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Perspective

UNUSUAL APPLICATIONS OF A WELL-KNOWN DRUG: PARACETAMOL

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PERSPECTIVE

At a typical dose, paracetamol, commonly known as acetaminophen (a), is a medicine used to treat fever and mild to moderate discomfort. Because paracetamol only modestly lowers body temperature, it is inferior to ibuprofen in this regard, and the advantages of its usage for fever are uncertain. In acute moderate migraine, paracetamol may help, but only modestly in episodic tension headache. The aspirin/paracetamol/caffeine combination, on the other hand, is effective for both minor pain situations and is suggested as a first-line therapy.

Although paracetamol is beneficial in the treatment of post-surgical pain, it is not as effective as ibuprofen. The combination of paracetamol and ibuprofen increases potency even more and is preferable to any medicine alone. In osteoarthritis, the pain reduction provided by paracetamol is minor and clinically inconsequential. There is inadequate evidence to support its use in the treatment of low back pain, cancer pain, and neuropathic pain.

The first paracetamol was manufactured in 1877 or maybe 1852. In both the United States and Europe, it is the most widely prescribed pain and fever drug. It is listed as an essential medicine by the World Health Organization. Paracetamol is a generic drug that goes by the brand names Tylenol and Panadol, among others. With almost 27 million prescriptions written in 2018, it was the sixteenth most widely prescribed drug in the United States.

Paracetamol (acetaminophen) is one of the most often prescribed pain relievers and fever reducers. When used according to the directions, it is regarded extremely safe. However, there is mounting evidence that paracetamol is occasionally misused or utilized for purposes other than those intended (i.e. used for non-medical reasons). This study emphasizes the need for more pharmacovigilance and surveillance of non-medical paracetamol use, as well as increased public

knowledge of the risks, particularly in higher-than-recommended dosages.

Paracetamol has similar tolerability to ibuprofen in the short term, with nausea and stomach discomfort being the most prevalent adverse effects. The use of paracetamol on a regular basis might cause a decline in hemoglobin levels, which can indicate gastrointestinal bleeding and abnormal liver function tests. There is a continuous link between taking a larger dose of paracetamol and increased mortality, as well as cardiovascular (stroke, myocardial infarction), gastrointestinal (ulcers, bleeding), and renal side effects. The medication may potentially raise the risk of hypertension.

In the children of women who used paracetamol often during pregnancy, an increased frequency of asthma and developmental and reproductive abnormalities has been documented, albeit it is uncertain if paracetamol is the underlying reason of this rise. The evidence for a link between paracetamol and autistic spectrum disorder and attention deficit hyperactivity disorder during pregnancy is moderate, leading requests to limit its usage in pregnancy to the lowest effective dose for the shortest period feasible hypertension.

A maximum daily intake of three to four grammes is suggested for adults. Toxic effects, including liver failure, may occur at higher dosages. In the United States, the United Kingdom, Australia, and New Zealand, paracetamol poisoning is the leading cause of acute liver failure, accounting for the majority of drug overdoses.

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