Hepatitis C: Taking Off My White Coat

March 22, 2013 By Lucinda K. Porter RN

In my last blog post, I mentioned that my physician prescribed hydroxyzine (Atarax) for my rash. Reluctantly, I took it, and complained about feeling drowsy. A few days later, I became a huge believer in hydroxyzine. My rash is much better and I feel better. I seem to be tolerating the antihistamine, and it is helping me to sleep. Rash and insomnia are now fixed.

I stopped getting any headaches, and don't know if this is due to sleeping better, the antihistamine, or coincidence. What I do know is that once I stopped being a nurse, and let my physician be the doctor, life got better. For the rest of this study, I need to leave the white coat off.

I was managing the headaches with acetaminophen (Tylenol). Patients are confused when I tell them I take acetaminophen, since so many are told not to take this drug. We hear in the news how acetaminophen is harmful to the liver. Let's examine some facts:

- In a study published in the British Journal of Clinical Pharmacology (Feb 2011), a team of Scottish researchers gathered data from 1992 through 2008. They noted that 75% of liver injuries from paracetamol were suicide attempts; 17% were unintentional overdose; 8% the cause could not be accurately determined.
- Similar results were reported in a Canadian study published in August 2008 issue of Clinical Gastroenterology and Hepatology. Over a ten-year period, the majority of acetaminophen-induced liver injuries were for intentional overdose. Of the remaining cases, unintentional overdose and alcoholic liver disease were found to be present.
- Research performed in the U.S. shows that about 2/3 of acetaminophen-induced liver injuries were for intentional overdose; nearly all the remaining cases were for unintentional overdose. There were a handful of cases of people who have had liver injuries despite taking less than 4000 mg a day. There appears to be no explanation for this.

It all comes down to taking acetaminophen safely. How?

- Talk to your doctor or nurse about the right dose for you. Most agree that 3000 mg a day is safe. However, that 3000 mg is divided over 24 hours and not taken at once. A single dose is usually 650 mg or 1000 mg, but some people can take less with good results.
- Be sure that your total acetaminophen dose includes ALL sources of this drug. Acetaminophen is added to over 600 other medications, including pain meds, sleep meds, cold meds, cough meds, sinus meds, etc. Sometimes acetaminophen is listed as APAP.
- Don’t drink alcohol when taking any medication (no alcohol is advised for those with hepatitis C).
- Aim for the lowest dose. If one pill reduces your fever, then why take more?
- Don’t jump from the frying pan into the fire by switching to ibuprofen or others known as non-steroidal anti-inflammatory drugs (NSAIDs). Acetaminophen accounts for 500 deaths a year in the U.S.; the annual deaths for NSAIDs is 16,500.

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