

Tetryzoline

S

Apnoea and hypotonia in a neonate following inadvertent oral administration, treated with naloxone: case report

A 25-day-old male neonate developed tetryzoline intoxication with apnoea and hypotonia after inadvertent oral administration of tetryzoline; he was successfully treated with naloxone.

The neonate was hospitalised with apnoea and hypotonia. One day earlier, he had been prescribed nasal drops with 0.05% tetryzoline and cefaclor suspension for mild fever and irritability. His mother inadvertently administered the drops orally at a dose of three 0.5 mL drops per day. Following the second dose, he developed hypotonia and poor feeding. Two hours after the third dose, he developed apnoea. His HR was 86 beats/min, his respiratory rate was 4 breaths/min and his BP was 60/32 mm Hg. He was hypoactive with diminished reflexes and myotic pupils.

An IV route was established. The neonate received supplemental oxygen by nasal mask, but bradycardia and apnoea continued even with nasal continuous positive airway pressure. He received IV naloxone 0.1 mg/kg (total 0.4 mg). At least 3 minutes later, his apnoea and bradycardia disappeared (respiratory rate increased to 25 breaths/min and HR to 110 beats/min), and his BP increased to 70/45 mm Hg. His vital signs remained stable and, after 2 days, he was discharged. At follow-up 10 days later his condition was normal.

Katar S, et al. Naloxone use in a newborn with apnea due to tetrahydrozoline intoxication. *Pediatrics International* 52: 488-489, No. 3, Jun 2010. Available from: URL: <http://dx.doi.org/10.1111/j.1442-200x.2010.03040.x> - Turkey 803031719