Chapter 31

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How to use this chapter:

This chapter explains how to use medicines safely and effectively. It also has information to help you decide when to use medicine and when not to.

Specific information on side effects, warning signs, and other issues for each medicine mentioned in this book is found in the “Medicines Pages” following this chapter, starting on page 485.
People take medicines to help the body fight disease or feel better when sick. The medicines in this book can be bought in pharmacies or some other stores, and given by health workers.

Traditional medicines, often from herbs or other plants, can also be useful for comfort and healing. This book has little information about them because they vary greatly from one region to another. A remedy that works in one community may not exist in another community. Ask traditional healers and health workers where you live to help you find remedies that may work for your problem. (For more information on traditional medicines, see page 22.)

It is important to use medicines safely. Used properly, medicines save lives. But when they are not used carefully, medicines can hurt and even kill you. For example, some medicines can harm both you and your baby during pregnancy or breastfeeding. And some medicines may cause problems called side effects, which can be annoying, worrisome, or dangerous to your health. And very often, if you take too much of a medicine at once, or take it too often, it can harm you.
Deciding To Use Medicine

Some people think medicines are always the best treatment. Others try to avoid medicines. Whether medicines will help you depends on the illness and if the right medicines are available. Some health problems go away without medicine. A person with a cold, for example, will get better after getting rest and drinking lots of liquids. For other health problems, medicines may be necessary to save a person's life, keep the illness from getting worse, or keep the illness from spreading to other people.

Before taking medicine, ask yourself or a health worker:

- Can I get better without this medicine?
- Is there a traditional medicine or lower cost medicine that will work the same or better?
- Are the benefits of using this medicine greater than the costs?

To the health worker:

When giving medicine, remember these guidelines:

1. **Medicine alone is not good health care.** Good health care means explaining why people have a health problem, what they can do to get better, and how they can prevent that problem in the future. Encourage people to ask questions and respond to their concerns.

2. **Medicine is safe and helpful only if you clearly explain how to take it** (see pages 474 to 476). It takes practice and care to give instructions in ways that people are sure to understand and likely to follow.

3. **Consider the person’s beliefs and experiences with medicine.**
   If someone believes more medicine will make them heal faster, they may take extra and harm themselves. If they are afraid a medicine will harm their body, they may not take it at all. Talk through their questions and concerns as you explain how the medicine works, how to take it, and any side effects to expect.

4. **Help people avoid fake or dangerous treatments, or ones that are costly.**
   Explain where they can find the best treatment and not pay too much, for example, by buying a generic instead of a brand name (see page 473).
**Harmful Uses of Medicines**

Used correctly, medicines are needed to treat dangerous illnesses, manage other health conditions, and save many lives. However, using the wrong medicine, using medicines the wrong way, or taking too much can hurt or even kill. To avoid harm, know what the medicine is, if it is necessary, and how to use it safely.

Here are some examples of harm from using medicines:

- Sometimes people try to end unplanned pregnancies by taking medicines meant to treat other health problems. This usually does not work. Instead, it can cause serious problems, such as poisoning and death. See Chapter 15 to learn about medicines used for safe abortion.

- While oxytocin, ergometrine, and misoprostol are lifesaving drugs when used to stop heavy bleeding AFTER birth, they are often misused BEFORE birth. Only use them to strengthen labor if you have been trained to do so and are in a medical center in case something goes wrong. They can cause the womb to burst, which could kill both the baby and the person giving birth.

- Do not try to stop the flow of breast milk with bromocriptine. It is very dangerous. When you are no longer breastfeeding, the milk will dry up naturally.

- People are often sold medicines or supplements to calm fears, improve your mood, or help with sleep. If you have difficulty getting through each day, talk to a trained mental health worker before trying a treatment so you do not spend money on something that does not help. Sometimes talking with others or finding ways to calm the mind is the best medicine (see page 422).

- Avoid buying vitamins or nutrition supplements unless you need them to treat a specific condition such as anemia (see page 73) or you are pregnant. During pregnancy, the body needs extra vitamins and minerals like iron and folic acid. Otherwise, people can usually get enough vitamins and minerals by eating a variety of nutritious foods (see pages 166 to 170), and this costs less.
How To Use Medicine Safely

Any time you use a medicine, follow these guidelines:

- Be sure it is necessary.
- Get good instructions about how to take it, including:
  - how much to take (the dose).
  - how often to take it each day and for how many days.
- Take the full amount, for the right number of days. If you stop taking the medicine too soon, the problem may come back.
- Know the side effects (page 478) or problems the medicine can cause (see the "Medicines Pages").
- Know if you should take the medicine with food or on an empty stomach, and if it reacts badly with any foods.
- Be careful when taking many medicines at the same time. Some medicines and supplements do not work well when taken together. Tell your health worker about everything you already take before they add a new medicine.
- Look carefully at combination medicines (2 or more medicines in 1 tablet or liquid). Medicines for some illnesses, such as HIV and malaria, often come as combination medicines because they are easier to take and important to take together. However, other combination medicines may contain medicines you do not need, and can cause you to have more side effects. They may also cost more than buying medicines separately.
- Check for a label. If there is no label, ask to see the medicine's container. Copy the name, dose, and expiration date.

Store medicines properly and check their quality and expiration date

It is best to use a medicine before its expiration date. This date is written in small print on the package or bottle. For example: “exp. 10/29/25,” “exp. 29/10/25,” and “exp. Oct. 29, 2025” all mean the medicine will work best before October 29th of 2025. If stored away from heat and light, medicines may remain safe and useful after the date shown. This is not true for eye drops, insulin (for diabetes), and epinephrine (for allergic reactions), so do not use them after the date has passed.

Do not use any medicines if they are:
- tablets that are starting to fall apart or change color.
- capsules that are stuck together or have changed shape.
- clear liquids that are cloudy or have anything floating in them.
- medicines not stored as instructed, for example, if they must be kept cold but were not.
- medicine powders for mixing if the powder looks old or does not pour smoothly after shaking. Also check instructions for how long it is OK to use after mixing and when to throw it away.

IMPORTANT Keep medicines in a cool, dry place away from light so they do not spoil. Do not use tetracycline after the expiration date. It may be harmful.
This book provides information about many medicines used to treat common health problems. But to be able to buy and then use a medicine safely, you must also know:

- what the medicine is called where you live (see below).
- in what forms the medicine comes (see page 474).
- how to measure the medicine and how much to take (see page 474).
- who should not take the medicine, including whether it should be avoided during pregnancy and breastfeeding (see page 477).
- what side effects the medicine causes (see page 478).
- what happens if you take too much of the medicine (see page 479).

The next few pages explain more about important things you need to know to use a medicine safely. Starting on page 490, you can also find out this information for each medicine mentioned in this book.

For some kinds of medicines, such as antibiotics, pain medicines, and some others, you need additional information to choose and safely use them. See pages 480 to 483.

**Generic names and brand names**

Most medicines have 2 names—a generic or scientific name, and a brand name. The generic name is the same everywhere in the world. The brand name is given by the company that makes the medicine. When several companies make the same medicine, it will have several brand names but only one generic name. As long as the medicine has the same generic name, it is the same medicine.

In this book, we use the generic (scientific) name for medicines. For a few medicines, we also use the most widely available brand name. Knowing the generic name means you can tell when 2 different brand name medicines are actually the same medicine.

For example: Your health worker has told you to take Flagyl. But when you go to the pharmacy, they do not have any. Ask the pharmacist or health worker what the generic name is for that medicine—it is usually printed on the label, box, or package. Then you can ask for the medicine by its generic name (it often costs less) or ask for another brand that has the same generic name.
**Medicine comes in different forms**

- Tablets, capsules, and liquids are usually taken by mouth. In some cases, they may be used in the *vagina* or *rectum*.
- Inserts (suppositories, pessaries) are made so they can be put into the vagina or the rectum.
- Injections are given with a needle directly into a person’s muscle, or under the skin, or into the blood.
- Creams, ointments, or salves that contain medicine go on the skin or in the vagina. They can be very useful for mild skin infections, sores, rashes, and itching.

Some medicines come in more than one form and may contain different amounts of medicine, for example, regular and extra-strength paracetamol tablets.

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**How to measure medicine**

First, find out how much medicine is in each tablet or capsule. This is sometimes called the “strength” of the medicine. To know the strength of the medicine, check how many grams, milligrams, micrograms, or Units are in each tablet or capsule.

If the pharmacy does not have tablets with the exact strength you need, you may have to cut a tablet into 2 or more equal size pieces, or take more than one tablet or capsule.

- \(=\) means *equal to* or the *same as*
- \(+\) means *and* or *plus*

\[\frac{1}{2} \text{ tablet} = \text{half of a tablet} =\]

\[\frac{1}{4} \text{ tablet} = \text{one quarter (or one fourth) of a tablet} =\]

**For example:**

Ampicillin tablets come in 2 sizes:

If you only have tablets of 250 mg and the instructions say, “Take 1 tablet of 500 mg, 2 times a day,” then take 2 tablets of 250 mg each time (twice a day).

If you only have tablets of 500 mg and the instructions say, “Take 1 tablet of 250 mg, 2 times a day,” then cut one 500 mg tablet in half. Take the half-tablet (with 250 mg) each time (twice a day).
**Kinds of measurements**

**Grams and milligrams.** The strength of medicines is often shown in grams (g) and milligrams (mg):

- 1 g = 1000 mg (This means one gram has 1000 milligrams.)
- 1 mg = .001 g (This means a milligram is much smaller than a gram. It takes 1000 milligrams to make one gram.)

**For example:**

This aspirin tablet has 325 milligrams of aspirin.

<table>
<thead>
<tr>
<th></th>
<th>.325 g</th>
<th>0.325 g</th>
<th>325 mg</th>
</tr>
</thead>
<tbody>
<tr>
<td>All of these are different ways to say 325 milligrams.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Micrograms.** The strength of some medicines, like birth control pills, is given in even smaller amounts called micrograms (mcg or μg)

- 1 μg = 1 mcg = 1/1000 mg (0.001 mg)
- 1000 mcg = 1 mg

**Units.** The strength of some medicines is measured in Units (U) or international units (IU).

**For liquid medicine:** Sometimes instructions for syrups or suspensions tell you to take a specific amount, for example, 10 ml (milliliters) or 10 cc (cubic centimeters). A cubic centimeter is the same as a milliliter. If the medicine does not come with a special spoon or dropper to measure liquid, you can use household measures:

- 1 tablespoon = 1 Tbsp = 15 ml
- 1 teaspoon = 1 tsp = 5 ml

**Dosing by weight**

The dose for some medicines depends on the size of the person. For children and for medicines where a too-high dose can be very dangerous, you may be told to calculate the dose by weight. See *Where There Is No Doctor*, page 340, for how to do that.
How often to take medicines

It is important to take medicines at the right time. Some medicines should be taken only once a day, and others must be taken more often. You can use a clock but you do not need one. If the directions say “1 pill every 8 hours,” or “3 pills a day,” take one at sunrise, one in the afternoon, and one at night. If they say “1 pill every 6 hours,” or “4 pills a day,” take one in the morning, one at midday, one in the late afternoon, and one at night. If the directions say “1 every 4 hours,” take 6 pills a day, allowing about the same time between pills.

IMPORTANT

• If possible, take medicines while standing or sitting up. Also, try to drink a full glass of water or another liquid each time you take a medicine.

• If you vomit soon after taking a medicine, you may need to take it again. Read the instructions to see if the medicine had enough time to work in the body or if it likely came out with the vomit, even if you cannot see it.

If you are helping someone who does not read well, you can draw them instructions that look like this:

In the spaces under the sun and moon, draw the amount of medicine to take and carefully explain what it means. For example:

This means they should take 1 tablet 4 times a day: 1 at sunrise, 1 at midday, 1 in the late afternoon, and 1 at night.

This means half a tablet 4 times a day.

This means 1 capsule 3 times a day.

➤ If you vomit or have severe diarrhea while taking birth control pills, you may need to take another pill to be protected from pregnancy. See pages 210 and 211.
WHO SHOULD NOT TAKE A CERTAIN MEDICINE

Some medicines can be dangerous for certain people, or during certain times of their lives. Be especially careful if:

• you are pregnant or breastfeeding. Many medicines taken during pregnancy and breastfeeding can affect the baby. Before you take any medicine, find out if it could be harmful. Medicines in this book that are harmful during pregnancy and breastfeeding are marked with a warning.

Do take medicines to treat illnesses, including anemia, because your health is very important both for you and your baby. Many medicines are safe to take during pregnancy and breastfeeding.

• you have long-term liver or kidney disease. The liver and kidneys clear medicine from the body. If they are not working well, the medicine may build up and become poisonous.

• you have a stomach ulcer or a stomach that upsets easily (heartburn). Medicines such as aspirin and ibuprofen can cause bleeding in the stomach and a painful or burning feeling. If you must take a medicine that bothers your stomach, take it with food or milk.

• you are allergic to the medicine. If you have ever had any of these signs after taking a medicine, you are probably allergic to that medicine:
  - a skin rash (raised, red and itchy, usually with swelling)
  - swelling of the face, throat, arms, or legs
  - trouble breathing or swallowing

Being allergic means your body fights against the medicine rather than using it to fight disease. Allergic reactions happen more often with antibiotics from the penicillin and sulfa families. If you have an allergic reaction to a medicine, do not take it again and also avoid all other medicines from the same family. See page 480 for more information about antibiotics and their families.

IMPORTANT If you have an allergic reaction to a medicine, never take the medicine again. The next time it can cause a more serious reaction or even death.

IMPORTANT If you have taken a medicine and then get a severe skin rash, swelling of the face or throat, or have difficulty breathing or swallowing, get medical help immediately.
**SIDE EFFECTS**

Medicines fight disease but can also cause other effects to happen in the body. Some common side effects of medicines are upset stomach, headaches, and sleepiness. Because everyone is different, some people may feel no side effects and others may feel more than one from the same medicine. If side effects are severe, ask a health worker if it is safe to continue taking the medicine or if you can switch to a different medicine.

Before you take a medicine, find out what the possible side effects are. When using any medicine in this book, you can look at the “Medicines Pages” to learn about its possible side effects.

**IMPORTANT** If you have signs such as dizziness, ringing in your ears, or fast breathing, and these are not listed as side effects for the drug you are taking, see a health worker trained in giving medicines. Too much medicine in the body is one cause of these danger signs (see page 479).

**PRECAUTIONS (WARNINGS)**

Always check a medicine’s specific warnings before taking it. Talk to a health worker if:

- **you are taking other medicines.** Medicines that are safe when taken alone can be harmful or may not work as well when taken with another medicine.
- **giving medicine to a child.** Children have smaller bodies and often need to take less medicine. Check with a pharmacist or health worker to find out the right dose for a child.
- **you are older.** Older people sometimes need smaller doses because medicine will stay in their bodies longer.
- **you are very small, thin, or poorly nourished.** You may need a smaller dose of some medicines, such as medicines for tuberculosis, high blood pressure, and seizures.

**FOOD AND TAKING MEDICINE**

With most medicine, you can continue eating the foods you usually eat. Some medicines work better if you take them when your stomach is empty—one hour before or two hours after eating.

Medicines that can upset the stomach usually cause less discomfort when they are taken with food or milk or just after eating.

If you have nausea or vomiting, take the medicine with a dry food that calms the stomach—like rice, bread, or a biscuit.
DANGERS OF TAKING TOO MUCH MEDICINE

Taking too much medicine often happens by mistake, but some people think that taking more medicine will heal the body faster. This is not true. If you take medicine too often, or too much all at once, or for too long, the medicine can harm you.

Some common signs of taking too much of a medicine are:
- nausea
- vomiting
- pain in the stomach
- headache
- dizziness
- ringing in the ears
- fast breathing

But these signs may also be side effects of taking some medicines. If you have one or more of these signs and they are not common side effects of the medicine you are taking, check to make sure you are not taking too much, and then talk to a health worker trained in giving medicines.

Poisoning. Get medical help if you think someone, especially a child, took too much medicine. Also:
- Help the person spit out any pills still in their mouth.
- Find the medicine bottle or box to show health workers.
- Give activated charcoal (see page 495) to absorb some medicines, including aspirin and paracetamol, before they cause poisoning.
- Activated charcoal will not work for too much iron (in iron tablets, multivitamins, or prenatal vitamins). Helping the person vomit may help, or having them drink lots of water.
Medicines treat a variety of problems. When you can treat a problem using any of several medicines, you can think of them as a group—a kind of medicine. For example, aspirin and paracetamol are painkillers. Ampicilin, doxycycline, and metronidazole are antibiotics (see box below). This is helpful when you cannot use a specific medicine because:

- it is not available where you live.
- it is not safe to take when you are pregnant or breastfeeding.
- you are allergic to it.
- it no longer works where you live, because of drug resistance (see box below).

For these situations, the Medicines Pages often lists other medicines in the same group that you can use instead to treat the problem. If you are unsure of what medicine to take, talk to a health worker.

### Medicines for Infections: Antibiotics

Antibiotics are used to fight infections caused by bacteria. They do not fight viruses or cure the common cold. But not all kinds of antibiotics will fight all kinds of infections. Antibiotics that share the same chemical make-up are said to be from the same “family.” It is important to know about the families of antibiotics for 2 reasons:

1. Antibiotics from the same family can often treat the same problems.
2. If you are allergic to one antibiotic in a family, it is likely you will be allergic to other antibiotics in that family. It is safest for you to take an antibiotic from another family instead.

**The major families of antibiotics discussed in this book are:**

**Penicillins:** amoxicillin, ampicillin, benzathine benzylpenicillin, benzylpenicillin, dicloxacillin, procaine penicillin, and others.

Medicines of the penicillin family are very effective for a variety of infections. They have very few side effects and are safe to take when pregnant or breastfeeding. They are widely available, cheap, and come in oral and injectable forms. But they also cause more problems with allergic reactions than other medicines. Because they have been used incorrectly in many places, some infections are now resistant to penicillins (see page 264).

**Macrolides:** azithromycin, erythromycin, and others

Erythromycin is an older, commonly used, and widely available antibiotic that works for many of the same infections as penicillin and doxycycline. It is often a good substitute for doxycycline during pregnancy and breastfeeding, or if there is penicillin allergy.

**Tetracyclines:** doxycycline, tetracycline

Tetracycline and doxycycline both treat many different infections and are widely available. These drugs can harm developing bones and teeth, so neither should be taken during pregnancy, or by children under 8 years old. People who are breastfeeding should not take tetracycline, but can take doxycycline for a short time to treat infections.
Common Kinds of Medicines

**Sulfas (sulfonamides):** sulfamethoxazole (part of cotrimoxazole), sulfisoxazole

These medicines fight many different kinds of infections and they are widely available. They are less effective now because some infections are resistant to them. They can be taken during pregnancy, but it is better to take a different medicine during the last month of pregnancy and for the first month of the baby’s life if breastfeeding. Allergic reactions to sulfas are common. Stop using sulfonamides immediately if you develop signs of allergy (see page 545).

**Aminoglycosides:** gentamicin, streptomycin, and others

These are effective and strong medicines, but they can cause serious side effects and can only be given by injection. They should only be used when infection is severe and no safer drug is available.

**Cephalosporins:** cefixime, ceftriaxone, cephalexin, and others

This is a large family of antibiotics that treat many infections that have become resistant to older antibiotics. They are often safer and have fewer side effects than older antibiotics but can be expensive and hard to find. They are safe to use during pregnancy and breastfeeding.

**Quinolones:** ciprofloxacin, norfloxacin, and others

Ciprofloxacin and norfloxacin may be harder to find or more costly than other antibiotics. They usually are not used by children or during pregnancy or breastfeeding.

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**Use antibiotics only when necessary**

Antibiotics are often used when they are not needed. This is a problem because:

- while they kill bacteria (germs) that cause illness, they also kill the healthy bacteria in our bodies needed to digest food and keep the body well. This can cause problems like diarrhea and vaginal yeast infections.
- using antibiotics that are not needed means people have more bothersome side effects and risk allergic reactions.
- using antibiotics for diseases they cannot cure has made some harmful germs stronger and resistant to these medicines. This means the medicines stop working well against diseases where they were useful before.

*For example:* In the past, penicillin could cure gonorrhea, a sexually transmitted infection. But penicillin became less effective after years of use on illnesses it could not cure.

Now gonorrhea resists (is stronger than) penicillin and other antibiotics, and is much harder to cure.

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**Before**

**Now**
**Medicines for Pain**

Pain is a sign of a problem, such as an injury or infection. It is very important to treat the problem that is causing the pain, and not just the pain. But during the treatment, the pain can be eased with pain medicines. And for illnesses that last a long time, easing pain is very important to a person’s well-being.

Always:
- try to find and treat the cause of the pain.
- try common pain medicines first (see below) and use stronger ones only if needed.
- use a schedule to give medicines for ongoing pain. For example, give every 6 hours. Do not wait until the pain returns before the next dose.
- think about other ways to relieve pain: relaxation exercises, acupressure, or putting heat or cold where the pain is (see pages 423 and 546).

**For mild to moderate pain, as with menstrual periods or headache:**

**Paracetamol (acetaminophen)** is widely available and cheap. It is the safest pain medicine for pregnant and breastfeeding women, and it also works to reduce fever. Do not take more than the recommended amount. Too much is poisonous to the liver.

**Aspirin** is also widely available and cheap. It works well to lower fever and to treat menstrual pain and pain and inflammation in muscles and joints. Do not use while pregnant and avoid while breastfeeding. However, a low dose of aspirin is safe to use in pregnancy when given to prevent pre-eclampsia (see page 74). Aspirin can irritate the stomach, so it should not be taken by people with stomach ulcers. Aspirin keeps blood from clotting, so it should not be taken if the person is bleeding or before any surgery.

**Ibuprofen** is very effective in lower doses for pain during menstrual periods, and for muscle and joint pain and inflammation. Ibuprofen is also good for the lasting pain of arthritis. Because it can irritate the stomach and cause bleeding, it should not be taken by people with stomach ulcers or before surgery. Ibuprofen can be used safely while breastfeeding but should not be used in the last 3 months of pregnancy.

**For moderate to severe pain, or strong, ongoing pain:**

**Ibuprofen** in larger doses can be effective (up to 800 mg 3 to 4 times daily).

**Codeine**, an opioid, is useful for pain after surgery or an injury. Higher doses can be used for severe or ongoing pain. Taking codeine in large amounts or for a long time can lead to addiction (see page 437).

**Morphine**, a very strong opioid, relieves moderate or severe pain, including ongoing pain from later stages of cancer or advanced HIV disease. It must be prescribed by a health worker, and people can learn to manage it at home. See Hesperian’s *Helping Children Live with HIV.*
**MEDICINES FOR HEAVY BLEEDING FROM THE VAGINA AFTER BIRTH OR ABORTION**

Ergometrine, oxytocin, and misoprostol are medicines that cause contractions of the womb and its blood vessels. They are important medicines to control heavy bleeding after birth.

Ergometrine is used to prevent or control severe bleeding after the placenta has come out. Ergometrine should be injected into a large muscle, not into a vein (IV). Do not use if the person giving birth has high blood pressure.

Oxytocin is used to help stop severe bleeding after the baby is born. Oxytocin is injected into a large muscle. Never use oxytocin to speed up labor. This is dangerous to both the person giving birth and the baby.

Misoprostol was developed to stop bleeding from stomach ulcers, but it is also used to stop bleeding after birth. Misoprostol tablets can be taken by mouth or inserted into the rectum to treat heavy bleeding after birth (see page 508).

**MEDICINES FOR HIV**

Antiretrovirals to treat HIV are usually taken as a combination of 3 or 4 medicines. They must be taken regularly and without missing doses, usually every day at the same time. See pages 517 to 521.

**MEDICINES FOR ALLERGIC REACTIONS**

A person can be allergic to medicines, foods, or things that are breathed in or touched. Mild allergic reactions cause discomfort with signs like itching, hives, rash, or sneezing. Severe allergic reactions and allergic shock can be life-threatening and must be treated quickly. Any medicine that causes an allergic reaction should be stopped and never given again—even if the reaction was mild.

Depending on how severe an allergic reaction is, it can be treated with one or more of the following kinds of medicines:

1. **Antihistamines**, like diphenhydramine (page 499), hydroxyzine (page 503), or promethazine (page 513) are often used for itching, sneezing, and other mild allergic reactions. All of these should be avoided if the person is pregnant or breastfeeding, but promethazine is the least dangerous.

2. **Steroids**, like dexamethasone (page 497) or hydrocortisone (page 503). Dexamethasone is a better choice during pregnancy or breastfeeding.

3. **Epinephrine (adrenaline)**. Epinephrine is the most important treatment for severe allergic reactions and allergic shock. It is safe to use during pregnancy and breastfeeding. See page 500.
Starting a community medicine kit may help save someone’s life. See the chart to know which medicines can be used to start treatment until other medical help is available. Make sure these medicines are in your kit or at the nearest health post. If you need to buy them, meet with your community leaders to explain how these medicines can help save lives. Ask them to find ways for the community to purchase them and keep them in stock.

What to include in a medicine kit to treat emergencies discussed in this book:

<table>
<thead>
<tr>
<th>Problem</th>
<th>Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>pelvic infection (PID)</td>
<td>tablets: azithromycin, cefixime, doxycycline, erythromycin, metronidazole for injection: ceftriaxone</td>
</tr>
<tr>
<td>kidney infection</td>
<td>tablets: ciprofloxacin, cotrimoxazole for injection: ceftriaxone</td>
</tr>
<tr>
<td>bleeding after birth, abortion, or miscarriage</td>
<td>tablets: misoprostol for injection: ergometrine, oxytocin</td>
</tr>
<tr>
<td>infection after birth, abortion, or miscarriage</td>
<td>tablets: doxycycline, metronidazole for injection: ampicillin, ceftriaxone, clindamycin, gentamicin, metronidazole</td>
</tr>
<tr>
<td>eclampsia during or after birth</td>
<td>diazepam, magnesium sulfate</td>
</tr>
<tr>
<td>emergency pregnancy prevention (after rape, broken condom, or other emergency)</td>
<td>combined birth control pills, minipills, special emergency contraception pills. See pages 523 to 524.</td>
</tr>
<tr>
<td>allergic reaction to antibiotic</td>
<td>dexamethasone, diphenhydramine, epinephrine, hydrocortisone</td>
</tr>
<tr>
<td>unwanted pregnancy</td>
<td>mifepristone, misoprostal, pregnancy test strips</td>
</tr>
</tbody>
</table>