

Diphenhydramine (Benadryl)

McHenry Western Lake County
EMS



Objectives

- During this session we will discuss:
- Class
- Actions
- Indications
- Contraindications
- Dosing/Routes
- How supplied
- Precautions
- Side effects



Class:

- Antihistamine
- H₁ receptor antagonist

H₁ receptor antagonist

- Drugs that selectively bind to but do not activate histamine H₁ receptors, thereby blocking the actions of endogenous histamine.



Actions:

- H1 Histamine blocker
- Decreases allergic response by blocking histamine
 - Central nervous system depressant
 - Anticholinergic
 - Blocks effects of histamine including
 - vasodilation
 - increased GI tract secretions
 - increased heart rate
 - hypotension
 - Relieves symptoms associated with allergic reactions

Indications:

- Allergic reactions/anaphylaxis
- Per Medical Control: Dystonic reactions due to phenothiazines - (Cymbalta)
Antidepressant



Acute dystonic reaction

- An acute dystonic reaction consists of sustained, often painful muscular spasms, producing twisting abnormal postures.



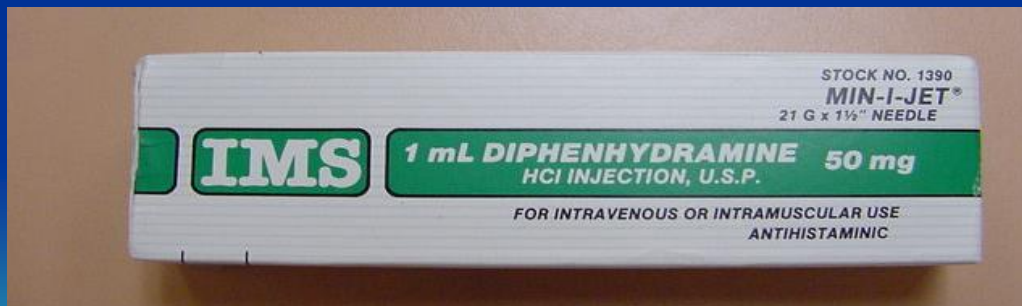
Dosing/Routes:

- 25-50 mg deep IM or slow IVP
- Peds: 1mg/kg (max 50mg) slow IVP/IO over 2-3 minutes; if no IV/IO give IM.



How supplied:

- 50mg in 2 ml preload



Contraindications:

- Use with caution on:
- Alcohol intoxication
- Drug intoxication
- Asthma
- Nursing mothers



Precautions:

- Renal Disease
- Cardiac Disease
- Hypertension
- Seizures



Side effects/adverse reactions:

- CNS: Dizziness, drowsiness, blurred vision, ataxia (poor gait)
- EENT: Dry mouth, thickened bronchial secretions.
- Increased pulse
- Decreased B/P
- Ref: MWLCEMS Protocol and 2000 Mosby's Nursing Drug Reference Book



Case Study

- You are called to a Wedding Reception where a 24 y/o female is having an allergic reaction to the Salad Dressing she has eaten.
- She is able to tell you that she has an allergy to shell fish, but did not realize that the dressing may contain that.
- She is in moderate distress and has given herself her Epi Pen.



Case Study

- She still has wheezing, with some dyspnea, coughing and very flushed skin.
- The correct dose of Benadryl would be?



Answer

- 50mg IVP
- If no IV, give IM



Question?

- What other medication would be given if the patients continues to have wheezing in all fields.



Answer

- Albuterol 2.5 mg and Atrovent 0.5 mg via HHN or Mask.