## 注射用氯溴酸高乌甲素致过敏性休克死亡

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【摘要】1例 26 岁女性患者因左侧乳腺纤维瘤切除术后疼痛给予注射用氯溴酸高乌甲素 8 mg 人 5% 葡萄糖氯化钠 500 ml 静脉滴注, 1 次/d。首次用药未见异常。次日静脉滴注该药约 20 min 时, 患者感觉喉部发紧, 呼吸困难, 呼吸屏住 25 次/min, 心率 55 次/min, 血压 70/55 mmHg [1 mmHg = 0.133 kPa]。立即暂停静脉并吸氧 (2 L/min), 给予肾上腺素 0.5 mg 静脉注射, 地塞米松硫酸钠 10 mg 静脉注射, 苯海拉明 20 mg 肌内注射, 多巴胺 200 mg 静脉滴注。约 5 min 后患者出现呼吸不畅, 呼吸微弱, 面色苍白, 大动脉搏动消失, 心电监护时示细线。行心肺复苏, 气管插管呼吸机辅助通气, 持续胸外心脏按压, 静脉注射肾上腺素, 静脉滴注氨茶碱。3 h 后, 患者因抢救无效死亡。

【关键词】氯溴酸高乌甲素; 过敏反应
Anaphylactic shock leading to death induced by lappaconite hydroboromide for injection  

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【Abstract】A 26-year-old female patient with excision of left breast fibroma received an IV infusion of lappaconite hydroboromide 8 mg in glucose and sodium chloride 500 ml once daily. No abnormality was found for the first time. About 20 minutes after IV infusion on the next day, the patient developed dry throat, short dyspnea. Her respiratory rate was 25 times/min, heart rate was 55 beats/min and blood pressure was 70/55 mmHg. Lappaconite hydroboromide was discontinued immediately. She was given oxygen inhalation of 2 L/min, intravenous injection of adrenaline 0.5 mg, intravenous injection of adrenaline 10 mg, intramuscular injection of diphenhydramine 20 mg and IV infusion of dopamine 200 mg. After 5 minutes, the patient lost consciousness, had weak breathing, facial cyanosis and no pulse. The electrocardiogram monitor displayed isoelectric line. The patient was treated with cardiopulmonary resuscitation, endotracheal intubation and ventilator support, chest compression, intravenous of epinephrine and infusion of hydrocortisone. The pathogenetic condition was worse progressively. The patient eventually died after 3 hours rescue.

【Key words】Lappaconite hydroboromide; Anaphylaxis
奥美拉唑引发严重过敏反应致死亡

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【摘要】 1例61岁女性患者因胃部不适口服奥美拉唑肠溶片40 mg，1次/d，用药第3天出现散在皮疹，自行停用该药。3 d后皮疹有所好转，患者再次按原剂量服用该药。再次用药2 d后患者相继出现全身皮疹、严重腹泻、呕吐、急性肾损伤和过敏性休克。诊断为奥美拉唑所致严重过敏反应。经抗过敏、稳定循环、补液、连续静脉-静脉血液透析滤过等治疗无效，家属放弃治疗后次日患者死亡。

【关键词】 奥美拉唑； 过敏反应； 死亡

Death attributed to severe anaphylactic reaction due to omeprazole  Qiu Zhihong, Ma Yinling, He Lien, Dong Zhanjun
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【Abstract】 A 61-year-old female patient with stomach discomfort received omeprazole enteric coated tablet 40 mg once daily. On day 3 of administration of omeprazole, she presented sporadic erythema and stopped the medicine by herself. Three days after drug withdrawal, her symptom of erythema improved. She received omeprazole enteric coated tablet at the previous dosage again. Two days after taking medicine again, the patient developed rash all over her body, severe diarrhea and vomiting, acute renal injury and allergic shock in succession. She was diagnosed as severe allergic reaction due to omeprazole. The patient received the treatments of antianaphylaxis, maintaining the function of circulatory system, fluid infusion, and continuous veno venous hemodialfiltration. But the therapeutic effect was poor. The patient died on the second day after giving up the treatment which decided by her family members.

【Key words】 Omeprazole; Anaphylaxis; Death

患者女，61 岁，因全身皮疹 10 d，腹泻 7 d，意识不清，少尿 1 d，于 2016 年 5 月 4 日收入我院 ICU。3 周前（4 月 12 日）患者在外院诊断为关节炎，给予玻璃酸钠关节腔内注射和双氯芬酸钠片（25 mg，3 次/d）口服。因服用双氯芬酸钠片后出现胃肠道不适，患者 4 月 25 日就诊于当地诊所，遵医嘱停用双氯芬酸钠片，口服奥美拉唑肠溶片 40 mg，1 次/d。服用该药 2 d 后（4 月 27 日）患者四肢远端出现散在皮疹，考虑可能与口服药物有关而自行停用该药。停药 3 d 后（4 月 30 日）皮疹有所好转，患者按原剂量再次服用奥美拉唑肠溶片。5 月 2 日患者全身出现皮疹，就诊于当地诊所，给予氯苯那敏 4 mg 口服，3 次/d，并停用奥美拉唑肠溶片。当晚患者出现稀水样便，伴恶心，呕吐，呕吐物为胃内容物。于当地