



Bonus Monographs



Trihexyphenidyl hydrochloride

(try-hex-ee-FEN-i-h-dill)

PREGNANCY CATEGORY: C CLASSIFICATION(S):

Antiparkinson drug
Rx: Artane, Artane Sequels, Trihexy-2 and -5
★Rx: Apo-Trihex

SEE ALSO **CHOLINERGIC BLOCKING AGENTS AND ANTIPARKINSON DRUGS.**

ACTION/KINETICS

Synthetic anticholinergic, which relieves rigidity but has little effect on tremors. Causes a direct antispasmodic effect on smooth muscle. High incidence of side effects. Small doses cause CNS depression, whereas larger doses may result in CNS excitation.

Onset, PO: 60 min. **Duration, PO:** 6–12 hr.

USES

(1) Adjunct in the treatment of all types of parkinsonism (arteriosclerotic, idiopathic, drug- or chemical-induced, postencephalitic). As an adjunct to levodopa/carbidopa. (2) Drug-induced extrapyramidal symptoms. Sustained-release medication is for maintenance dosage only.

ADDITIONAL CONTRAINDICATIONS

Arteriosclerosis and hypersensitivity to drug.

ADDITIONAL SIDE EFFECTS

Serious CNS stimulation (restlessness, insomnia, delirium, agitation) and psychotic manifestations.

ADDITIONAL DRUG INTERACTIONS

↑ Effectiveness with levodopa; do not use together for psychoses.

HOW SUPPLIED

Capsules, sustained-release: 5 mg; *Elixir:* 2 mg/5 mL; *Tablet:* 2 mg, 5 mg

DOSAGE

• ELIXIR, SUSTAINED-RELEASE CAPSULES, TABLETS

Parkinsonism.

Initial (day 1): 1–2 mg; **then,** increase by 2 mg q 3–5 days until daily dose is 6–10 mg given in divided doses. Some clients may require 12–15 mg/day (especially those with postencephalitic parkinsonism).

Adjunct with levodopa.

Adults: 3–6 mg/day in divided doses. *Drug-induced extrapyramidal reactions.*

Initial: 1 mg/day; **then,** increase as needed to total daily dose of 5–15 mg.

NURSING CONSIDERATIONS

SEE ALSO **NURSING CONSIDERATIONS FOR CHOLINERGIC BLOCKING AGENTS AND ANTIPARKINSON DRUGS.**

ASSESSMENT

Assess for and note extent of involuntary movements, drooling, pill rolling, and muscle spasms/rigidity. Note mental status.

CLIENT/FAMILY TEACHING

1. Take with or after meals to minimize GI upset.
2. May cause dizziness or drowsiness and low BP effects.
3. Increase fluids and bulk in diet to prevent constipation.
4. May impair perspiration; avoid overheating and hot weather exposures. Report urinary retention.

2 TRIHEXYPHENIDYL HYDROCHLORIDE

5. This drug has a high incidence of side effects; report as early detection and intervention are imperative.

6. Report any evidence of extrapyramidal symptoms (muscle twitching/spasms, tremor) or increase in restlessness, insomnia, agitation, or

mental disturbances; dosage may need adjusting.

OUTCOMES/EVALUATE

- Control of S&S of parkinsonism
- Prevention of drug-induced extrapyramidal symptoms