

Appendix 2. Blister Agents Lewisite and Mustard-Lewisite Mixture Information Sheet

This handout provides information and follow-up instructions for persons who have been exposed to nerve agents.

What are Lewisite and Mustard-Lewisite Mixture?

Lewisite is a chemical warfare agent that was first produced in 1918. It has not been used in warfare, although it may be stockpiled by some countries. Mustard-Lewisite Mixture is a mixture of Lewisite and Mustard. It was developed to achieve a lower freezing point for ground dispersal and aerial spraying.

What immediate health effects can be caused by exposure to Lewisite and Mustard-Lewisite Mixture?

Lewisite and Mustard-Lewisite Mixture produce pain and skin irritation immediately after exposure. Both compounds cause skin blisters and damage to the airways and eyes. They are also extremely irritating to the eyes, skin, nose, and throat. Exposure to very high levels may result in kidney and liver damage. Mustard-Lewisite Mixture can also damage the immune system.

Can Lewisite and Mustard-Lewisite poisoning be treated?

Immediate decontamination reduces symptoms. Intramuscular injection of British Anti-Lewisite (BAL) may be used to treat severe conditions but will not prevent lesions on the skin, eye, or airways. Persons who have been exposed to large amounts of Lewisite and Mustard-Lewisite Mixture will need to be hospitalized.

Are any future health effects likely to occur?

Adverse health effects, such as chronic respiratory diseases, may occur from exposure to high levels of these agents. Severe damage to the eye may be present for a long time after the exposure.

What tests can be done if a person has been exposed to Lewisite or Mustard-Lewisite?

There is no specific test to confirm exposure to Lewisite or Mustard-Lewisite Mixture; however, measurement of arsenic in the urine may help to identify exposure.

Where can more information about Lewisite or Mustard-Lewisite be found?

More information about Lewisite and Mustard-Lewisite Mixture can be obtained from your regional poison control center; the Agency for Toxic Substances and Disease Registry (ATSDR); your doctor; or a clinic in your area that specializes in toxicology or occupational and environmental health. Ask the person who gave you this form for help locating these telephone numbers.

Follow-up Instructions

Keep this page and take it with you to your next appointment. Follow *only* the instructions checked below.

Call your doctor or the Emergency Department if you develop any unusual signs or symptoms within the next 24 hours, especially:

- coughing, wheezing, shortness of breath, or discolored sputum
- increased pain or discharge from injured eyes
- increased redness, pain, or a pus-like discharge from injured skin; fever; or chills

No follow-up appointment is necessary unless you develop any of the symptoms listed above.

Call for an appointment with Dr. _____ in the practice of _____.
When you call for your appointment, please say that you were treated in the Emergency
Department at _____ Hospital by _____ and were advised
to be seen again in ____ days.

Return to the Emergency Department/Clinic on _____ (date) at _____ AM/PM for a
follow-up examination.

Do not perform vigorous physical activities for 1 to 2 days.

You may resume everyday activities including driving and operating machinery.

Do not return to work for ____ days.

You may return to work on a limited basis. See instructions below.

Avoid exposure to cigarette smoke for 72 hours; smoke may worsen the condition of your
lungs.

Avoid drinking alcoholic beverages for at least 24 hours; alcohol may worsen injury to your
stomach or have other effects.

Avoid taking the following medications:

You may continue taking the following medication(s) that your doctor(s) prescribed for you:

Other instructions: _____

- Provide the Emergency Department with the name and the number of your primary care physician so that the ED can send him or her a record of your emergency department visit.
- You or your physician can get more information on the chemical by contacting: _____ or _____, or by checking out the following Internet Web sites: _____;

Signature of patient _____ Date _____

Signature of physician _____ Date _____