meclizine (mek-lie-zeen)
Antivert, Bonine, Dramamine Less Drowsy Formula
Classification
Antiemetics, antihistamines
Pregnancy Category B

Indications
Management prevention of: Motion sickness, Vertigo
Action
Has central anticholinergic, CNS depressant, and antihistaminic properties. Decreases excitability of the middle ear labyrinth and depresses conduction in middle ear vestibulo-cerebellar pathways. Therapeutic Effects: Decreased motion sickness. Decreased vertigo from vestibular pathology.

Pharmacokinetics
Absorption: Absorbed after oral administration.
Distribution: Unknown.
Metabolism and Excretion: Unknown.
Half-life: 6 hr.

TIME/ACTION PROFILE (antihistaminic effects)
ROUTE ONSET PEAK DURATION
PO 1 hr unknown 8–24 hr

Contraindications/Precautions
Contraindicated in: Hypersensitivity; OB: Has caused congenital malformations (cleft palate) in animal studies.
Use Cautiously in: Prostatic hyperplasia; Angle-closure glaucoma; Lactation: Occasional use may be acceptable; prolonged use may expose infant to drug effects or may interfere with milk supply; Pedi: Children <12 yr (safety not established) ; Geri: q/sensitivity and risk of adverse reactions.

Adverse Reactions/Side Effects
CNS: drowsiness, fatigue. EENT: blurred vision. GI: dry mouth.

Interactions
Drug-Drug: Additive CNS depression with other CNS depressants, including alcohol, other antihistamines, opioid analgesics, and sedative/hypnotics. Additive anticholinergic effects with other drugs possessing anticholinergic properties, including some antihistamines, antidiarrheals, spasmolytics, phenothiazines, quinidine, and disopyramide. CYP2D6 inhibitors may ↑ levels.

Route/Dosage
PO (Adults and Children ≥12 yr): Motion sickness — 25–50 mg 1 hr before exposure; may repeat in 2 hr; vertigo — 25–100 mg/day divided doses.

NURSING IMPLICATIONS
Assessment
● Assess patient for level of sedation after administration.
● Motion Sickness: Assess patient for nausea and vomiting before and 60 min after administration.
● Vertigo: Assess degree of vertigo periodically in patients receiving meclizine for labyrinthitis.
● Lab Test Considerations: May cause false-negative results in skin tests using allergen extracts. Discontinue medicine ≥2 hr before testing.

Potential Nursing Diagnoses
Risk for injury (Side Effects)

Implementation
● Do not confuse Antivert (meclizine) with Axert (almotriptan).
● PO: Administer oral doses with food, water, or milk to minimize GI irritation.

Patient/Family Teaching
● Instruct patient to take meclizine exactly as directed. If a dose is missed, take as soon as possible unless almost time for next dose. Do not double doses.
● May cause drowsiness. Caution patient to avoid driving or other activities requiring alertness until response to the medication is known.
● Advise patient that concurrent use of alcohol and other CNS depressants with this medication.

●” indicates life-threatening; “□” indicates most frequent. ■ discontinued.
Motion Sickness

When used as prophylaxis for motion sickness, advise patient to take medication at least 1 hr before exposure to conditions that may cause motion sickness.

Evaluation/Desired Outcomes

- Prevention and relief of symptoms in motion sickness.
- Prevention and treatment of vertigo due to vestibular pathology.

Why was this drug prescribed for your patient?