

Clinical Practice Guidelines:

Toxicology and toxinology/Gamma-hydroxybutyrate

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Date	February, 2021
Purpose	To ensure a consistent approach to the management of gamma-hydroxybutyrate poisoning.
Scope	Applies to Queensland Ambulance Service (QAS) clinical staff.
Health care setting	Pre-hospital assessment and treatment.
Population	Applies to all ages unless stated otherwise.
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Gamma-hydroxybutyrate

February, 2021

Gamma-hydroxybutyrate (GHB) and its precursors gamma-butyrolactone (GBL) and 1,4-butanediol are recreational drugs ingested as liquids. Common street names of GHB include Fantasy, Grievous Bodily Harm (GBH) and Liquid E.^[1]

Clinical features

The duration of toxic effects is short, with complete recovery expected within 4–8 hours.^[1]

- Euphoria
- Drowsiness
- Myoclonus
- Agitation/Actue behavioural disturbance
- Coma
- Bradycardia
- Hypothermia
- Respiratory depression

In toxic doses there is typically a rapid onset of coma. The patient is often rousable with stimulus only to return to unconsciousness once undisturbed.

Risk assessment

- In overdose, GHB can be lethal secondary to respiratory compromise.
- Ingestion of the GHB precursor GBL can cause life-threatening acidosis.^[2]

Additional information

- Myoclonic jerking movements are common and may be confused with seizure.^[3]
- Coma longer than six hours duration suggests an alternate diagnosis or sedating co-ingestant.^[3]
- Full recovery is expected when good supportive care is provided.

