

### **Fatal Intoxication of Twin Girls After Ingestion of Topical 2% Viscous Lidocaine**

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Background: Lidocaine is a well-known neurocardiotoxin. Significant toxicity from oral ingestion is uncommon in the pediatric age group.

Hypothesis: Oral ingestion of viscous lidocaine can result in significant toxicity and death in pediatric patients

Case Report: Twin 13-month-old girls who were both being treated for teething pain by their pediatrician with topical lidocaine, presented separately but within 48 hours of each other with generalized tonic-clonic seizures followed by cardiac arrest. After prolonged resuscitation and return of spontaneous circulation, Twin A was transferred to the pediatric ICU but without cortical neurologic activity. Her parents were visiting her when Twin B arrived in the ER with a near-identical presentation. However, Twin B was unable to be resuscitated and expired. The family were recent immigrants to the US. Extensive home investigation revealed the empty bottle of 2% viscous lidocaine. Serum and urine testing from both children later revealed toxic concentrations of lidocaine and monoethylglycinexylidide. Further questioning of the family eventually suggested that their teenaged brother may have confused the lidocaine with acetaminophen and had been administering the medication in their milk bottles because of incessant crying.

Discussion: Viscous lidocaine remains a commonly prescribed medication for symptomatic relief of multiple ailments. Potential toxicity of ingested viscous lidocaine is previously poorly described. This tragic case demonstrates the potential for severe toxicity of this commonly prescribed medication.

Conclusion: While uncommon, systemic toxicity from orally ingested viscous lidocaine is a potentially devastating complication of overdose, especially in cases of poor caretaker health literacy. Clinicians should be aware of the potential for intoxication and reserve topical anesthetics for situations where they are absolutely necessary.