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REVIEW ARTICLE

Q1 Identification and initial management of intoxication by alcohol and other drugs in the pediatric emergency room[☆]

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KEYWORDS

Binge drinking;
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Abstract

Objective: To review the screening, diagnosis, evaluation, and treatment of intoxication by alcohol and other drugs in children and adolescents in the emergency scenario.

Data source: This was a narrative literature review.

Data summary: The detection of this problem in the emergency room can be a challenge, especially when its assessment is not standardized. The intentional and episodic use of large amounts of psychoactive substances by adolescents is a usual occurrence, and unintentional intoxication is more common in children younger than 12 years. The clinical picture in adolescents and children differs from that in adults and some particularities are important in the emergency scenario. After management of the acute condition, interventions targeting the adolescent at risk may be effective.

Conclusion: The diagnosis and treatment of intoxication by alcohol and other drugs in adolescents and children in the emergency scenario requires a systematic evaluation of the use of these drugs. There are few specific treatments for intoxication, and the management comprehends support measures and management of related clinical complications.

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PALAVRAS-CHAVE

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Identificação e manejo inicial de intoxicações por álcool e outras drogas na sala de emergência pediátrica**Resumo**

Objetivo: Revisar o rastreamento, diagnóstico, abordagem e tratamento das intoxicações por álcool e outras drogas de crianças e adolescentes no contexto de emergência.

Fontes dos Dados: Foi realizada uma revisão narrativa da literatura.

Sumário dos achados: A detecção desse problema na sala de emergência pode ser um desafio, especialmente quando sua avaliação não é padronizada. O uso intencional e em grandes quantidades episódicas de substâncias psicoativas é o padrão em adolescentes e a intoxicação não intencional é mais comum em crianças menores de 12 anos. O quadro clínico em adolescentes e em crianças difere dos adultos e algumas particularidades são importantes no contexto de emergência. Após o manejo do quadro agudo, intervenções visando o adolescente de risco podem ser efetivas.

Conclusão: O diagnóstico e tratamento das intoxicações por álcool e outras drogas em adolescentes e crianças em emergência requer uma avaliação sistemática do uso dessas drogas. Há poucos tratamentos específicos para intoxicação e o manejo é de suporte e das complicações clínicas relacionadas.

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Introduction

The use of psychoactive substances (PAS) among adolescents is a worldwide problem. In Brazil, heavy episodic drinking is still higher among boys (24%), but has increased among girls (from 11% to 20%).¹ Drug use, except for alcohol and tobacco, was reported by 24% of elementary and high school students; energy drinks combined with alcohol (15%), marijuana (6%), inhalants (9%), anxiolytic drugs (5%), and cocaine (2.5%) were the most prevalent.² In pediatric emergencies, a higher proportion of adolescents using PAS is expected; patients present due to intoxication symptoms, complications of preexisting diseases, and traumatic injuries.

The challenge in the care of these patients starts at problem detection. When there is no established protocol for the assessment of PAS use in the emergency unit, the frequency and severity of this use are usually underestimated.³ The delay in the diagnosis or non-diagnosis of a disorder caused by PAS use in the emergency room may increase hospitalization time, costs, and the risk of rehospitalization.⁴

The treatment of PAS-related intoxication among adolescents initially involves the diagnosis and symptomatic treatment and/or approach of the other consequences of their use. After the acute condition is managed, the emergency unit is an important place of referral for treatment and for preventive approaches in cases of disorders related to PAS use. The aim of this article was to describe the assessment, diagnosis, symptoms, and initial approach of PAS intoxication, as well as brief interventions for at-risk adolescents.

Diagnosis**Substance use surveillance**

A good screening tool to be used in the emergency room should be brief, easy to implement, and have adequate sensitivity and specificity to complement patient clinical evaluation and to provide subsidies for the therapeutic intervention. The literature is quite controversial in the indication of screening instruments to detect the use or diagnosis of problems involving PAS, and there is no specific guideline for the assessment of young individuals.⁵ Currently, there are some validated questionnaires, as well as some biochemical analysis tests that evaluate the presence of PAS in biological matrix.

Several tools have already been tested for this population, but the care, relax, alone, family, friends, trouble (CRAFT) and the alcohol use disorder identification test (AUDIT) are the tools with the best performance.⁶ The advantage of CRAFT is that it also assesses consumption of multiple drugs with a moderate sensitivity and specificity. For alcohol issues, the AUDIT showed the highest sensitivity and specificity (95% and 77%, respectively), and it can be applied in approximately 2 min. The most appropriate cut-off to determine problems related to alcohol consumption is 3.⁷ It is also worth noting that the question "How often did you drink in the previous month?" when the answer was equal to or greater than three episodes, showed a sensitivity of 90% and specificity of 84% to detect this problem.⁷

The biochemical tests to detect substance use have a practical usefulness in several clinical situations. The ethyl alcohol and rapid urine tests were shown to be interesting

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