 months

There was report of **66 antidotes** used in **57 different patient cases** in Nova Scotia. Of these, 4 antidotes were used by community hospitals, 47 in regional facilities and 15 in tertiary hospitals.

- Sodium Bicarbonate was used 13 times this quarter. There was an increase in use of Sodium Bicarbonate to alkalinize the urine in order to enhance drug elimination and mitigate the risks of salicylate toxicity.
- Fomepizole was used 4 times to treat massive acetaminophen overdoses or toxic alcohols.
- Naloxone was again the most reported antidote at 31 uses in known or suspected opioid toxicity.

### Reported Antidote Use in Nova Scotia 2022 – Year in Review

- Antidote use has increased again from 2022 to 2023, continuing a trend from previous years. There were 257 unique antidote uses reported in 2023, this is a 17.4% increase over last year.
- Reported use of Physostigmine decreased in Nova Scotia in 2023. Physostigmine can be used in certain situations to significantly improve symptoms of agitation and delirium due to anticholinergic toxicity (contact the Atlantic Canada Poison Centre before use).
- Sodium Bicarbonate use increased 65.6% between 2022 and 2023.
- Recorded use of Glucagon remains stable for 2022 and 2023, with 8 uses in both years.

*In 2023, an antidote was used about every 1.42 days in an emergency department in Nova Scotia. Use of the antidotes continues to increase.*

### 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 Octreotide in the case of refractory hypoglycemia due to acute or chronic sulfonylurea toxicity.
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 to serve each hospital best.
3. Data from the Atlantic Canada 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**