

Clonidine overdose can cause significant CNS and CVS depression. Children are more susceptible to clonidine toxicity.

## **Toxicity / Risk Assessment**

Effects correlate poorly with ingested dose
Ingestions >10 mcg/kg are associated with
significant toxicity especially in children &
adolescents

Ingestion >1-2 tablets is potentially
life-threatening in a child
Rapid onset of toxicity: within 2 hours
In massive ingestion, toxicity can last
> 24 hours

#### **Clinical features:**

- CNS: drowsy, ataxia, miosis, coma
   (absence of miosis does not exclude exposure)
- CVS: bradycardia, ↓BP, AV block,
   brady-arrhythmias, postural
   hypotension, transient hypertension
- Respiratory: bradypnoea, apnoea
- Others: hypothermia may occur

**Management:** Primarily supportive. Intubation and ventilation may be required in severe toxicity.

**Decontamination**: Activated charcoal is NOT indicated due to rapid onset of CNS depression

**Bradycardia** - treatment is rarely needed unless concurrent hypotension or reduced end-organ perfusion

**Atropine**: 0.6 mg IV boluses 5-minutely up to 3 doses (child 0.02 mg/kg boluses)

**Isoprenaline (ADULT initial dosing)**: 20 mcg IV, repeat to clinical response up to 100 mcg, via peripheral line.

(Children unresponsive to atropine: discuss with Clinical Toxicologist)

## **Hypotension**

- Correct bradycardia as above, then fluid load: 10-20 mL/kg IV crystalloid (*Discuss with Clinical Toxicologist if* persistent ↓ BP)

#### **Hypertension**

- Usually transient and resolves spontaneously. No treatment is usually required.

#### **Naloxone**

- Naloxone is not considered as a routine part of the management of clonidine toxicity.

# Disposition

- Discharge pending mental health assessment if asymptomatic and well 4 hours post ingestion
- Admit all symptomatic patients for at least 12 hours or until symptoms resolve
- Patients with severe CNS or CVS depression should be managed in HDU/ICU
- Exclude significant postural hypotension and ensure able to mobilise safely prior to discharge
- Advise the patient not to drive for at least 72 hours post exposure