

## VET 433A: Toxic Mushrooms and House Plants

### Amanitins overview

- Bicyclic octapeptides found in three genera of mushrooms:
  - *Amanita* spp.
  - *Galerina* spp.
  - *Lepiota* spp.
- Family of 8 known compounds
  - $\alpha/\beta/\gamma$  subtypes are the most prevalent
  - Responsible for nearly all fatal mushroom poisonings in people
  - A single good-sized mushroom is enough to kill an adult
  - NOT degraded by cooking, freezing, or the acidic stomach environment

### Mushrooms

Toxin	Amanitin	Isoxazoles (psychoactive alkaloids)	Psilocybin-containing hallucinogenic mushrooms
<b>Examples</b>	<i>A. phalloides</i> (Death cap) <i>A. ocreata</i> (destroying angel)	<i>Amanita muscaria</i> (Fly Agaric) <i>A. pantherina</i>	<i>Psilocybe cyanescens</i> , <i>Conocybe</i> , <i>Panaeolus</i> , <i>Gymnopilus</i>
<b>Relevant ADME</b>	Utilizes the transport system for bile acids to enter hepatocytes OATP1B3 and NTCP  Enterohepatic cycling maintains high intra-hepatocyte concentrations  No known metabolism  80-90% is eliminated in the kidney  Short plasma $t_{1/2}$		Toxin is metabolized to psilocin
<b>Toxicity</b>	Extremely toxic: $\alpha$ -amanitin IV LD <sub>50</sub> in dogs of 0.1 mg/kg		Toxin = Psilocybin metabolized to psilocin

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	Oral LD <sub>50</sub> generally <1 mg/kg		
<b>MOA</b>	<p>Binds eukaryotic DNA-Dependent RNA polymerase II which inhibits RNA elongation essential for transcription</p> <p>*Basically inhibits protein synthesis</p>	<p>Muscimol – GABA receptor agonist</p> <p>Ibotenic acid – Mimics glutamate</p>	
<b>Clinical Signs</b>	<p>Long asymptomatic incubation delay following ingestion (6-12 hours)</p> <p>GI phase 12-24 hours</p> <ul style="list-style-type: none"> <li>-diarrhea</li> <li>-vomiting</li> <li>-abdominal pain</li> <li>-dehydration</li> </ul> <p>Hepatotoxic phase 24-48h</p> <ul style="list-style-type: none"> <li>-liver damage and coagulopathy</li> </ul> <p>Hepato-renal phase</p> <ul style="list-style-type: none"> <li>-hemorrhage</li> <li>-convulsions</li> <li>-fulminant hepatic failure</li> <li>-coma</li> <li>-death</li> </ul> <p><u>Presenting signs</u></p> <p>Emesis, diarrhea, lethargy, anorexia</p> <p>Clin path findings</p> <p>HIGH ALT</p> <p>Hypoglycemia</p> <p>Coagulopathy</p>	<p>Occur within 30 min to 2 hours of exposure</p> <p>Disorientation, paresis, ataxia, seizures</p> <p>Deep sleep, coma, respiratory depression</p>	<p>Serotonergic activity in the CNS</p> <p><b>Humans:</b> hallucinations, increased HR, high BP</p> <p><b>Dogs:</b> Ataxia, aggression, vocalization, nystagmus, seizures, increased temperature</p>
<b>Diagnosis</b>	AMATOXtest		

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	<p style="text-align: center;">Ante-mortem -Serum, urine, GI contents CBC and chem panel</p> <p style="text-align: center;">Post-mortem tox testing Liver and kidney are + up to 2-3 weeks post-exposure</p> <p style="text-align: center;">Necropsy</p>		
<b>Lesions</b>	<p style="text-align: center;">Liver: Swollen Lungs: Petechiae Stomach: Ulceration</p> <p>Panlobular, uniform coagulative necrosis Pyknotic nuclei, eosinophilic cytoplasm Acute tubular necrosis is present in dogs that develop renal failure</p>		
<b>Treatment</b>	<p style="text-align: center;">Activated Charcoal Antiemetics IVF Correct hypoglycemia Vit. K<sub>1</sub> Plasma transfusions SAMe Octreotide Silymarin/Silibinin</p>	<p style="text-align: center;">Decontamination</p> <p style="text-align: center;">Seizure control</p> <p style="text-align: center;">Provide ventilation</p>	<p style="text-align: center;">Often not necessary due to the short duration of effects</p> <p style="text-align: center;">Decontamination</p> <p style="text-align: center;">Seizure control</p>

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### Random Factoids and Images

Recommended dosages of silibinin  
(humans) 20 mg/kg/day IV  
50 mg/kg of silibinin IV given 5 and 24h  
post-exposure to *A. phalloides*

Small/Medium dog  
1 tab: 24 mg silybin A+B  
Large dog  
1 tab: 70 mg silybin A+B  
Poor bioavailability

*A. phalloides* (Death cap)



*A. ocreata* (Destroying angel)



*Amanita muscaria* (Flying Agaric)



*Psilocybe cyanescens*



*Panaeolus foenisecii* (Haymaker's  
mushroom)



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### Houseplants

Plant	<b>Cycad Palms</b> <i>Cycas spp.</i> , <i>Zamia spp.</i> , <i>Macrozamia spp.</i>	<b>Lilies</b> Tiger Lily, Asiatic Lily, Easter Lily, Day Lilies	<b>Macadamia Nuts</b>	<b>Oleander</b> <i>Nerium oleander</i>	<b>Dumbcane</b> <i>Dieffenbachia spp.</i> <i>Philodendron</i> <i>Epipremnum</i>
<b>Toxin</b>	Cycasin Leaves, seeds, and roots are toxic Seeds are the most toxic  Dogs: 1-2 seeds can be lethal  Sheep and cattle are also affected	Unknown Leaves, flowers and pollen are toxic  Susceptible species: Cats  Target organ: Kidney	Unknown  Only reported in dogs  Estimated toxic dose 2.4 g of nuts/kg BW  5-40 nuts/dog	Oleandrin  As little as 0.005% of an animal's body weight in dry oleander leaves may be fatal	Insoluble Ca <sup>2+</sup> -oxalated (raphide structure)  All parts of the plant are toxic
<b>MOA</b>	-	Unknown	Unknown	Cardiac glycoside  Similar to digitalis and inhibits cellular membrane Na <sup>+</sup> /K <sup>+</sup> ATPase by inducing conformational change in the enzyme and inhibiting its actions. This leads to an increase in extracellular potassium, intracellular sodium concentrations, and intracellular calcium resulting in disturbances in the	Bundle of needles within an idioblast cells  Crystals are forcefully ejected when cells are chewed and cause mechanical irritation  Penetrate oral mucosa, tongue and throat

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				heart's electrical conductivity	
<b>Clinical Signs</b>	Within 24 hours Vomiting Diarrhea Depression Anorexia Liver Failure	Vomiting Depression within 12h followed by transient recovery  Renal failure initiated within 48 hours of exposure	Within 12 hours of ingestion  Weakness, especially in the hind limbs Tremors Stiffness Depression Vomiting	Vomiting Lethargy Diarrhea Arrhythmias	Rapid (within 2h of ingestion)  <u>Mild</u> Hypersalivation Head shaking Chewing/pawing at mouth  <u>Severe</u> Oropharyngeal edema Anorexia, vomiting, depression Dyspnea due to airway obstruction
<b>Treatment</b>	GI decontamination Activated Charcoal Supportive and symptomatic care GI protectants Fluids	GIT decontamination IVF diuresis  Good outcome, low incidence of ARF	Recovery within 48 hours	Gastric decontamination Hemodynamic support Correcting electrolyte abnormalities Arrhythmia management  Digoxin specific Fabs have been seen to be helpful in reducing mortality in humans	Supportive and symptomatic care Flush mouth with water Yogurt, milk, cottage cheese Dyspnea > go to clinic  @ Clinic Flush mouth Antihistamine to decrease swelling Fluid therapy GI protectant Respiratory support