A 17-year-old boy was rushed to the hospital in South Africa with recreational drug overdose (Ecstasy). On examination, he was comatose. One gram of vitamin C in saline was administered intravenously over 30 minutes. Within 20 minutes, the boy was awake and talking. "Since vitamin C is readily available, safe, cheap and easy to use," the authors conclude, "it seems worth while [*sic*] to propagate its use in amphetamine overdose and for an easy solution to a complicated problem to be made general knowledge."—*R.D.M.*

Rapid Recovery from Ecstasy Intoxication

C.E. Beyers
Military Hospital, Pretoria

To the Editor: With the alarming increase of recreational drug abuse in South Africa, doctors need to be secure with its management. Unfortunately very little about the subject is taught to medical undergraduates and important information is often difficult to obtain. When faced with an overdose, the difficulty in finding useful information becomes even more apparent.

As a community service doctor, I was recently faced with such a situation. The patient, a 17-year-old boy, was brought to casualty with a history of having taken three bottles of liquid Ecstasy (amphetamine). He was also reported to have had a grand mal convulsion before he was rushed to hospital. The ambulance personnel had administered naloxone while en route in case of potential opioid intoxication. On examination the patient was comatose (Glasgow Coma Scale 3/15, confirmed by four trusted senior colleagues) but still breathing spontaneously. When we tried to intubate him he had a positive gag reflex and no airway could therefore be safely secured immediately. Other signs of amphetamine intoxication, such as tachypnoea, tachycardia, hyperactivity, hypertension and cardiac dysrhythmias, were disappointingly absent.

With urine drug screening a high level of amphetamine was revealed, and the urine was also positive for cannabis. Apart from a slight rise in the blood alcohol level (0.05 g/dl), no other toxic substances were detected on blood screening.

When I searched for information on amphetamine intoxication, one of the most accepted and trusted internal medicine textbooks had little to offer other than stating that by acidifying the urine, the excretion of amphetamines could be increased from 2% up to 70%. Unfortunately no information as to how to accomplish this was given. Another textbook suggested the use of ammonium chloride, but its use was discouraged because of side-effects to the serum pH and difficulty in administering the drug. A call to the toxicology centre suggested only a stomach washout, undesirable in a comatose patient without a protected airway.

Fortunately, upon discussion with a colleague we improvised a very easy solution: vitamin C. It was given intravenously (1 g in 200 ml saline over 30 minutes). Within

20 minutes the urine pH dropped from 7.5 to 5.0. We were surprised that the patient recovered almost simultaneously; within 20 minutes he was wide awake and talking.

Since vitamin C is readily available, safe, cheap and easy to use, it seems worth while to propagate its use in amphetamine overdose and for an easy solution to a complicated problem to be made general knowledge.