Did you know ……

Over-the-counter cough and cold medicines (OTC C&C) are no longer recommended for children under 2 years of age, and the jury is still out on whether OTC C&C medicines are appropriate for children over 2 years of age. These medicines only treat the symptoms of a cold but do not shorten the time the child is ill.

Safety concerns issued by the Food and Drug Administration revealed reports of harm, and even death, to children who were given these products. Also, these medications have never been proven to be either safe or effective in children less than 2 years old.

If a dosing error is made, call the IPCC at 1-800-222-1222.

Over The Counter Cough and Cold Medication Errors

Medication errors with over the counter cough and cold (OTC C&C) products occur frequently, mainly during the winter months. Errors can be caused by:

- Misunderstanding the recommended dose, the frequency of dosing or the length of therapy
- Using an incorrect measuring device, i.e. not using the measuring device, whether it be a cup, spoon or syringe, that came with the product
- Giving more than one product with the same ingredient, e.g. overdosing on acetaminophen (APAP) because the patient received multiple products containing acetaminophen
- Giving a child an adult-formulated product that has a more medication per unit dose than what would be given to a child

The mixing of OTC C&C preparations with prescription medications can lead to adverse drug effects. An example is the concurrent use of a decongestant, which can raise blood pressure, with anti-hypertensive medications.

The potential toxicities of OTC C&C medicines vary with their composition. Many products contain multiple ingredients including a decongestant, cough suppressant, antihistamine, and/or an antipyretic/analgesic, usually APAP.

Pseudoephedrine and phenylephrine are common decongestants which can cause hypertension, tachycardia, restlessness, extreme agitation, insomnia, psychosis, and seizures in overdose. Serious complications include stroke, seizures, cerebral hemorrhage, dysrhythmias, myocardial infarction, and ischemic bowel.

Dextromethorphan, a cough suppressant, in overdose can cause agitation, hallucinations, hypertension, tachycardia, dysphoria and dystonia.

Antihistamines commonly used in these medications include diphenhydramine, chlorpheniramine and brompheniramine. In overdose these can cause anticholinergic symptoms and sodium-channel blockade manifesting as QRS widening on the EKG.

Acetaminophen overdose can lead to liver damage or liver failure.

Cheryl Current, RN, CSPI
Certified Specialist in Poison Information

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