



Pharmacology (part 9): DIPHENHYDRAMINE (BENADRYL) By Jim Moss

Indications:

- Allergic reactions and anaphylaxis
- Extrapyramidal symptoms (e.g.-reversal of extrapyramidal side effects from antipsychotics or other drugs that inhibit dopaminergic neurotransmission)
- Motion sickness

Precautions/Contraindications:

- CNS depression, patients taking MAOI's, glaucoma, acute asthma exacerbation, prostate enlargement, ulcer disease.

Dosing:

ADULTS— 25-50 mg IV/IO/IM
PEDIATRICS— 1-2 mg/kg IV/IO/IM

Scenario: 20 y/o Male c/o urticaria, dyspnea, and dizziness after being stung by a bee. Pt states that he is allergic to bee stings, but he doesn't have his EPI-PEN™ with him. RR 40, HR 130, SPO2 85% RA, BP 82/40, BG 106 mg/dl, LS wheezes in all fields



Plan of care:

- Frequent Vital Signs
- Oxygen Therapy
- Albuterol 2.5 mg NEB
- IV access, large bore
- Consider fluid bolus of normal saline
- Benadryl 50 mg IVP**
- Epinephrine 0.3-0.5 mg (1:1,000) IM or 0.1-0.3 mg IVP slow (1:10,000)
- ECG monitor
- Consider Intubation and IV corticosteroids