In the setting of the opioid crisis, there has been an increase in the usage of herbal supplements that mimic opioids in their analgesic, sedative, and hypnotic effects. Many consumed supplements have no FDA clearance or scientific studies demonstrating their benefits or side effects. One such supplement, Kratom, has grown in popularity as an inexpensive alternative to manage symptoms of opioid use disorder and chronic pain (Anwar et al., 2016; Figure 1). We describe the case of a patient who was a chronic, daily user of Kratom for many years who presented with altered mental status and focal neurologic deficits with hyponatremia three days after abruptly discontinuing use of Kratom. This case reinforces the importance of taking a thorough history of all regularly consumed medications and supplements, prescribed or otherwise.

**REFERENCES**


Anwar, Mehruba, Royal Law, and Josh Schier. “Notes from the field: kratom (Mitragyna speciosa) exposures reported to poison centers—United States and Puerto Rico, January 2010–December 2015” (Anwar et al., 2016)

**CLINICAL IMPACT**

- There has yet to be a case report detailing kratom withdrawal-associated hyponatremia and hypophonia.
- The kratom product used was distributed by Krave Botanicals™ and states, “Not deemed fit for human consumption by the FDA” on its label (Figure 2).
- Described in this case is a patient who, following a back injury, was prescribed opioid pain medications. In an attempt to decrease use of opioids while still mitigating his back pain, he began daily use of kratom which had been ongoing for three years prior to presentation.
- In the context of the current opioid epidemic, awareness of opioid-mimicking supplements such as Kratom may help providers explain otherwise atypical presentation of opioid withdrawal symptoms.

**DISCUSSION**

- *Mitragyna speciosa*, commonly known as kratom, is a traditional medicinal plant native to Southeast Asia (Hassan et al., 2013).
- In recent years, kratom has grown in popularity as an inexpensive alternative to manage symptoms of opioid use disorder and chronic pain (Anwar et al., 2016).
- The ingredients within kratom responsible for its effects, mitragynine and its metabolites, are natural alkaloids that act as partial agonists on μ-opioid receptors with additional activity at α2-adrenergic receptors (Sethi et al., 2020). By this mechanism, kratom induces analgesic, sedative, and hypnotic effects in the user and has been proposed as a “natural” option to prevent opioid withdrawal.
- However, kratom has been found to have its own withdrawal symptoms akin to those of opioid withdrawal including muscle spasms, diarrhea, lack of appetite, fever, and pain (Singh et al., 2014).
- In our patient, we suspect that dehydration associated with kratom withdrawal and vomiting led to worsening of hyponatremia. As our patient received intravenous fluids, his hyponatremia resolved as well as his altered mentation.