

## Jimson weed

**Jimson weed (*Datura stramonium*)**, grows along roadsides, in pastures and in vacant lots throughout Maryland. Other common names for jimson weed include devil's weed, stinkweed, locoweed, thornapple, Angel's trumpet, and Devil's trumpet. The seeds and dried leaves of jimson weed are often ingested dry or in a tea, or smoked, to deliberately produce delirium and hallucinations. Jimson weed is primarily used by adolescents looking for a no-cost, easily accessible hallucinogenic high.

Jimson weed can reach 3-5 feet in height, has purple or white trumpet- or funnel-shaped flowers, and prickly seed pods which split along 4 seams to reveal numerous small black seeds. Poisonings from this plant are often seen in the Fall, when the plant reaches maturity. All parts of the plant contain atropine, hyoscyamine and scopolamine. Exposure to these alkaloids produces **anticholinergic effects**. Signs and symptoms include dilated pupils, diminished bowel sounds, urinary retention, dry mucus membranes, flushed skin, tachycardia, hypertension, hyperthermia, agitation, delirium, hallucinations and seizures.



Most cases of jimson weed intoxication respond to basic supportive care. Activated charcoal can be given for recent ingestions if the patient is awake and able to protect their airway. Benzodiazepines may be used for agitation or seizures. Drugs with anticholinergic properties should be avoided (e.g., atropine, antihistamines, haloperidol). Physostigmine is a tertiary amine that rapidly traverses the blood brain barrier and inhibits cholinesterases resulting in reversal of anticholinergic effects. Long lasting reversal of signs and symptoms is generally not achieved because of the relatively short duration of action of physostigmine. The use of physostigmine should be limited to severely affected patients, and **only with poison center consultation** due to the risk of seizures, bradycardia and dysrhythmias.

Call the Maryland Poison Center for assistance in managing suspected cases of jimson weed intoxication.

### ***DID YOU KNOW THAT...*** a color change might occur when preparing to give Acetadote® (acetylcysteine) injection?

Acetadote® (acetylcysteine) injection is an antidote for acetaminophen overdose. When the vial is punctured with a needle, the air that is introduced causes a slight change in color within 5 to 15 minutes, from colorless to a slight pink or purple color. This color change does not affect the safety or efficacy of the drug.



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If you do not wish to receive faxes or emails from the Maryland Poison Center, call 410.706.7604 or circle your fax number and fax this back to 410.706.7184. Supported by Maryland Department of Health and Mental Hygiene