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## A REVIEW ARTICLE ON FOOD POISONING

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#### **ABSTRACT**

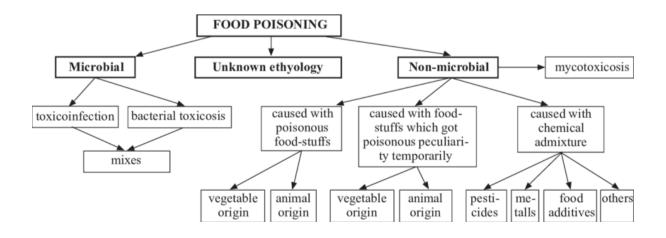
One of the most common health problems world-wide is foodborne illness, and are particularly rampant in third World countries such as India, mainly due to a relative lack of sanitation and public hygiene. Illnesses caused by eating non-bacteria food is called food poisoning. There is often more than one reason for an outbreak or outbreak, for example, food may be left at room temperature for many hours, resulting in failure to eliminate or kill Bacteria levels are very dangerous. The majority of episodes may be directly linked to infection or infectious agents spread by the faecal-oral route and transmitted either on fomites, on contaminated hands, or in food or water. Most cases of food poisoning are considered moderate and their symptoms resolve spontaneously within several days without treatment, while severe and chronic cases require hospitalization.

**Keywords**: Poisoning, toxicity, diaries, pollution, diarrhoea

#### INTRODUCTION

Food poisoning is a set of symptoms resulting from eating food contaminated with bacteria, The World Health Organization estimates that there are more than 1000 million cases of acute diarrhoea annually in developing countries, with 3-4 million deaths. Our lifestyles have changed over the last few years which include an increasing reliance on ready prepared meals, eating out rather than cooking and taking more holidays abroad laboratory studies have shown that the ingested food is the direct cause by planting the bacteria that cause poisoning, and food poisoning caused by bacteria is the main cause in more than 80% of food poisoning case. Some foodborne disease outbreaks that were once contained within a small community may now occur across larger communities or on global dimensions Knowing, where your food is sourced from and the standards of care and safety that have been applied may help to reduce the incidences of food poisoning.

#### **Classification of Food Poisoning**



#### 1. Inoculum size:

The number of microorganisms that must be ingested to cause disease varies considerably from species to species. For Escherichia coli, Giardia lamblia, or Entamoeba, as few as 10-100 bacteria or cysts can produce infection, while 105-108 Vibrio cholera organisms must be ingested orally to cause disease.

#### 2. Toxin Production:

The production of one or more exotoxins is important in the pathogenesis of numerous enteric organisms. Such toxin include enterotoxins, which cause watery diarrhoea by acting directly on secretory mechanisms in the intestinal mucosa, Food poisoning depends upon host defences mechanisms e.g. Normal flora, Gastric acid, Intestinal motility.

#### 3. Accidental poisoning:

Young children are especially susceptible to accidental poisoning in the home because of curiosity and a tendency to explore, and the elderly, who are often confused about their medications Countries cannotcompletely eliminate this problem by enacting laws, monitoring places where food is prepared, and periodically examining people involved in preparing food. Food preparation shops have the greatest responsibility towards the consumer bypurchasing meat from approved and experienced food preservation places, and these stores must alsoprovide the necessary equipment for preservingment in particular and other types of food in general. Ingested (ingested) and absorbed toxins cause symptoms throughout the body because they often deprive the body's cells ofoxygen or activate or block the action of enzymesand receptors. Skin exposure to toxins can causevarious symptoms, such as rashes, pain, and blisters.

Also, prolonged exposure to toxins can cause skin inflammation. Eye exposure to toxins can damage the eye, causing eye pain, redness, and decreased vision.

#### 4. Deliberate poisoning:

Poisoning may be a deliberate attempt to kill or commit suicide. Most adults who attempt suicide by poisoning use more than one drug and also drink alcohol. Poisoning can be used to weaken a person. Noting that good hygiene practices before, during and after food processing reduce the chances of exposure to foodborne diseases. A common awareness trend among the public health community is that regular hand washing is one of the most effective defences against the spread of foodborne diseases. Foodborne diseases can also be caused by pesticides or medicines in foods, in addition to natural toxic substances, including poisonous mushrooms or reef fish.

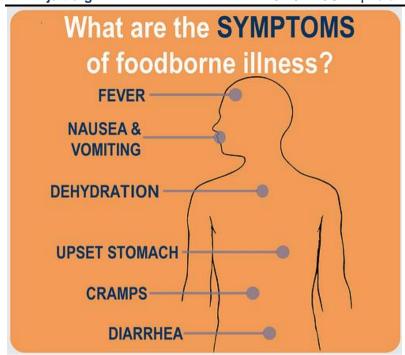
#### 5. Prevention of bacterial food poisoning:

Proper frozen storage of foods helps prevent food poisoning. Prevention is often the role of government, by setting strict rules for health and public services for veterinary surveys of animal products in the food chain, from the agricultural field to manufacturing and delivering products to supermarkets and restaurants. In the home, prevention is mainly food safety practices. Many forms of bacterial food poisoning can be prevented, even if the food has been contaminated, by adequately cooking the food, and either eating it directly and quickly, or freezing it effectively. However, one of the boxes had defects in it, which resulted in contamination of the meat kept inside.

#### **Symptoms:**

Symptoms of poisoning vary depending on the poison, the amount used, the age, and the health of the person using it. Some poisons are not very uremic syndrome. Other bacterial pathogens that transmit disease through food include:

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#### **Prevention:**

- 1. Buying groceries
- a) Buy meat and seafood items only from hygienicoutlets.
- b) Do not buy items whose expiry date has elapsed.
- c) Do not buy items containing undercooked or rawanimal-derived ingredients.
- d) Buy only pasteurized milk or cheese.
- e) Do not buy eggs which are cracked or leaking.



#### 2. Storage

- a) Take groceries directly home and store immediatelyin the refrigerator.
- b) Always store raw meat, poultry, or seafood in plasticbags, so that drippings do not contaminate otheritems in the refrigerator.
- c) Purchased hot foods should be eaten immediately, orkept hot (> 60oC), or refrigerated.
- d) Do not store eggs in the egg-section of the door(provided in most refrigerators), since adequate cooling does not occur. Place them inside cartonsand store them in the main section of therefrigerator.

- 3. Temperature requirements
- a) Never leave cut vegetables or meat in the open. Store them in the refrigerator or cook them.
- b) Ensure that the temperature in the main section of the refrigerator is always below 4oC, and that of the freezer is below -18oC.
- c) Cook all meat and seafood thoroughly before eating. Never consume undercooked oysters, clams, mussels, sushi, or snails.
- d) Cook eggs thoroughly until both the yolk and whiteare firm. Never eat runny yolk.

#### **CONCLUSION**

Food borne intoxications are the most wide spread globalpublic health problem in present scenario. An incident offood poisoning will cause serious financial loss, sometimes resulting in business closure, bankruptcy, andloss of work. However, the true incidence of food borneillnesses are unknown for the many includingpoor affected reasons. responses from person during health officials, misdiagnosis of the illness, impropercollection of samples for laboratory analysis andimproper laboratory examination. So there is a need to implement strict food safety laws. Food inspectors can at any time enter a placewhere food is being prepared. They will inspect the food and can take away samples for testing. Premises found tobe unfit can be closed, persons found guilty of breakingthe laws can be fined, imprisoned, customers sufferingfrom food poisoning can claim financial compensation.

#### Reference:

1. Namekar, M., Ellis, E. M., O'Connell, M., Elm, J., Gurary, A., Park, S. Y. & Nerurkar, V. R. (2013). Evaluation of a new commercially available immunoglobulin M capture enzyme-linked immunosorbent assay for diagnosis of dengue virus infection. Journal of clinical microbiology, 51(9), 3102-3106. Available at:

https://jcm.asm.org/content/51/9/3102.short

- 2. Kendall, A., Landers, T., Kirk, J., & Young, E. (2012). Point-of-care hand hygiene: preventing infection behind the curtain. American journal of infection control, 40(4), S3-S10. DOI: https://doi.org/10.1016/j.ajic.2012.02.009
- 3. Health Quality Ontario. (2018). Portable ultraviolet light surface-disinfecting devices for prevention of hospital-acquired infections: a health technology assessment. Ontario health technology assessment series, 18(1), 1. Available at:

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC 5824029/

- 4. Klevens, R. M., Edwards, J. R., Richards Jr, C. L., Horan, T. C., Gaynes, R. P., Pollock, D. A., &Cardo, D. M. (2007). Estimating health care-associated infections and deaths in US hospitals, 2002. Public health reports, 122(2), 160-166. DOI: https://doi.org/10.1177%2F003335490712200205
- 5. Dai, T., Vrahas, M. S., Murray, C. K., & Hamblin, M. R.(2012). Ultraviolet C irradiation: an alternative antimicrobial approach to localized infections? Expert review of anti-infective therapy, 10(2), 185-195. DOI: https://doi.org/10.1586/eri.11.166
- 6. V VPillay, Textbook of Forensic Medicine &Toxicology 18th edition, Paras Medical Publisher Hyderabad-500095, 2017; 711.
- 7. K. S. Narayan Reddy, The Essentials of Forensic Medicine and Toxicology 34th edition, JaypeeBrothers Medical Publishers (P) Ltd New Delhi- 110002, 2017; 590.
- 8. Harrisons Principles of Internal Medicine volume-1, 18th edition, Publisher McGraw-Hill's Professional Publishing, 2011; 1087.

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- 9. V VPillay, Textbook of Forensic Medicine & Toxicology 18th edition, Paras Medical Publisher Hyderabad-500095, 2017; 711-712.
- 10. Mahajan & Gupta, Textbook of Preventive and Social Medicine 4th edition, Jaypee Brothers Medical Publishers (P) Ltd New Delhi-110002, 2013; 230.
- 11. Sharad Porte, AgadtantraVishChikitsaVigyan 1<sup>st</sup>edition, Ayurved Sanskrit Hindi PustakBhandar Jaipur-302001, 2016; 99.
- 12. Anil Aggrawal Forensic Medicine and Toxicology for MBBS 1st edition, Avichal Publishing Company Sirmour-173030, (HP), 2016; 557.
- 13. K. Park, Park's Textbook of Preventive and Social Medicine 24th edition-2017, M/s BanarsidasBhanotPublisher Jabalpur-482001 (India), 253.
- 14. Stanley Davidson, Davidsons Principles and Practice of medicine 20th reprint edition, Churchill Livingstone Elsevier Publisher USA, 2008; 294.
- 15. Parashnath M, Indranil C, Food Poisoning: Illness Ranges from Relatively Mild through to Life Threatening, Journal of Medical and Health Sciences, 2016; 1.
- 16. Sharad Porte, AgadtantraVishChikitsaVigyan 1<sup>st</sup>edition, Ayurved Sanskrit Hindi PustakBhandar Jaipur-302001, 2016; 95.