

ENSURING THE SAFE USE OF ANTIPYRETICS IN CHILDREN

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Relevance: A boil in body temperature in children is one of the main reasons for seeking medical help. Uncontrolled use of antipyretics, inadequate intake and dosage regimen can lead to the development of serious adverse reactions.

Purpose: Ensuring the safe use of antipyretics in children.

Materials and methods: The analysis of literature data on the use of antipyretics in children was carried out.

The results of the research and their discussion. It seems to be very important to discuss the question of the rational use of antipyretic drugs in children. At the same time, in children with influenza and other acute respiratory viral infections, the use of acetylsalicylic acid and its derivatives is unacceptable due to the extra risk of developing Reye's syndrome.

The World Health Organization recommends paracetamol and ibuprofen as antipyretics for children.

1. Ibuprofen can be used as a starting drug when paracetamol is contraindicated or ineffective.

Recommended dosage development: paracetamol - 10-15 mg / kg mass, ibuprofen - 5-10 mg / kg.

2. Re-use of antipyretic drugs is possible no earlier than 4-6 hours after the first dose.

Conclusion:

1. Paracetamol is contraindicated in severe diseases of the liver, kidneys, hematopoietic organs, with a deficiency of glucose-6-dehydrogenase.

2. The simultaneous use of paracetamol with barbiturates, anticonvulsants and rifampicin increases the risk of developing hepatotoxic effects.

3. Ibuprofen is contraindicated in exacerbation of gastric ulcer and duodenal ulcer, aspirin triad, severe violations of the liver, kidneys, hematopoietic organs, as well as diseases of the optic nerve.

4. Metamizole sodium (analgin) is capable of producing anaphylactic shock, a sharp decrease in the number of neutrophils (up to agranulocytosis), a collapse state with hypothermia (34.5-35.0 ° C). WHO (in a letter dated 10/08/1991) did not recommend the use of analgin as an over-the-counter antipyretic agent.

5. Established a causal relationship between nimesulide intake and hepatotoxicity (jaundice - 90%).

References:

1. Мищенко, Т. С., Здесенко, И. В., Линская, А. В., & Мищенко, В. Н. (2011). Новые мишени терапевтического воздействия у пациентов с хронической ишемией головного мозга. Международный неврологический журнал, (2), 7-13.