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Dicyclomine toxicity: A rare case report

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Abstract

Here we are reporting a rare case of dicyclomine toxicity which is a commonly used drug.

Keywords: Dicyclomine toxicity, rare case report

Introduction

Dicyclomine is an anticholinergic drug used in intestinal hypermotility and irritable bowel syndrome morning and motion sickness, dysmenorrhea, It blocks the action of acetylcholine at parasympathetic sites in smooth muscle, secretory glands and CNS. Adverse reactions are rare but include dizziness, xerostomia, nausea, blurred vision, weakness, etc ^[1]. We are reporting a case of one and half year old child who presented with CNS effects of dicyclomine toxicity.

Case summary: A one and half year male child presented in ER of our hospital with complaint of 2 episodes of vomiting for 3 hours, fever (101 F) not associated with chills followed by decreased urination, blurring of vision and dizziness. On examination, general condition of the child was sick, febrile with heart rate of 160/min, respiratory rate of 35/min and decreased consciousness. Bilateral pupils were dilated. Careful history taking revealed intake of dicyclomine drops (20mg) for colic pain 2 hours prior to start of above mentioned signs and symptoms. There were no evidence of any other significant medical, autoimmune or infective etiology. There was no history of any other drug intake. The child was admitted and GA and GL was done. The child was catheterised for urine output monitoring and managed conservatively with IV fluids, antacids and antiemetics. Blood investigations were in normal limits. The child gradually recovered within 12 hours and was discharged after 48 hours of hospital stay. The patient was followed up for 3 days after discharge and clinical examination was within normal limits.

Discussion

Dicyclomine is a commonly used drug in infants with colic. Adverse effects are rare but commonly observed effects include dizziness, nervousness, nausea, xerostomia, blurred vision, constipation, etc. Das *et al.* reported a case of 18 years old female with dicyclomine abuse who presented with CNS signs and symptoms ^[2]. Williams *et al.* also reported 2 cases of infants where use of dicyclomine led to respiratory events ^[3]. Garriott *et al.* also reported 2 cases of infant deaths in whom toxic levels of dicyclomine were present in blood on autopsy ^[4]. In index case, the child presented with anticholinergic effects, mainly CNS signs and symptoms and recovered fully. Although, blood dicyclomine levels could not be done but no other could be elicited for such illness.

Conclusion

Although a safe drug but dicyclomine should be cautiously used in children and should be observed for anticholinergic side effects. Parents should be counselled.

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