Giving Medication

Giving either “over-the-counter” or prescription medications unnecessarily to young children is an increasing concern. Many children who have viral infections (colds or flu) are prescribed antibiotics inappropriately. The vast majority of these are viral in origin, and antibiotics will not help. Sometimes they may have unpleasant side effects such as diarrhoea.

There are also concerns about the large number of children who are taking “over-the-counter” (OTC) or non-prescription medicines. Some OTC medications can be effective and safe, but many have no proven benefits, some do more harm than good, some are toxic when given in high doses, and sometimes interactions between OTC and prescription medications can be harmful.

**Pain and fever.** Paracetamol (Panadol, Tylenol, Dymadon) is commonly used for pain or to bring fever down. Fever can make a child feel miserable, but in itself is not harmful, so bringing a fever down immediately is usually unnecessary. Fever suggests that the body is fighting an infection. There is some evidence that giving medications to reduce the fever can slow the body’s immune response to infection. In most instances concern should not be with treating the fever itself but rather with the way the child looks and behaves and symptoms such as vomiting or cough rather than treating the fever. Medication should be given only if the fever is making the child very uncomfortable. Paracetamol is safe when given in recommended doses, but an overdose can cause liver failure. Reading the label and following the instructions carefully are critical. Paracetamol for children comes in different strengths and formulations, and it is essential that the dosage is appropriate for the weight of the child. Ibuprofen (Nurofen, Iprofen), an alternative to Paracetamol, is also relatively safe, but should be avoided if the child is vomiting or has asthma. Aspirin should never be given to infants because of possible serious side effects.

**Coughs, colds and blocked noses.** Decongestants and other cold remedies are widely promoted for the relief of symptoms of colds and flu. However, there is little evidence that they help, and there is some evidence that they can cause unpleasant side effects such as irritability, confusion and sleepiness. Oral decongestants (Dimetapp Elixir and Demazine Syrup) are not recommended for children under 2 years. Nasal decongestants (Drixine and Dimetapp) may not be helpful to children.

Cough is a very common symptom of viral upper respiratory infections. Cough medicines (Actifed and Robitussin) are not effective in reducing the frequency, intensity or duration of cough. Coughing serves a useful function in clearing mucus from the child’s airways and preventing secondary infection.

**Difficult behaviour, sleep problems.** Sometimes OTC medications (Phenergan or Vallergan) are used to “quieten a child down”, help the child sleep, or manage behaviour. The use of these OTC medications to control behaviour is almost always an inappropriate alternative to setting clear limits, consistency, and supporting desirable behaviours. Medications may make the child a little quieter and easier to manage, but the frequent side effect of drowsiness interferes with learning and exploration. In a small number of children these medications will make them more active and alert instead of quieting them.

**Vitamins and minerals.** Many parents give their children various combinations of vitamins, minerals, or other “natural” substances to boost their immune system, improve their health, help their growth and development, and make them stronger. There is no evidence that they make any difference to the child’s health. True deficiencies of vitamins or minerals are very uncommon in most children.

*Professor Frank Oberklaid, Director, Centre for Community Child Health*

This Parent Fact Sheet is available in different community languages and can be downloaded for printing from the Early Childhood Connections website. www.ecconnections.com.au