

		Табела 9. Специфични токсини и нивни антидоти
ТОКСИНИ	АНТИДОТИ	ДОЗИ
Ацетаминофен	<i>N</i> -Acetylcysteine	Acetylcysteine, 140 mg/kg PO, then 70 mg/kg q4h for up to 17 doses, <i>or</i> 150-mg/kg IV over 1-hr period with 50 mg/kg over 4 hr followed by 100 mg/kg over 16 hr
Антихолинергици	Physostigmine	Physostigmine, 0.5-2 mg IV in adults or 0.2 mg/kg in children over 2-min period for anticholinergic delirium, seizures, or arrhythmias
Арсен,олово,жива	BAL Penicillamine	20-40 mg/kg/day; 500 mg tid in adults; may cross-react with penicillin in allergic patients
Black widow spider bite	<i>Latrodectus</i> antivenin	One vial by slow IV infusion is usually curative; may cause anaphylaxis
Бензодиазепини	FLumazenil	2 mg, then 0.3 mg, then 0.5 mg, up to 5 mg; not to be used if patient has signs of TCA toxicity; not approved for use in children but probably safe
Бета блокатори	Glucagon Insulin and glucosa Intralipid 20%	5-10 mg in adults, then infusion of same dose per hour 1.5ml /kg regular insulin IV push followed by 1-10 unit/kg/hr; blood glucose should be checked frequently; D10 at 100 mL/hr with boluses of D50 i hypoglycemia occurs 5 mL/kg during 2-3 minutes followed by infusion of 0.25 mL/kg/min Reported to be effective for highly protein bound drugs with large volumes of distribution such as local anesthetics, beta-blockers, calcium channel blockers, and tricyclic antidepressants
Калциумканал блокатори	Calcium Glucagon Insulin and glucose	1g calcium chloride IV in adults, 20-30 mg/kg/dose in children, during a few minutes with continuous monitoring; repeat as needed 10 mg in adults, then infusion of same dose per hour Some dose as for beta-blockers

Цијаниди	hydroxycobalamin	5mg in 100 mL of NS during 15 minutes; repeat if necessary
Cyanide, hydrogen sulfide	Sodium thiosulfate Sodium nitrite Hydroxycobalamin	50mL of 25% (12.5 g; 1 ampule) in adults; 1.65 mL/kg IV in children 10mL of 3% (300 mg; 1 ampule) in adults; 0.33 mL/kg slowly IV in children 5g in 100 mL of NS given during 15 minutes
Digitalis glycosides	Digoxin-specific Fab	10-20 vials if patient is in ventricular fibrillation; otherwise dose fragments on the basis of serum digoxin concentration or amount ingested
Ethylene glycol	Fomepizole Pyridoxine Tkiamine	15mg/kg Ч 1, then 10 mg/kg q12h Ч 4, until ethylene glycol < 20 mg/dL; adjust dose during dialysis 100 mg IV daily 100 mg IV
Hydrofluoric acid	Calcium gluconate	3.5 g in 5 oz of KY jelly topical; apply liberally to affected skin
Iron	Deferoxamine	15mg/kg/hr IV; higher doses reported to be safe
Isoniazid, hydrazine, and monomethylhydrazine	Pyridoxine	5g in adults, 1 g in children, if ingested dose unknown; antidote may cause neuropathy in very large doses
Lead	DMSA (succimer) EDTA	Re ported useful for arsenic and lead as well; one 100-mg capsule per 10-kg body weight tid for 1 week, then bid, with chelation breaks 75mg/kg/day by continuous infusion; watch for nephrotoxicity, best done in hospital
Local anesthetics and others	Intralipid 20%	5 mL/kg during 2-3 minutes followed by infusion of 0.25 mL/kg/min Reported to be effective for highly protein bound drugs with large volumes of distribution, such as local anesthetics, beta-blockers, calcium channel blockers, tricyclic antidepressants, and others
MDMA-related hyperpyrexia	Dantrolene	2.5 mg/kg IV Lower doses have also been reported to be effective

Neuroleptics	Dantrolene	5 mg/kg IV for neuroleptic malignant syndrome
Methanol	Folate or leucovorin Ethanol Fomepizole	50mg IV q4h in adults while patients have serious toxicity Loading dose, 10 mL/kg of 10%; maintenance dose, 0.15 mL/kg/hr of 10%; double rate during dialysis 15 mg/kg q 1, then 10 mg/kg q12h q 4, until methanol < 20 mg/dL; adjust dose during dialysis
Methemoglobin-forming agents	Methylene blue	1-2 mg/kg IV, one 10-mL dose of 10% solution (100 mg) is typical for an adult without anemia
Opioids	Nalmefene Naloxone	0.5-1 mg; much longer half-life than naloxone 2mg; less to avoid narcotic withdrawal, more if inadequate response; same dose in children