**A CASE REPORT: DIARRHETIC SHELLFISH POISONING IN PEDIATRIC**

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| **INTRODUCTION**Shellfish toxin syndrome is related to a poisoning due to consumption of oyster or clams harvested from costal area infected with biotoxin. Neurotoxic shellfish poisoning (NSP) is fatal and widely discussed but diarrheic shellfish poisoning (DSP) is carrying mild symptom but can be life threatening in pediatric population.**CASE PRESENTATION**A three-year-old girl with no-known medical illness presented to resuscitation zone for multiple episodes of vomiting and loose stool, more than twenty episodes. Prior to that, patient was eating seafood. She developed this symptom two hours after consuming it. Upon presentation to emergency department, patient was lethargic with GCS E4V4M6, good pulse volume, poor skin turgor, sunken eye and crying without tears. Patient was normotensive and tachycardic with normal saturation. Patient subsequently diagnosed as food poisoning, with severe dehydration 10%, possible diarrhetic shellfish poisoning. The shellfish sample was sent to the laboratory for the detection of biotoxin level. Patient was admitted to PICU and after three days of admission, she was discharged well. **DISCUSSION**Diarrhetic shellfish poisoning (DSP) is one of the shellfish toxin syndromes. Among all the shellfish toxin syndrome, paralytic shellfish poisoning (PSP) is one of the poisonings which carried mild symptom whereas (NSP) produced most fatality. DSP produces gastrointestinal symptoms, usually beginning within minutes to a few hours after consumption of toxic shellfish and symptom can last up to 72 hours. Although not fatal, the illness is characterized by diarrhea, nausea, vomiting, and abdominal pain. Treatment is supportive. If left untreated patient can developed severe dehydration. Management of the case should not be stop in the hospital level. It must be followed by the detection of contaminated shellfish in the area. It is crucial in protecting the public from getting infected by the biotoxin. The public health official, fisheries department, need to be informed in the effort to mitigate measure in the affected area from causing outbreaks.**CONCLUSION**Managing shellfish toxin syndrome is a multidisciplinary and interagency approach in treatment and prevention of the complication.**KEYWORD**  |

Shellfish toxin syndrome, Diarrhetic shellfish poisoning, Pediatrics