Parents of young children used over the counter medication to alleviate symptoms and to change children's behaviour

Allotey P, Reidpath DD, Elisha D. "Social medication" and the control of children: a qualitative study of over-the-counter medication among Australian children. *Pediatrics* 2004;114:e378-83.

Q What are the individual and contextual factors and the social processes that support the use of over the counter (OTC) medication in children?

DESIGN

Qualitative study.

SETTING

Australia.

PARTICIPANTS

40 parents (38 mothers plus 2 partners) who were primary caregivers of children <5 years of age, were mostly middle class, and were in a relationship. 75% of parents had >1 child, and >50% worked or studied part time.

METHODS

Semistructured interviews were used to collect demographic data. Unstructured interviews (duration 2 h) were used to elicit information about the most recent occasion when an OTC medication was given, including details about the course of illness (when applicable), identified symptoms, and contextual factors surrounding OTC medication use. Vitamin or supplement use was not considered. Data from interviews were thematically analysed.

MAIN FINDINGS

All of the parents gave paracetamol (acetaminophen) to their children. The next most commonly used medications were sedating antihistamines (eg, cough and cold preparations). Most parents used combinations of these medications at different times. The most common indications for the use of paracetamol were teething and hyperpyrexia. Mothers used indirect signs of warm or flushed appearance, lethargy, bad temper, and complaints of soreness to indicate that their children were feeling unwell. Colds or runny noses were treated with a range of antihistamines (most often promethazine).

3 themes emerged regarding the use of OTC medication. (1) *Social medication*. Parents would often use medication because of its known side effects rather than its intended purpose. In this way, they would use medications pre-emptively based on signs such as a grumpy, overtired, or unhappy child. (2) *Behaviour change*. Paracetamol was used to deal with several problems. Mothers administered paracetamol to calm children, to enhance sleep, and to ward off sad feelings when they felt ill. (3) *Reducing parental inconvenience*. Social medication made travel easier, allowed mothers to leave their children in the care of others, and "maintained the sanity" of

parents. Most mothers found that OTC medications helped them to maintain routines and control over their lives. They could travel long distances with children when they used sedating antihistamines. They could leave the child in the care of another person or send them to school when the child was unhappy because the medication changed behaviour. OTC medication also helped the child sleep when parents were exhausted and needed a good night's sleep themselves. Some parents used OTC medication to help break a child's cycle of bad sleeping habits.

CONCLUSIONS

Many parents of children <5 years of age used over the counter medication not only to alleviate illness symptoms but also to change children's behaviour, which helped parents have control over their lives. Paracetamol and antihistamines were most commonly used because of a perception of their calming and sedating properties.

Commentary

Allotey *et al* provide insight into parents' use of OTC medication. The authors' literature review presents a convincing case for the apparent success of increased marketing of OTC medication to women by focusing on the management of children's symptoms so that mothers can continue to work. Although parents used paracetamol for fever and teething and sedating antihistamines for cold symptoms in their children, they also used OTC medications for known side effects rather than for the specific purpose of the medication. This practice of *social medication* allowed parents to maintain a more usual routine of taking children to day care, working, dealing with long distance travel, and getting a good night's sleep. Clearly, an understanding that mothers medicate their children for reasons other than the purposes of the medication is important for healthcare professionals. There is a need to communicate the potential harms associated with OTC medication to parents and to educate about their purpose and safe dosage.

OTC medications may mask the symptoms of illnesses that may require medical attention. As well, children may learn to see medications as a quick fix solution when they are simply feeling "unwell" or a general coping strategy. OTC medications have major social implications, particularly with respect to the ways in which they affect learning ability. Research questions arising from this study include determining the extent to which social medication occurs, the social distribution of social medication, and the nature of the consequences of the phenomenon.

Cheryl H Gibson, RN, PhD
Faculty of Nursing, University of New Brunswick
Fredericton, New Brunswick, Canada

For correspondence: Professor P Allotey, Brunel University, Uxbridge, UK.
pascale.allotey@brunel.ac.uk

Source of funding: Deakin University.