

DEXTROMETHORPHAN +CHLORPHENIRAMINE +PSUEDOEPHEDRINE
+GLYCERYL GUAIACOLATE]

Class: Antitussive (Expectorant) ; Histamine H1 Antagonist; First Generation, ; Decongestant .

Indications: Temporarily relieves nasal congestion, runny nose, cough, and sneezing due to the common cold, hay fever, or allergic rhinitis

Available dosage form in the hospital:

-COLDEX-D SYRUP [DEXTROMETHORPHAN 10MG+CHLORPHENIRAMINE
1.25MG+PSUEDOEPHEDRINE 30MG+GLYCERYL GUAIACOLATE 50MG]

Dosage:

2 teaspoonfuls 3-4 times daily, or as directed by physician.

Common side effect:

- Dextromethorphan: Frequency not defined.

Central nervous system: Confusion, excitement, irritability, nervousness, serotonin syndrome

- Chlorpheniramine: >10%:

Central nervous system: Slight to moderate drowsiness

Respiratory: Thickening of bronchial secretions

1% to 10%:

Central nervous system: Headache, excitability, fatigue, nervousness, dizziness

Gastrointestinal: Nausea, xerostomia, diarrhea, abdominal pain, appetite increase, weight gain

Genitourinary: Urinary retention

Neuromuscular & skeletal: Arthralgia, weakness

Ocular: Diplopia

Renal: Polyuria

Respiratory: Pharyngitis

- Pseudoephedrine: Frequency not defined.

Cardiovascular: Arrhythmia, cardiovascular collapse with hypotension, hypertension, palpitation, tachycardia

Central nervous system: Chills, confusion, coordination impaired, dizziness, drowsiness, excitability, fatigue, hallucination, headache, insomnia, nervousness, neuritis, restlessness, seizure, transient stimulation, vertigo

Dermatologic: Photosensitivity, rash, urticaria

Gastrointestinal: Anorexia, constipation, diarrhea, dry throat, ischemic colitis, nausea, vomiting, xerostomia

Genitourinary: Difficult urination, dysuria, polyuria, urinary retention

Hematologic: Agranulocytosis, hemolytic anemia, thrombocytopenia

Neuromuscular & skeletal: Tremor, weakness

Ocular: Blurred vision, diplopia

Otic: Tinnitus

Respiratory: Chest/throat tightness, dry nose, dyspnea, nasal congestion, thickening of bronchial secretions, wheezing

Miscellaneous: Anaphylaxis, diaphoresis

4- Glyceryl guaiacolate: Frequency not defined:

Central nervous system: Dizziness, drowsiness, headache

Dermatologic: Rash

Endocrine & metabolic: Uric acid levels decreased

Gastrointestinal: Nausea, stomach pain, vomiting

Post marketing and/or case reports: Kidney stone formation (with consumption of large quantities)

Pregnancy Risk Factor:

- Dextromethorphan: Maternal use of standard OTC doses of dextromethorphan when used as an antitussive during the first trimester of pregnancy has not been found to increase the risk of teratogenic effects. Dextromethorphan is metabolized in the liver via CYP2D6 and CYP3A enzymes. The activity of both enzymes is increased in the mother during pregnancy. In the fetus, CYP2D6 activity is low in the fetal liver and CYP3A4 activity is present by ~17 weeks gestation

- Chlorpheniramine: Maternal chlorpheniramine use has generally not resulted in an increased risk of birth defects. Antihistamines are recommended for the treatment of rhinitis, urticaria, and pruritus with rash in pregnant women (although second generation antihistamines may be preferred). Antihistamines are not recommended for treatment of pruritus associated with intrahepatic cholestasis in pregnancy.

- Pseudoephedrine: Use of pseudoephedrine during the first trimester may be associated with a possible risk of gastroschisis, small intestinal atresia, and hemifacial microsomia due to pseudoephedrine's vasoconstrictive effects; additional studies are needed to define the magnitude of risk. Single doses of pseudoephedrine were not found to adversely affect the fetus during the third trimester of pregnancy (limited data); however, fetal tachycardia was noted in a case report following maternal use of an extended release product for multiple days. Decongestants are not the preferred agents for the treatment of rhinitis during pregnancy. Oral pseudoephedrine should be avoided during the first trimester.

- Glyceryl guaiacolate: Based on the limited available data, an increased risk of adverse birth outcomes has not been observed following maternal use of guaifenesin in pregnancy. Alcohol may be present in some liquid formulations of guaifenesin. If consumed in sufficient quantities during pregnancy, fetal alcohol syndrome may result. Guaifenesin has been investigated as an agent to improve cervical mucus and improve fertility.

**just the dosage from the (leaflet)