Drug Reaction, Allergic Reaction to Medication

Bad reactions to drugs are common. Most drugs can cause a reaction. Some reactions range from a mild rash to nausea and vomiting. Anaphylaxis is a life-threatening acute allergic reaction involving the whole body.

CAUSES

- "True" drug allergies occur when there is an allergic reaction to a medication. It is caused by an over activity of the immune system. This leads to a reaction against a medication, which does not cause a reaction in most people. The body becomes sensitized. The immune system is triggered by the first exposure to the medication. Following this first exposure, its use in the future may be life threatening.
- A delayed type of drug allergy that occurs a week or more after exposure to a medication or vaccine is known as serum sickness.
- Almost any medication can cause an allergic reaction. Common ones are:
  - Penicillin.
  - Sulfonamides.
  - Local anesthetics like Novocain.
  - X-ray dyes which contain iodine.
- Anaphylaxis may be **LIFE-THREATENING**. It is a severe allergic reaction. It can cause the mouth and throat to swell. This will make it difficult to breathe and swallow. Severe reactions can be fatal within seconds even after only being exposed to a trace amount of the drug that causes the reaction.

SYMPTOMS

Most drug allergies cause minor skin rashes and hives. A delayed type of drug allergy that occurs a week or more after exposure to a medication or vaccine is known as serum sickness.
Common minor allergic symptoms are:

- Swelling around the mouth.
- An itchy red rash and/or hives.
- Vomiting or diarrhea.

HOME CARE INSTRUCTIONS

- If you are unsure of what caused the reaction, keep a diary of foods and medications used. Include the symptoms that followed. Avoid anything that causes reactions.
- If hives or rash are present:
  - Take medications as directed.
  - You may use an over-the-counter antihistamine (diphenhydramine) for hives and itch, as needed.
  - Apply cold compresses to the skin. Or take baths in cool water. Avoid hot baths or showers.
- If you are severely allergic:
  - Following a severe reaction and treatment, continuous observation may be necessary. Hospitalization is often required.
  - Wear a medic-alert bracelet or necklace stating the allergy.
  - You and your family must learn how to give adrenaline or use an anaphylaxis kit. If you have had a severe reaction, always carry your anaphylaxis kit or epi-pen with you. You and your family members should know how to use this. This can be life saving if you have a severe reaction.
- Generally, after the reaction is over, there will be no return (*recurrence*) of the disorder.
- Do not drive or perform tasks after treatment until medications used to treat have worn off, or until your caregiver says it is okay.

SEEK MEDICAL CARE IF:

- You suspect an allergy. Symptoms generally occur within 30 minutes following exposure.
- Symptoms are getting worse rather than better.
- You develop new symptoms.
- There is a return of the symptoms that brought you to your caregiver or to the emergency room.

You may want to have your caregiver retest you or your child with whatever you think caused the allergic reaction. **Never** do this if an anaphylactic reaction to that medication has already occurred.

SEEK IMMEDIATE MEDICAL CARE IF:

- You have swelling of the mouth, difficulty breathing, or wheezing.
- You have a tight feeling in your chest or throat.
- You develop hives, swelling, or itching all over your body.
- **IF YOU HAVE AN EPI- PEN OR ANA-KIT, USE IT AS YOU HAVE BEEN INSTRUCTED IF YOU HAVE ANY OF THE SYMPTOMS OUTLINED ABOVE. THIS IS AN EMERGENCY. CALL FOR EMERGENCY MEDICAL HELP. EVEN IF YOU HAVE IMPROVED AFTER THE INJECTION, YOU SHOULD STILL BE EXAMINED AT A HOSPITAL EMERGENCY DEPARTMENT.**
- You develop severe vomiting or diarrhea.
- You feel faint or pass out.

This is an emergency. Family or caregiver should call for emergency medical help.

MAKE SURE YOU:

- Understand these instructions.
- Will watch your condition.
- Will get help right away if you are not doing well or get worse.

For more information about Epi-pens, see:
http://pediatrics.aappublications.org/cgi/content/abstract/119/3/638

Document Released: 12/18/2006 Document Re-Released: 11/30/2009
ExitCare® Patient Information ©2011 ExitCare, LLC.