



It is the responsibility of every employee of National Community Care who is administering medications to know and understand the following common side effects of medications, which could indicate a reaction is occurring requiring action.

- If any of the below side effects are voiced by the Participant or observed by yourself, you are to report to **NCC intake Line immediately** for further assistance.
- (Disclaimer please if you or the Participant observe or voice a side effect not listed please call NCC immediately on 62424978 or 0401439798)

### 1. Allergic Reaction

- Symptoms range from a mild rash to a severe anaphylactic reaction (including facial and throat swelling, difficulty breathing and a widespread rash).

#### Prevention and management strategies:

- Avoid known medications which cause reactions.
- Seek emergency help if the reaction is severe and or anaphylactic reaction occurs.
- If not severe contact NCC intake line for further guidance.

### 2. Blurred or changes to vision

- May occur with antihistamines, antipsychotics, bupivacaine, bupropion, duloxetine, esomeprazole, etodolac, gabapentin, opioids, and several other drugs.

#### Prevention and management strategies:

- Participants may be on eye drops to assist with known side effects.
- Seek emergency help if they experience blurred vision or changes to vision.
- If not severe contact NCC intake line.

### 3. Constipation

- Common with opioids, diuretics, calcium antagonists, antidepressants, aluminium-containing antacids, ondansetron, and iron supplements.

#### Management strategies:

- Review medication chart & contact NCC for further instructions.

### 4. Bruising or Bleeding

- Common with medicines that “thin the blood” such as aspirin, clopidogrel, enoxaparin, and warfarin. Also, common with NSAIDs, steroids (such as prednisone) and medicines to treat cancer.

#### Management strategies:

- Cuts may take longer to stop bleeding.
- Hold a gauze or clean towel over the affected area and apply pressure call and notify NCC.
- Seek emergency help if the wound is bleeding profusely or doesn't stop bleeding within 5 minutes.



## 5. Dehydration

- Common with antihistamines, blood pressure medications, chemotherapy, and laxatives.

### Management strategies:

- Check Participant Care-plan if there are any contraindications to having additional fluids.
- Call NCC for further instructions.
- Regularly moisturize skin and apply lip balm.
- Apply balm to the lips to avoid painful cracking.

## 6. Diarrhoea

- May occur with some antibiotics, antidepressants, magnesium-containing antacids, proton pump inhibitors (eg, lansoprazole, omeprazole) and chemotherapy agents.

### Management strategies:

- If due to antibiotic use, call NCC who will organise family to organise doctor's appointment.
- Encourage the participant to keep up adequate fluid intake to avoid dehydration – check Care plan to ensure additional fluids are not contraindicated.
- If extremely persistent or severe, Participant is to present to ED and NCC is to be contacted.

## 7. Drowsiness or sedation

- Medications that cause drowsiness include benzodiazepines (such as lorazepam, diazepam), some antidepressants, antiemetics, older antihistamines (such as diphenhydramine, chlorpheniramine), some heart medications, muscle relaxants and narcotics.

### Management strategies:

- Call NCC immediately and notify, if you are unable to wake or rouse the Participant call an ambulance straight away and notify NCC once Ambulance has arrived.

## 8. Dry Mouth

- May occur with antiarrhythmics, anticholinergics, antihistamines, drugs for high cholesterol, anti-inflammatory agents, diuretics, vasodilators, drugs for Parkinson's Disease, and antipsychotics.

### Management Strategies

- Report to NCC who will discuss with NOK / GP

## 9. Indigestion or Gastroesophageal Reflux Disease (GERD)

- May occur with drugs that irritate the stomach lining (such as aspirin, iron, NSAIDs, steroids), those that relax the lower esophageal sphincter (LES) (such as anticholinergics, calcium channel blockers, and nitrates) or reduce LES pressure (such as progesterone, theophylline, and tricyclic antidepressants).

### Prevention and management strategies:

- Elevate the head of the bed.
- Contact NCC if persistent and not resolving after 10 minutes.



#### 10. Falling or Unsteadiness on Feet

- Medicines that cause confusion, fatigue or sedation such as antipsychotics, some antidepressants, benzodiazepines, sedating antihistamines, antiepileptics, narcotics, and some heart medications.

##### **Prevention and management strategies:**

- Assist the Participant to mobilise and transfer
- Encourage Participants to use their mobility aids.
- Report decline in mobility status to NCC for actioning.

#### 11. Headache

- Common with asthma medications, angina and blood pressure medications, oral contraceptives, erectile dysfunction treatments, and stimulants
- Rebound headaches can be caused by overuse of acetaminophen, aspirin, NSAIDs, and opioids.

##### **Prevention and management strategies:**

- Rest in a quiet, dimly lit room
- Heat, massage therapy, acupressure, or reflexology may help if the headaches recur
- Keep well hydrated (drink plenty of water).
- Notify NCC if severe in nature

#### 12. Infection

- Corticosteroids, immunosuppressants, chemotherapy and several other medicines suppress your immune system and increase your risk of developing an infection.

##### **Management strategies:**

- If you identify or suspect the Participant has an infection call NCC.

#### 13. Muscle Pain or Muscle Weakness

- Common with statins (used to reduce cholesterol levels). May be due to an effect on muscle proteins or a decrease in coenzyme Q10 (CoQ10).

##### **Management strategies:**

- Contact NCC who will inform NOK.

#### 14. Nausea and Vomiting

- Common with chemotherapy or radiation therapy
- May also occur with drugs that tend to slow or block the bowel, when electrolytes are imbalanced or with infections.

##### **Management strategies:**

- Call NCC for management strategies.



## References

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