## TOXICOLOGICAL **ANALYSIS IN PATIENTS** WITH

# INHALATION **INJURY DURING THEIR** HOSPITALIZATION

Inhalation injury (INHI) is caused by inhalation of hot steam and/or products of combustion. The upper airways are damage mainly by hot air, the lower respiratory tract is usually affected rather by toxins and chemicals.

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#### **REFERENCES:**

[1] Miller K, Chang A. Acute inhalation injury. Emerg Med Clin North Am (Internet). 2003;21:533–57. Available from: https://linkinghub.elsevier.com/retrieve/pii/S073386270300011

[2] Hwang J, Xu C, Agnew RJ, et al. Health Risks of Structural Firefighters from Exposure to Polycyclic Aromatic Hydrocarbons: A Systematic Review and Meta-Analysis. Int J Environ Res Public Health [Internet]. 2021;18:4209. Available from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8071552/

**ABREVIATION:** ABSI: abbreviated burn severity index; BAL: bronchoalveolar lavage; CRP: C-reactive protein; OH PAHs: hydroxy-polycyclic aromatic hydrocarbons; PAHs: polycyclic aromatic hydrocarbons; PCT: procalcitonin; TBSA: total body surface area; 1-OH-Naph: 1-hydroxynaphthalene; 2-OH-Naph: 2-hydroxynaphthalene; 2-OH-Fluo: 2-hydroxyfluorene; 3-OH-Fluo: 3-hydroxyfluorene; 1-OH-Phen: 1-hydroxyphenanthrene; 4-OH-Phen: 4-hydroxyphenanthrene; 9-OH-Phen: 9-hydroxyphenanthrene; 2/3-OH-Phen: 2/3-hydroxyphenanthrene; 1-OH-Pyr: 1-hydroxypyrene.

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#### INTRODUCTION The level and duration of exposure to the toxic compounds can strongly influence the inhalation injury (INHI) severity, treatment, and its success [1]. Polycyclic aromatic hydrocarbons (PAHs) are one of the smoke components in large fires and enter the body by inhalation [2]. PAHs and their metabolites (OH-PAHs) may affect the INHI grade, patients' status, and prognosis for recovery.

#### RESULTS

(0.003 – 3.8 ng/ml) of the measured PAHs and their nitro- and oxy- derivates were detected in BAL samples. Only exeption, the 1,4-naphthoquinone was detected as high abundant (IQR 98.3 – 150.75 ng/ml).

2 High concentration of OH-PAHs sum in urine decrease during first 2 days of the structure of the structure



Figure 1. Kinetic graph for the sum of hydroxylated metabolites of polycyclic aromatic

hydrocarbons (OH-PAHs) in the urine samples of ten patients with inhalation injury (INHI)

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There is a strong positive correlation between some of the clinical markers and OH-PAHs in urine such as TSBA and ABSI score with OH-Fluo's, and AST/ALT ratio with OH-Phen's.



Figure 2. Correlation between clinical variables and urine concentrations of hydroxylated metabolites of polycyclic aromatic hydrocarbons (OH-PAHs) in patients with inhalation injury on Day 1 of hospitalization; \*\*\*p<0.001, \*\*p<0.01, \*p<0.05, Creatinine/S – creatinine in blood serum, Creatinine/U – creatinine in urine

**DESIGN** OF TOXICOLOGYCAL PART **PATIENTS:** i with Low-Grade INHI MATIRCES: bronchoalveolar lavage (BAL) day 1 day 3 SAMPLING TIME: day of hospitalization day 7 day 14

### AIMS

- To determine the most abundant PAHs in the bronchoalveolar lavage (BAL) and OH-PAHs in urine.
- To describe the dynamic changes in the levels of these toxic compounds throughout hospitalization in BAL and in urine.
- To correlate these findings with clinical variables of the patients with inhalation injury at the beginning of the hospitalization.



### METHODOLOGY

(4)



#### **INHI PROJECT**



### CONCLUSIONS

- hospitalization.



The samples (BAL and urine) were collected at the Department of Burns and Plastic Surgery, University Hospital Brno, Czech Republic, from 2020 to 2023.

The composition and amounts of PAHs (using GC-MS) and their derivates such as nitro-PAHs and oxy-PAHs (using APGC-MS/MS) were measured in BAL samples.

In urine samples, only the hydroxylated metabolites of PAHs (OH-PAHs) were measured.

The analysis of toxic compounds run in the Trace Analytical Laboratory RECETOX RI.

The OH-PAHs levels in urine can be measured reliably. In patients with INHI, OH-PAHs in urine were correlated with several clinical variables (AST/ALT, TBSA, ABSI).

High-Grade INHI was associated with higher total concentrations of OH-PAHs in day 14 of the

The results from BAL samples indicating that this matrix is not suitable for analysis of PAHs due to the concentration below the limit of quantification.

> IMPORTANT! Sum of OH-PAHs in urine has a potential to serve as a prognostic marker in these patients.