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| *Comparing Hyperacidity Medications* | | | | | | |
| **Class** | **Generic Prototype (Brand)** | **Mechanism** | **Indication & Therapeutic Effect** | **Contraindications** | **Side Effects** | **Administration and**  **Nursing Considerations** |
| **Antacid** | [calcium carbonate](https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=f21c8cf7-45cb-492b-bf4a-462024a54569) | Neutralizes hydrochloric acid in gastric secretions. | Decreased symptoms of heartburn | * Drug interaction with ceftriaxone * High calcium and low phosphate levels. * Kidney stones | * Constipation * Hypercalcemia * Rebound hyperacidity when discontinued | * Don’t admin within 1-2 hrs of other meds * Drink a full glass of water after admin * Use cautiously with renal disease |
| **H2 blocker** | [famotidine](https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=a0bdf4d1-8458-4e4f-95aa-bcc38c0f32f8) | Inhibits H2- receptors and therefore inhibits gastric secretion | GERD  Gastric and duodenal ulcer  Heartburn | Hypersensitivity to H2-receptor antagonists. | headache, dizziness, constipation, and diarrhea  Immediately report increased pain or signs of bleeding (coughing/ vomiting of blood) | * Give 15 to 60 mins before foods or drink * Adjust dosage for pre-existing liver and kidney disease * Report any signs of GI bleed |
| **Proton Pump Inhibitor** | [pantoprazole](https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=9bed093a-9586-4c82-a2b7-c68f89d0faef) | Suppresses the final step in gastric acid production | GERD | * Concurrent infection with clostridium difficile bacteria * Osteoporosis * Interstitial nephritis | * **Anaphylaxis and serious skin reactions** * Zinc, magnesium, or B12 deficiency * Headache, abdo pain, diarrhea, constipation * Renal dysfunction * OP- bone fracture | * Delayed release * Can be taken with or without food * Report any signs of GI bleed. |
| **Mucosal protectants** | [sucralfate](https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=62819787-beb7-408a-9e23-a61b4720e99c) | Creates protective barrier to pepsin and bile, inhibits diffusion of gastric acid. | Gastric and duodenal ulcer  Prevents recurrence of ulcers | Hypersensitivity  End stage renal disease | * Constipation * Hyperglycemia * Several drug interactions | Administer on an empty stomach, 2 hrs after or 1 hr before meals  Use cautiously used clients with chronic renal failure |
| **Anti-flatulent** | [simethicone](https://medlineplus.gov/) | Changes surface tension of gas allowing for easier elimination | Relief of gas discomfort | Hypersensitivity | Diarrhea, nausea, vomiting, headache | Shake drops before administering |

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| *Comparing Types of Anti-Emetics* | | | | | | |
| **Class** | **Generic Prototype (Brand)** | **Mechanism** | **Indication & Therapeutic Effect** | **Contraindications** | **Side Effects** | **Administration and**  **Nursing Considerations** |
| **Anticholinergic** | [Scopolamine](https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=163accb7-45e6-4d97-844d-72b606677008)  (Hyoscine)  (Transderm) | Inhibits postganglionic muscarinic receptor sites, and acts on smooth muscles that respond to acetylcholine | Prevent or reduce N/V associated with motion sickness or surgery | Contraindicated in clients with glaucoma | * anticholinergic effects * Stop if it exacerbates psychosis or causes seizures, cognitive impairment | * Apply to hairless skin behind ear for 3 days or the night before surgery and remove 24 hours later * Do not cut patch * After application, thoroughly wash and dry hands * Remove before an MRI |
| **Dopamine antagonist** | [prochlorperazine](https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=baf59816-7577-4652-b065-fb6de9e54569)  (Stemetil) | Depresses action on the chemo-receptor trigger zone. | Control N/V associated with surgery | Use of other CNS depressants  Dementia-related psychosis | Drowsiness, dizziness, amenorrhea, blurred vision, skin reactions, low **Tardive dyskinesia, NMS** | * Can be administered PO, IM, PR, or IV * Not suitable for children under the age of 2 |
| **Prokinetic** | [metoclopramide](https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=59abd52d-8172-44a3-baa2-fe1fe20f78c0)  (Maxeran) | Stimulates upper GI tract  Antagonizes dopamine receptors | GERD  N/V associated with surgery or chemo-therapy | GI hemorrhage  GI obstruction  GI perforation  History of seizures | Restlessness, drowsiness, fatigue, depression, and **suicide ideation. Tardive dyskinesia**, **NMS** | Can be administered PO, IM, and IV  Onset: 1 to 3 mins for IV dose, 10 to 15 mins for IM admin, and 30 to 60 mins for oral dose |
| **Serotonin antagonist** | [ondansetron](https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=be5930d2-0008-4e61-9715-684c29a9c613)  (Zofran) | Selective 5-HT3 receptor antagonist. | Prevention or treatment of severe N/V associated with surgery, chemo-therapy, or hyperemesis in pregnancy | Hypersensitivity | * Headache, drowsiness, constipation, fever, and diarrhea * May prolong QT * serotonin syndrome if given concurrently with serotonin antagonists or SSRIs | Can be administered as oral disintegrating tablet, PO, or IV |
| **Neurokinin receptor antagonist** | [aprepitant](https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=af9b6086-4bf2-472c-8740-4134eaaebace)  (Emend) | selective high-affinity antagonist of human substance P/neurokinin 1 (NK1) receptor | Prevention of nausea and vomiting associated with chemo-therapy and surgery | Clients on *pimozide* | Hypersensitivity reaction, such as hives, rash. and itching; skin peeling or sores; or difficulty in breathing or swallowing | * Can be administered PO or IV * If on warfarin, increase INR monitoring * If on oral contraceptives, use backup birth control |
| **THC** | [dronabinol](https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=a0409d82-a61e-4b9e-8717-ced299ccedb2) or medical marijuana | central sympathomimetic activity | For treatment of N/V associated with cancer chemo-therapy when other treatment fails | Hypersensitivity to sesame oil. | * Neuropsychiatric Adverse Reactions * Hemodynamic Instability * Seizures * Paradoxical Nausea, Vomiting, and Abdominal Pain | Administered PO  Dosage may be escalated based on initial results  Use cautiously in elderly clients |