

# ACTIVE LEARNING TEMPLATE: *Medication*

STUDENT NAME \_\_\_\_\_

MEDICATION Diphenhydramine

REVIEW MODULE CHAPTER \_\_\_\_\_

CATEGORY CLASS Antihistamine; Antitussive

## PURPOSE OF MEDICATION

### Expected Pharmacological Action

Antagonizes the effects of histamine at H1-receptor sites; does not bind to or inactivate histamine. Significant CNS depressant and anticholinergic properties.

### Therapeutic Use

Relief of allergic symptoms caused by histamine release including Anaphylaxis, Seasonal and perennial allergic rhinitis, and Allergic dermatoses. Parkinson's disease and dystonic reactions from medications. Mild night time sedation. Prevention of motion sickness. Antitussive (syrup only).

### Complications

CNS: drowsiness, dizziness, headache, paradoxical excitation (increased in children).  
EENT: blurred vision, tinnitus.  
CV: hypotension, palpitations.  
GI: anorexia, dry mouth, constipation, nausea.  
GU: dysuria, frequency, urinary retention.  
Derm: photosensitivity. Resp: chest tightness, thickened bronchial secretions, wheezing.  
Local: pain at IM site.

### Contraindications/Precautions

Contraindicated in Hypersensitivity; Acute attacks of asthma; Lactation; and Known alcohol intolerance (some liquid products).

Caution in Severe liver disease; Angle-closure glaucoma; Seizure disorders; Prostatic hyperplasia; Peptic ulcer; May cause paradoxical excitation in young children; Hyperthyroidism.

### Interactions

Drug-Drug:  
Increased risk of CNS depression with other antihistamines, alcohol, opioid analgesics, and sedative/hypnotics.  
Increased anticholinergic effects with tricyclic antidepressants, quinidine, or disopyramide. MAO inhibitors intensify and prolong the anticholinergic effects of antihistamines.

Drug-Natural Products:  
Concomitant use of kava-kava, valerian, or chamomile can increase CNS depression.

### Evaluation of Medication Effectiveness

Prevention of, or decreased urticaria in, anaphylaxis or other allergic reactions.  
Decreased dyskinesia in parkinsonism and extrapyramidal reactions.  
Sedation when used as a sedative/hypnotic.  
Prevention of or decrease in nausea and vomiting caused by motion sickness.  
Decrease in frequency and intensity of cough without eliminating cough reflex.

### Medication Administration

Per oral  
Parental: Intramuscular

### Nursing Interventions

Determine why the medication was ordered and assess symptoms that apply to the individual patient.

Prevention and Treatment of Anaphylaxis: Assess for urticaria and for patency of airway.

Allergic Rhinitis: Assess degree of nasal stuffiness, rhinorrhea, and sneezing.

Parkinsonism and Extrapyramidal Reactions: Assess movement disorder before and after administration.  
Insomnia: Assess sleep patterns.

Motion Sickness: Assess nausea, vomiting, bowel sounds, and abdominal pain.

### Client Education

Take medication as directed; do not exceed recommended amount.

Not to use oral OTC diphenhydramine products with any other product containing diphenhydramine, including products used topically.  
May cause drowsiness. Caution patient to avoid driving or other activities requiring alertness until response to drug is known.

May cause dry mouth. Inform patient that frequent oral rinses, good oral hygiene, and sugarless gum or candy may minimize this effect. Notify health care professional if dry mouth persists for more than 2 wk.

Teach sleep hygiene techniques (dark room, quiet, bedtime ritual, limit daytime napping, avoidance of nicotine and caffeine) to patients taking diphenhydramine to aid sleep.

To use sunscreen and protective clothing to prevent photosensitivity reactions.  
Avoid use of alcohol and other CNS depressants concurrently with this medication.