

Jailhouse wine is not as delicious as it sounds, could be deadly

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In a case series seemingly tailor-made for cinematic tragedy or farce, emergency physicians report severe botulism poisoning from a batch of potato-based "wine" (also known as pruno) cooked up in a Utah prison. The study was published online Tuesday in *Annals of Emergency Medicine* ("[Emergency Department Identification and Critical Care Management of a Utah Prison Botulism Outbreak](#)").

"Evidently the incorporation of an old baked potato in the pruno recipe allowed [botulism](#) to develop," said Megan Fix, MD, of the Division of Emergency Medicine at the University of Utah in Salt Lake City. "The patient who cooked the wine had cooked this recipe approximately 20 times previously without a potato, but his decision to experiment sickened him and seven other inmates. The patients' initial reluctance to confess their consumption of pruno could have been deadly since botulism requires fast intervention."

Eight patients came to the [emergency](#) department from a Utah prison with trouble swallowing, double vision, difficulty speaking and weakness approximately 54 hours after ingestion of the potato-based pruno. The amount of pruno prisoners consumed varied greatly, with some patients reportedly ingesting over two gallons. The three most severely affected patients had respiratory failure and were intubated.

Because botulism anti-toxin is held in stockpiles around the country by the Centers for Disease Control and Prevention (CDC) in case of bioterrorism attack, the process of obtaining the anti-toxin takes some

time. In this case it took about 9 hours from suspicion of diagnosis to administration of the anti-toxin. All patients received botulism anti-toxin within 12 hours from being admitted to the ED.

Foodborne botulism poisoning is extremely rare, with a typical incidence of about 20 cases per year in the United States.

"The CDC is the only source for botulism anti-toxin," said Dr. Fix. "However, there are a number of steps involved in obtaining it. The CDC recommends that emergency physicians treat [patients](#) first, if botulism is suspected, rather than waiting for a positive test. Therefore it's important to contact the CDC to obtain the anti-toxin based on clinical suspicion as we can't treat the disease without having the anti-toxin in hand!"

Provided by American College of Emergency Physicians

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