



BACLOFEN INDUCED METHEMOGLOBINEMIA – AN UNEXPECTED VILLAIN

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KEYWORDS :

BACKGROUND:

Methemoglobin is a condition in which heme iron is oxidized from ferrous (Fe^{2+}) to ferric (Fe^{3+}) state. Baclofen is a GABA-B agonist commonly used in muscle relaxant treatment regimens. Chronic Baclofen use causing methemoglobinemia has never been reported. Hereby a Case report of the same as follows.

Case Study:

A 54 year old male presented with breathlessness for 3 days, abdominal pain and constipation. Diagnosed with C3, C4 vertebral prolapse quadriparesis and started to take Baclofen for his muscle spasm complaints for 3 years. ABG showed hypoxia with normal peripheral SpO_2 . CTPA, 2D ECHO were normal. Blood METH-HAEMOGLOBIN levels were considered due to disparity between arterial and peripheral oxygenation levels which was elevated (3.8). Thereby Diagnosed with Methemoglobinemia.

DISCUSSION:

Methemoglobinemia occurs with routine use of anesthetics, (benzocaine, lidocaine), quinones, and nitroglycerin. All known causes of methemoglobinemia were ruled out. G6PD was within normal limits (9.11). Since the patient developed symptoms in the 5th decade of life, congenital causes can be ruled out. Acquired causes of methemoglobinemia were ruled out from taking detailed history. Since there was significant intake of baclofen, the chance of it being the cause of methemoglobinemia can be considered.

CONCLUSION:

Baclofen-induced methemoglobinemia is a rarely occurring condition, with minimal to no documented case reports. This makes it a new entity that needs to be evaluated and researched.

REFERENCES:

1. Achille Iolascon, Paola Bianchi. Recommendation for diagnosis and treatment of methemoglobinemia. Am J Hematol. 2021 Dec 1;96(12)