Purpose: Peppermint oil (Mentha piperita) is commonly recommended and used orally for a variety of ailments ranging from common cold to irritable bowel syndrome. The side-effects mentioned are usually mild like heartburns, nausea, vomiting, allergic reactions and said to be minimally toxic in acute oral studies. We describe for the first time, a near fatal case of oral peppermint oil ingestion.

Clinical Features: A 40 years old female brought to the emergency room, suspected to have ingested peppermint oil in a suicidal bid. She was comatose, had a heart rate of 60 beats/min, blood pressure not recordable, peripheral pulses not felt, respiratory rate of 6-8/minute, oxygen saturation of 30% and cold and clammy extremities. She was intubated (without any resistance) and mechanically ventilated. Gastric lavage was done with normal saline. Rapid IV fluid infusion started and when blood pressure did not respond, dopamine infusion was started and increased to 10mcg/kg/min. External warming devices were applied. Arterial blood gas analysis revealed severe hypoxemia with mild metabolic acidosis. After 8 hours, she was hemodynamically stable and started to respond to painful stimuli by opening eyes. After 24 hours, she could be weaned off from the ventilator. Interestingly, chest auscultation and chest skiagram did not reveal any major abnormality.

Conclusion: Unlike IV peppermint oil injection, toxic dose of oral peppermint oil probably does not affect the lungs but causes hypoxemia by central action as evidenced by bradypnea, and shock like state which can be due to vasodilatation as well as by central action. Hence, Peppermint oil can be dangerous and life threatening if taken in higher dosage and this warning should be included in all literature involving peppermint oil.

References: