

Clinical Toxicology Lab  
Basra University - College of  
Pharmacy  
Evaluation of Drug Toxicity on  
Human

Lecturer

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# Introduction

- Toxicology is a study of poisons on living organisms.
- poison is any chemical that has an ability of producing detrimental actions on living organisms
- The regulatory agencies have established a consistent framework for risk assessment due to exposure to a chemical poses to human beings and to the environment.

# Risk assessment

- This framework includes the steps of hazard identification, dose–response assessment, exposure analysis, and characterization of risks.
- **The term hazard or risk** is defined as the probability of an adverse outcome
- **Risk assessment** is the systematic scientific characterization of potential adverse health effects because of human exposures to hazardous agents.

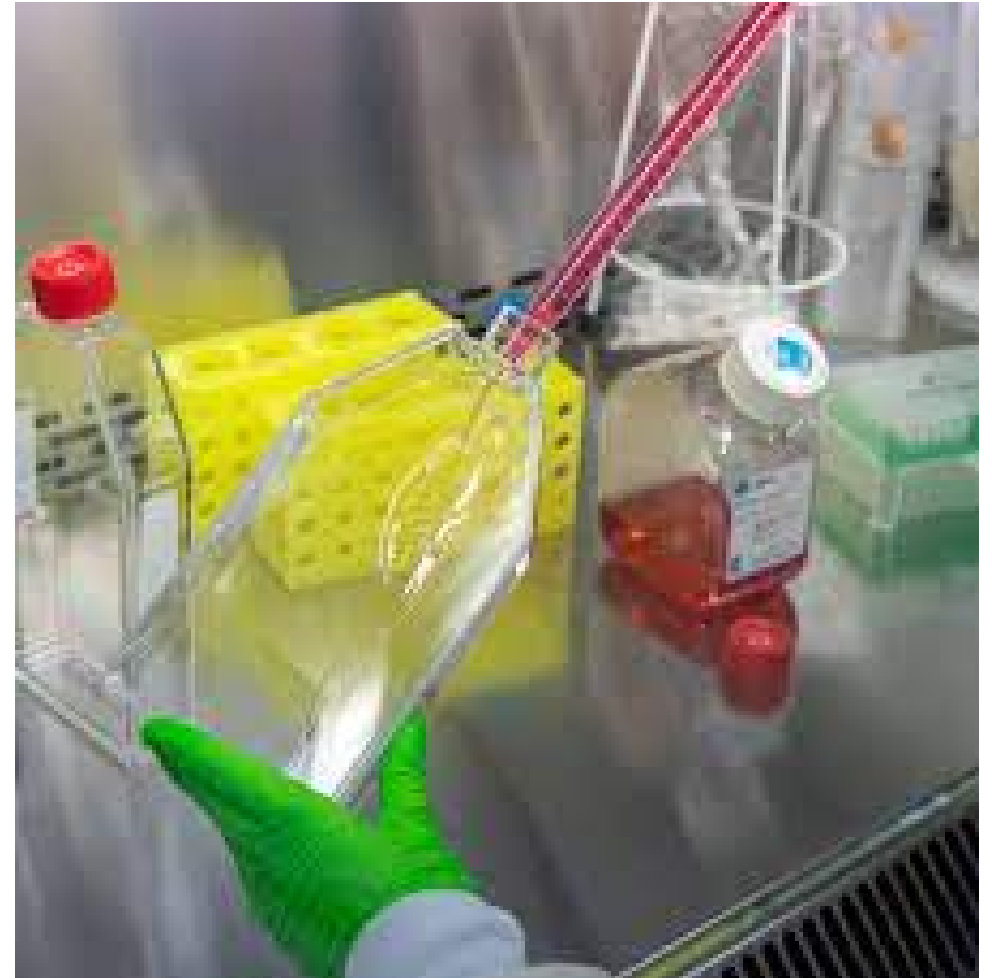
# Hazard identification

- Hazard identification is gathering all available information on the toxic effects of a chemical and evaluating it to determine the possible risks associated with exposure.
- Therefore, it is necessary to conduct toxicity testing for these chemicals that are developed into drugs, inhaled or ingested.



## Cell based testing (*in vitro*)

- Parts of an organism (tissues or cells) isolates and grows or maintains under controlled conditions.
- It is fast and inexpensive compared with lifetime animal-bioassay.
- Examining the efficiency of drug discovery, toxicity.



# Animal –based testing (*in vivo*)

- It is conducted to evaluate drug safety.
- Animals are carefully monitored for side effects
- After the study period, pathologists examine their organs for signs of drug toxicity.
- Testing on mice is more expensive



# Case study : Methylene Chloride Toxicity

- A 66-year-retired man was admitted to the emergency suffering from chest pain and discomfort, slurred speech .
- He has a basement workshop to preparing some furniture for repainting. He was worked three hours in his basement workshop and following leaving , he experienced the onset of his chest pain.
- The attending physician found that the victim had experienced an anterior wall myocardial infarction

# Case study : Methylene Chloride Toxicity

- . The physician examined the paint container and noted the label cautioned that the product contained 80% methylene chloride to be used only with adequate ventilation.
- Two weeks later, the patient returned home and continued his work and shortly he felt severe chest pains and was readmitted.
- His hospital course during this second acute myocardial infarction was complicated by cardiogenic shock, dysrhythmia, and heart failure.



# Case study : Methylene Chloride Toxicity

- The patient survived, and six months after discharge returned once again to his basement workshop to complete the paint stripping operation.
- Assisted by his wife, he worked slowly for two hours and following that he experienced chest pain, collapsed, and died before the arrival of the ambulance..

# Clinical evaluation (in case of emergency arrival)

## Medical history

- Exam the item that reflect methylene chloride exposure.
- Family history, particularly coronary artery disease.
- Hobbies or household projects.

## Physical examination : evaluation

- Exam the major toxic syndromes of central nervous and cardio vascular systems .
- **Regarding to Laboratory tests:**  
Methylene chloride levels in breath, blood, or urine (if exposure is recent).

# Treatment and Management :

- There is no antidote or specific treatment for methylene chloride intoxication.
- To treat acute toxic exposures, immediately remove the person from the source of exposure and give oxygen or artificial respiration, if indicated.
- Proper use of paint products and other protective equipment should be followed and avoid all exposure to such products from patients with coronary artery disease .

# References

- Casarett & Doull's Toxicology – The Basic Science of Poisons  
(6<sup>th</sup> edition)
- Principles of Clinical Toxicology (Third edition)