

Drugs Affecting the Gastrointestinal System

Antidiarrheals

Diarrhea

- ▶ Abnormal frequent passage of loose stools
- or
- ▶ Abnormal passage of stools with increased frequency, fluidity, and weight, or with increased stool water excretion

Diarrhea

Acute Diarrhea

- ▶ Sudden onset in a previously healthy person
- ▶ Lasts from 3 days to 2 weeks
- ▶ Self-limiting
- ▶ Resolves without sequelae

Diarrhea

Chronic Diarrhea

- ▶ Lasts for over 3 to 4 weeks
- ▶ Associated with recurring passage of diarrheal stools, fever, loss of appetite, nausea, vomiting, weight loss, and chronic weakness

Causes of Diarrhea

Acute Diarrhea

Bacteria

Viral

Drug-induced
hyperthyroidism

Nutritional
syndrome

Protozoal

Chronic Diarrhea

Tumors

Diabetes

Addison's disease

Irritable bowel

Antidiarrheals: Mechanism of Action

1. Adsorbents

- ▶ Coat the walls of the GI tract
- ▶ Bind to the causative bacteria or toxin, which are then eliminated through the stool

Examples: bismuth subsalicylate (Pepto-Bismol),
 kaolin-pectin, activated charcoal,
 attapulgite (Kaopectate)

Antidiarrheals: Mechanism of Action

2. Anticholinergics

- ▶ Decrease intestinal muscle tone and peristalsis of GI tract
- ▶ Result: slowing the movement of fecal matter through the GI tract

Examples: belladonna alkaloids (Donnatal),
atropine, hyoscyamine

Antidiarrheals: Mechanism of Action

3. Intestinal Flora Modifiers

- ▶ Bacterial cultures of *Lactobacillus* organisms work by:
 - ▶ Supplying missing bacteria to the GI tract
 - ▶ Suppressing the growth of diarrhea-causing bacteria

Examples: *Lactobacillus acidophilus*
(Lactinex)

Antidiarrheals: Mechanism of Action

4. Opiates

- ▶ Decrease bowel motility and relieve rectal spasms
- ▶ Decrease transit time through the bowel, allowing more time for water and electrolytes to be absorbed

Examples: paregoric, opium tincture,
codeine, loperamide, diphenoxylate

Antidiarrheal Agents: Side Effects

Anticholinergics

- ▶ Urinary retention, hesitancy, impotence
- ▶ Headache, dizziness, confusion, anxiety, drowsiness
- ▶ Dry skin, rash, flushing
- ▶ Blurred vision, photophobia, increased intraocular pressure

Antidiarrheal Agents: Side Effects

Opiates

- ▶ Drowsiness, sedation, dizziness, lethargy
- ▶ Nausea, vomiting, anorexia, constipation
- ▶ Respiratory depression
- ▶ Bradycardia, palpitations, hypotension
- ▶ Urinary retention
- ▶ Flushing, rash, urticaria

Antidiarrheal Agents: Interactions

- ▶ Adsorbents decrease the absorption of many agents, including digoxin, clindamycin, quinidine, and hypoglycemic agents
- ▶ Adsorbents cause increased bleeding times when given with anticoagulants
- ▶ Antacids can decrease effects of anticholinergic antidiarrheal agents

Antidiarrheal Agents: Nursing Implications

- ▶ Use adsorbents carefully in elderly patients or those with decreased bleeding time, clotting disorders, recent bowel surgery, or confusion.
- ▶ Anticholinergics should not be administered to patients with a history of glaucoma, BPH, urinary retention, recent bladder surgery, cardiac problems, or myasthenia gravis.

Antidiarrheal Agents: Nursing Implications

- ▶ Teach patients to take medications exactly as prescribed and to be aware of their fluid intake and dietary changes.
- ▶ Assess fluid volume status; intake and output; and mucous membranes before, during, and after initiation of treatment.

Antidiarrheal Agents: Nursing Implications

- ▶ Teach patients to notify their physician immediately if symptoms persist.
- ▶ Monitor for therapeutic effect.