**Anaemic Hypoxia: Methemoglobinaemia Caused by Deliberate Ingestion of Pesticides**

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| **Introduction**Methemoglobinaemia is a potentially fatal disorder where ferrous part of heme is oxidized to ferric form which results in decreased oxygen-carrying capacity of haemoglobin. There are multiple known causes of drug-induced methemoglobinaemia of which pesticides are rare and less reported. **Case description**A 33-year-old woman presented to the emergency department with alleged deliberate ingestion of pesticide that she found near the paddy field. She complained of vomiting and dizziness six hours post-ingestion. Upon arrival, vital signs revealed a blood pressure of 142/80 mmHg, a heart rate of 114 beats/min, and a respiratory rate of 20 breaths/min. Her oxygen saturation was 87% in room air, and despite wearing a non-rebreather mask at 15 L/min, her saturation remained below 90%. Generally, the patient appeared mildly tachypneic and cyanosed with a slat-grey tongue. Other physical examinations were unremarkable. Her arterial and venous blood were chocolate brown in colour. Her arterial blood gases (ABG) revealed SaO2 of 94.8% and PaO2 of 75.8 mmHg in room air with lactate of 2.2 mmol/L. The discrepancy between PaO2 and SpO2 and the failure of SpO2 to improve with conventional oxygen therapy raised the suspicion of methemoglobinemia. This was confirmed by serum MetHb level of 58.2%. She was administered 2 mg/kg IV methylene blue. After treatment, the patient developed maple-green-coloured urine. The patient gradually recovered, and her saturation improved to 99.6%. Her tongue mucosa turned pink, and her blood changed to red in colour. The repeated MetHB level prior to ward admission was 7.9%. **Discussion**Normal methemoglobin levels are less than 2%. Methemoglobinaemia causes tissue oxygenation to decrease, and cyanosis may develop with the shift of the oxygen-dissociation curve to the left. Commonly implicated pesticides include indoxacarb, aluminium phosphide, and paraquat. Magnesium nitrate is the inert ingredient used as a preservative in some pesticides that can cause methemoglobinemia. The mainstay of the treatment is methylene blue in non-G6PD-deficient patients.**Conclusion**Pesticide poisoning is a rarely reported cause of acquired methemoglobinaemia. Timely suspicion and early management are crucial to prevent complications and mortality. |

**Keywords:** Methemoglobinemia, methylene blue.