

turned to normal, as did the patient's consciousness and orientation.

Paroxetine and other selective serotonin reuptake inhibitors (SSRIs) are able to induce SIADH, which is reversible after discontinuing treatment with these drugs.¹⁻⁴ The other drugs the patient received have not been reported as SIADH inducers. A recent review³ reports published data from January 1980 to May 1995 of SIADH associated with the use of fluoxetine hydrochloride, fluvoxamine maleate, paroxetine, and sertraline hydrochloride. This report included data of unpublished reports from different organizations.³ There were 736 cases of hyponatremia and SIADH associated with treatment with SSRIs. Fluoxetine was involved in 554 (75.3%) of the cases, paroxetine in 91 (12.4%), sertraline in 86 (11.7%), and fluvoxamine in 11 (1.5%). Most of the cases (83%) occurred in patients aged 65 years or older, and so it was concluded that elderly people are at risk of complications when treated with SSRIs. Adverse effects disappear when treatment with the offending drug is discontinued and water intake is restricted.³

There are 2 specific publications about paroxetine and SIADH.^{2,4} It seems advisable to monitor sodium plasma concentration when treating elderly patients with SSRIs, especially if the patient's clinical condition deteriorates. These drugs are being administered with increasing frequency to the elderly because depression is a common condition in this population.

Jaume Monmany
Guillermo Vázquez
José Rodríguez
Pere Domingo
Barcelona, Spain

1. Christensen O, Sorensen HA, Almdal TP. Adverse effects of selective serotonin uptake inhibitors: hyponatremia caused by Schwartz-Bartter syndrome. *Ugeskr Laeger*. 1996;158:6920-6922.
2. Leung VP, Chiu HF, Lam LC. Hyponatremia associated with paroxetine. *Pharmacopsychiatry*. 1998;31:32-34.
3. Liu BA, Mittmann N, Knowles SR, Shear NH. Hyponatremia and the syndrome of inappropriate secretion of antidiuretic hormone associated with the use of selective serotonin reuptake inhibitors: a review of spontaneous reports [published correction appears in *CMAJ*. 1996;155:1043]. *CMAJ*. 1996;155:519-527.
4. Meynaa IA, Peeters AJ, Mulder AH, Ottervanger JP. Syndrome of inappropriate ADH secretion attributed to the serotonin re-uptake inhibitors venlafaxine and paroxetine. *Neth J Med*. 1997;50:243-245.

The Seeds of the Hawaiian Baby Woodrose Are a Powerful Hallucinogen

An 18-year-old man was brought to the emergency department after ingesting 12 seeds of the Hawaiian baby woodrose. The patient complained of nausea, vomiting, dizziness, auditory hallucinations, blurred vision, and diaphoresis. The results of physical examination showed tachycardia (heart rate, 110 beats per minute), hypertension (blood pressure, 170/90 mm Hg), nystagmus, and dilated pupils (7 mm). The patient was kept overnight in a telemetry bed, and normal saline was administered intravenously.

One month later, the patient still complained of flashbacks characterized by auditory hallucinations

every time he smoked cigarettes. The patient reported that he ordered the seeds at a site on the World Wide Web to get a "natural high."

The Hawaiian Baby Woodrose belongs to the family Convolvulaceae, genus *Argyreia*, species *nervosa*. It is native to India but also grows in Hawaii, Florida, and California. The filtrate of these seeds was used as a drug for divination, healing, and in religious ceremonies by the Aztecs and later by Native Americans. Current recreational use dates from 1965, when the seed was available in head shops and widely used by the hippies.

Argyreia nervosa seeds contain 3 mg of alkaloids per gram; the widely available morning glory seeds "Heavenly Blue" contain only 0.8 mg/g. Those alkaloids include chanoclavin, penniclavine, ergine, and lysergol. The active ingredients are D-lysergic acid, D-isolysergic acid, and D-lysergic acid methylcarbinolamide. The white layer of the seed coat contains a strychninlike alkaloid. Four to 8 seeds of *A. nervosa* is equal to 10 100 µg of lysergic acid diethylamide (LSD).

Ten seeds cost only \$2. The hallucinatory effects last 6 to 8 hours and include tranquil feelings, no euphoria, occasional woozy feelings similar to those accompanying alcohol intoxication, and psychedelic visual effects such as enhanced colors. The patient may experience a hangover characterized by blurred vision and vertigo. One suicide attempt was reported in 1964 from persistent flashbacks.

Treatment of hallucinogenic intoxication should always begin with basics: reassurance, sensory isolation, and protection. If sedation is necessary, diazepam or haloperidol are the recommended agents, and gastric lavage is sometimes also recommended. These seeds are widely available, legally and inexpensively, on the Internet.

Sami E. Al-Assmar, MD
Flint, Mich

1. Shawcross WE. Recreational use of ergoline alkaloid from *Argyreia nervosa*. *J Psychoactive Drugs*. 1983;15:251-259.

Systematic Research Is Needed in Alternative Medicine

Complementary and alternative medicine (CAM) is increasingly popular among the general population and the medical profession. This is demonstrated by recent survey data^{1,2} and by the fact that the editorial board, senior staff, and editors of the *Journal of the American Medical Association* and the American Medical Association's (AMA's) ARCHIVES journals ranked CAM among the 3 most important topics for publication in future issues.³ The November 1998 coordinated theme issues of the AMA journals offered a respected forum for researchers to present new scientific data on issues related to CAM. These published articles may provide an interesting account of the current research in this field.