

FP 1: A Case of Ciguatera Fish Poisoning in a 23 Year Old Male

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This is a case of JU a 23 year old male, presenting with symptoms of dyspnea, headache, and extreme muscular pain. He sought consult with an ENT in Seoul and was assessed to have a prognathic mandible, airway narrowing, and OSA.

Thereafter he underwent Le Fort I osteotomy, odontectomy of four 1st premolars, and genioplasty last December 2016 for improvement of airway, but with no success.

After a month, he underwent reduction glossectomy at the same institution. He flew back to the Philippines still with no relief from his symptoms.

He was scheduled to have flexible nasolaryngoscopy done after two months and was assessed to have a paradoxical vocal fold motion disorder. Patient underwent tracheostomy for definitive treatment of dyspnea.

Recently the patient has been suffering from long-standing muscular pain (localized to the facial area and upper back), temporarily relieved by fentanyl sublingually and buprenorphine patches.

History started in childhood when the patient was observed to be fond of eating *kinilaw*, a dish consisting of raw fish. These are suspected carriers of ciguatera toxin, which is derived from dinoflagellates of *Gambierdiscus*.

Ciguatera fish poisoning has been estimated to have a lifetime prevalence of 25 percent.³ It is one of the most neglected tropical diseases yet currently there is no valid diagnostic modality used to detect the presence of ciguatera toxin in humans.

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³ Skinner MP, Brewer TD, Johnstone R, Fleming LE, Lewis RJ (2011) Ciguatera Fish Poisoning in the Pacific Islands (1998 to 2008). PLOS Neglected Tropical Diseases 5(12): e1416. <https://doi.org/10.1371/journal.pntd.0001416>