



American College of Medical Toxicology

Physicians Specializing in the Care of Poisoned Patients

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The American College Of Medical Toxicology Speaks Out On The Dangerous Hazards Of Propofol Abuse

Like many other drugs, propofol can make you high but also has important therapeutic indications and is an indispensable medication. Tighter control as well as education is critically important to ensure appropriate and safe use of this drug.

Phoenix, AZ July 28 2009. Propofol is not a typical drug of abuse. It doesn't come as a pill or a powder; it is only available for intravenous administration. It is not scheduled by the DEA, suggesting its abuse potential is very low. It is primarily used by trained physicians and nurse anesthetists to induce a coma-like state in a patient so he/she is not awake and not aware of discomfort. Its use is normally confined to the operating room, intensive care unit, or emergency department.

Unfortunately, like many psychoactive agents, propofol can be abused. In the last few years a number of medical publications have attested to this growing problem. (See references). At a low dose, before the patient is fully unconscious, propofol may induce a sense of euphoria similar to that which is experienced with other sedative agents (such as benzodiazepines and opioids). Sexual hallucinations and disinhibition have also been described. This "high" may be an experience that the user finds pleasurable and seeks again. Repetitive use of propofol may result in intense drug cravings and drug dependence similar to other drug addictions. Deaths have occurred from self-administered use.

The major danger with many drugs, including propofol, is that people vary in their response to a given dose, and this sensitivity is unpredictable. A dose that causes a "high" in one person may be the same dose that causes respiratory depression leading to death in another person. (See references). And with propofol in particular, the window between safe and potentially deadly in an unmonitored patient is very small. In one survey study of anesthesiology residents, 25 cases of individuals abusing propofol were reported including 7 who died from propofol abuse.

Propofol, even when used properly, can cause respiratory depression. Used by trained personnel in monitored settings, propofol is very safe and highly effective. However, It is dangerous to use in an unmonitored setting. For someone who is already on a mechanical ventilator (such as in the operating room or intensive care unit) propofol-induced respiratory depression is not a concern, and even at times desirable, because the ventilator will continue to breath for the patient.

As medical toxicologists, members of the American College of Medical Toxicology (ACMT) [www.acmt.net] routinely administer propofol to treat severely agitated patients suffering from the effects of certain drug overdose or withdrawal. We are also called to consult on, and treat, patients who have received excessive doses of medications and consequently suffer from their toxic effects, including respiratory depression. Because of the potential life-threatening toxicity of propofol its use outside a monitored setting is strictly contraindicated. Because of its potential for abuse and toxicity, ACMT strongly encourages tighter control of its distribution. Ongoing education about the lethal risks of propofol is necessary to hopefully prevent senseless deaths from propofol in the future.

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