## American College of Emergency Physicians<sup>®</sup>

## POLICY STATEMENT

ADVANCING EMERGENCY CARE\_\_\_\_\_

Approved February 2020

## Use of Antitussive Medications in the Pediatric Population

Originally approved February 2020

As an adjunct to this policy statement, ACEP has prepared a Policy Resource and Education Paper (PREP) entitled, "Use of Antitussive Medications in Acute Cough in Young Patients" Recognizing the lack of efficacy and risk of adverse events associated with antitussive medications in pediatric patients, the American College of Emergency Physicians (ACEP):

- 1. Does not support the utilization of over-the-counter or prescription single ingredient antitussive or fixed-combination ingredient cough and cold preparations in the treatment of pediatric patients.
- 2. Agrees with the American Academy of Pediatrics (AAP) that cough and cold medicines should not be prescribed or recommended for respiratory illness in young children.
- 3. Supports the Food and Drug Administration (FDA) warning that codeine should not be used to treat cough in children younger than 12 years due to the risk of serious side effects, including slowed or difficult breathing and death.
- 4. Supports the FDA recommendation that codeine is not recommended to treat cough in adolescents between 12 and 18 years who are obese or have conditions such as sleep apnea or severe lung disease that may increase the risk of breathing problems.
- 5. Discourages the use of dextromethorphan-containing cough medicines in pediatric patients due to risk of serious adverse effects and insufficient evidence for efficacy.
- 6. Discourages the use of benzonatate-containing cough medicines in pediatric patients due to the risk of serious adverse effects and the lack of research regarding efficacy in the pediatric population.

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