

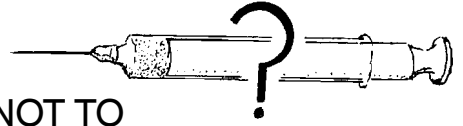
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# INSTRUCTIONS AND PRECAUTIONS FOR INJECTIONS

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CHAPTER

## 9



## WHEN TO INJECT AND WHEN NOT TO

Injections are not needed often. Most sicknesses that require medical treatment can be treated as well or better with medicines taken by mouth. Each year, millions of people — especially children — become ill, disabled, or die as a result of unnecessary injections. Combating misuse and overuse of medicines is as important to good health as vaccination, clean water, or the correct use of latrines. As a general rule:

**It is more dangerous to inject medicine  
than to take it by mouth.**

Injections should be used only when absolutely necessary. Except in emergencies, they should be given only by health workers or persons trained in their use.

### The only times medicines should be injected are:

1. When the recommended medicine does not come in a form that can be taken by mouth.
2. When the person vomits often, cannot swallow, or is unconscious.
3. In certain unusual emergencies and special cases (see the next page).

## WHAT TO DO WHEN THE DOCTOR PRESCRIBES INJECTIONS

Doctors and other health workers sometimes prescribe injections when they are not needed. After all, they can charge more money for injections. They forget the problems and dangers of giving injections in rural areas.

1. If a health worker or healer wants to give you an injection, be sure the medicine is *appropriate* and that she takes all the necessary precautions.
2. If a doctor prescribes injections, explain that you live where no one is well trained to give injections and ask if it would be possible to prescribe a medicine to take by mouth.
3. If a doctor wants to prescribe injections of vitamins, liver extract, or vitamin B<sub>12</sub>, but has not had your blood tested, tell him you would prefer to see another doctor.

## EMERGENCIES WHEN IT IS IMPORTANT TO GIVE INJECTIONS

In case of the following sicknesses, get medical help as fast as you can. If there will be any delay in getting help or in taking the sick person to a health center, inject the appropriate medicine as soon as possible. For details of the doses, consult the pages listed below. Before injecting, know the possible side effects and take the needed precautions (see the Green Pages).

| ↓ <b>For these sicknesses</b>  | ↓ <b>Inject these medicines</b>   |
|--|---|
| Severe pneumonia (p. 171)<br>Infections after childbirth (p. 276)<br>Gangrene (p. 213)               | penicillin in high doses (p. 352)   |
| Tetanus (p. 182)   | penicillin (p. 352)<br>and tetanus antitoxin (p. 389)   |
| Appendicitis (p. 94)<br>Peritonitis (p. 94) and bullet wound or<br>other puncture wound in the belly | ampicillin in high doses (p. 353)<br>or penicillin with<br>streptomycin (p. 354)  |
| Poisonous snakebite (p. 105)<br>Scorpion sting (in children, p. 106)                                 | antitoxins and antivenom (p. 388)   |
| Meningitis (p. 185)<br>when you do not suspect<br>tuberculosis                                       | ampicillin (p. 353 and 354)<br>or penicillin (p. 352) in very<br>high doses   |
| Meningitis (p. 185)<br>when you suspect tuberculosis   | ampicillin or penicillin together<br>with streptomycin (p. 353 and 354)<br>and, if possible, other TB<br>medicines (p. 361) |
| Vomiting (p. 161) when it<br>cannot be controlled  | antihistamines, for example,<br>promethazine (p. 386)   |
| Severe allergic reaction<br>allergic shock (p. 70)<br>and severe asthma (p. 167)                     | epinephrine ( <i>Adrenalin</i> , p. 385)<br>and, if possible, diphenhydramine<br>( <i>Benadryl</i> , p. 387).               |

The following chronic illnesses may require injections, but they are rarely emergencies. It is best to consult a health worker for treatment.

|                               |  |
|-------------------------------|--|
| Tuberculosis (p. 179 and 180) | streptomycin (p. 363) together<br>with other TB medicines (p. 361) |
| Syphilis (p. 237)             | benzathine penicillin in very high<br>doses (p. 238 and 353)       |
| Gonorrhea (p. 236)            | ceftriaxone (p. 359 and 360)<br>spectinomycin (p. 360)             |

### WHEN NOT TO INJECT:



- Never** give injections if you can get medical help quickly.
- Never** give an injection for a sickness that is not serious.
- Never** give injections for a cold or the flu.
- Never** inject a medicine that is not recommended for the illness you want to treat.
- Never** give an injection unless your needle has been boiled or sterilized.
- Never** inject a medicine unless you know and take all the recommended precautions.

## MEDICINES NOT TO INJECT

In general, it is better **never** to inject the following:

**1. Vitamins.** Rarely are injected vitamins any better than vitamins taken by mouth. Injections are more expensive and more dangerous. Use vitamin pills or syrups rather than injections. Better still, eat foods rich in vitamins (see p. 111).

**2. Liver extract, vitamin B<sub>12</sub>, and iron injections** (such as *Inferon*). Injecting these can cause abscesses or dangerous reactions (shock, p. 70). Ferrous sulfate pills will do more good for almost all cases of anemia (p. 393).

**3. Calcium.** Injected into a vein calcium is extremely dangerous, if not given **very slowly**. An injection in the buttock may cause a large **abscess**. Untrained people should never inject calcium.

**4. Penicillin.** Nearly all infections that require penicillin can be effectively treated with penicillin taken by mouth. Penicillin is more dangerous when injected. **Use injectable penicillin only for dangerous infections.**

**5. Penicillin with streptomycin.** As a general rule, avoid this combined medicine. Never use it for colds or the flu because it does not work. It can cause serious problems sometimes deafness or death. Also, overuse makes it more difficult to cure tuberculosis or other serious illness.

**6. Chloramphenicol or tetracycline.** These medicines do as much or more good when taken by mouth. Use capsules or syrups rather than injections (p. 356 and 357).

**7. Intravenous (I.V.) solutions.** These should be used only for severe dehydration and given only by someone who is well trained. When not given correctly they can cause dangerous infections or death (p. 53).

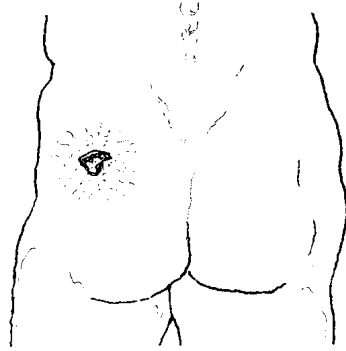
**8. Intravenous medicines.** There is so much danger in injecting any medicine in the vein that only well trained health workers should do it. However, never inject into a muscle (the buttock) medicine that says 'for intravenous use only'. Also, never inject in the vein medicine that says 'for intramuscular use only'.

## RISKS AND PRECAUTIONS

The risks of injecting any medicines are (1) infection caused by germs entering with the needle and (2) allergic or poisonous reactions caused by the medicine.

1. To lower the chance of infection when injecting, take great care that everything is completely clean. It is very important to boil the needle and syringe before injecting. After boiling, do not touch the needle with your fingers or with anything else.

**Never use the same needle and syringe to inject more than one person without boiling it again first.** Carefully follow all of the instructions for injecting (see following pages).



An abscess like this one comes from injecting with a needle that has not been well boiled and is not sterile (completely clean and germ free).

Be sure to **wash your hands well** before preparing or giving injections.

2. It is very important to know what reactions a medicine can produce and to take the recommended precautions before injecting.

If any of the following signs of allergic or poisonous reaction appear, never give the same or similar medicine again:

- *hives* (patchy swellings on skin) or a rash with itching
- swelling anywhere
- difficulty breathing
- signs of shock (see p. 70)
- dizzy spells with nausea (wanting to vomit)
- problems with vision
- ringing in the ears or deafness
- severe back pain
- difficulty urinating



Hives, or a rash with itching, can appear a few hours or up to several days after getting an injection. If the same medicine is given to the person again, it may cause a very severe reaction or even death (see p. 70).

This child was injected with a needle that was not *sterile* (boiled and completely free of germs).

The dirty needle caused an infection that produced a large, painful abscess (pocket of pus) and gave the child a fever. Finally, the abscess burst as shown in the picture below.

This child was injected for a cold. It would have been far better to give him no medicine at all. Rather than doing good, the injection caused the child suffering and harm.

**CAUTION:** If possible, always give medicine by mouth instead of by injection especially to children.



To avoid problems like these:

**Inject only when absolutely necessary.**

- ◆ Boil the syringe and needle just before giving the injection and be very careful to keep them completely clean.
- ◆ Use only the medicine recommended for the disease and be sure it is still in good condition and not spoiled.
- ◆ Inject in the correct place. Do not inject infants and small children in the buttock. Instead, inject them in the upper, outer part of the thigh. (Notice that this child was injected **too low** on the buttock, where it is possible to damage the nerve.)

## DANGEROUS REACTIONS FROM INJECTING CERTAIN MEDICINES

The following groups of medicines sometimes produce a dangerous reaction called ALLERGIC SHOCK a short time after injection:

- penicillins (including ampicillin)
  - antitoxins that are made from horse serum
- { scorpion antivenom  
 snake antivenom  
 tetanus antitoxin



The risk of a serious reaction is greater in a person who has previously been injected with one of these medicines or with another medicine of the same group. This risk is especially great if the medicine caused an allergic reaction (*hives*, rash, itching, swelling, or trouble breathing) a few hours or days after the injection was given.



Rarely, ALLERGIC SHOCK may result from the sting of a wasp or bee or from medicine taken by mouth.



### *To prevent a serious reaction from an injection:*

1. Use injections only when absolutely necessary.

2. Before injecting one of the medicines listed above, always have ready 2 ampules of epinephrine (*Adrenalin*, p. 385) and an ampule of an antihistamine like promethazine (*Phenergan*, p. 386) or diphenhydramine (*Benadryl*, p. 387).

3. Before injecting, always ask if at any other time a similar injection caused itching or other reactions. If the person says yes, do not use this medicine or any other medicine of the same group, either injected or taken by mouth.

4. In very serious cases, like tetanus or snakebite, if there is a good chance that the antitoxin might produce an allergic reaction (if the person suffers from allergies or asthma or has had horse serum before), inject promethazine or diphenhydramine 15 minutes before giving the antitoxin: adults, 25 to 50 mg.; children, 10 to 25 mg., depending on their size (see p. 387).

5. After injecting any medicine, always stay with the person for 30 minutes to watch for any of the following signs of ALLERGIC SHOCK:

- cool, moist, pale, gray skin (cold sweat)
- weak, rapid pulse or heartbeat
- difficulty breathing
- loss of consciousness

6. If these signs appear, immediately inject epinephrine (*Adrenalin*): adults, 1/2 ml.; children, 1/4 ml. Treat the person for SHOCK (see p. 77). Follow by giving an antihistamine in double the normal dose.

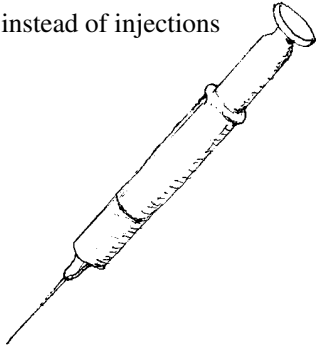
## How to Avoid Serious Reactions to a Penicillin Injection

1. For mild to moderate infections:

give penicillin pills

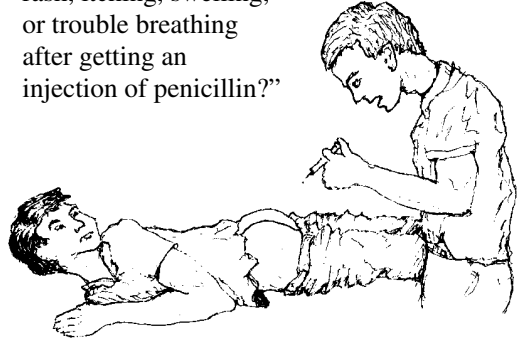


instead of injections



2. Before injecting ask the person:

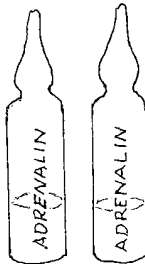
“Have you ever had a rash, itching, swelling, or trouble breathing after getting an injection of penicillin?”



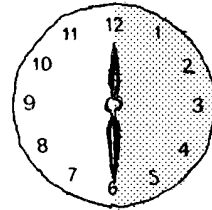
If the answer is yes, do not use penicillin, ampicillin, or amoxicillin. Use another antibiotic like erythromycin (p. 355) or a sulfonamide (p. 358).

3. Before injecting penicillin:

always have ampules  
of EPINEPHRINE  
(*Adrenalin*) ready.

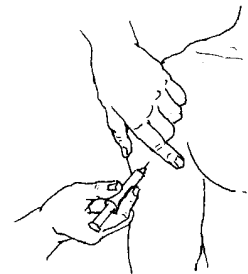


4. After injecting:



stay with the person  
for at least 30 minutes.

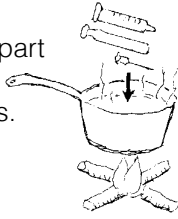
5. If the person becomes very pale, his heart beats very fast, he has difficulty breathing, or he starts to faint, immediately inject into a muscle (or just under the skin—see p. 167) half an ampule of EPINEPHRINE (*Adrenalin*, a quarter of an ampule in small children) and repeat in 10 minutes if necessary.



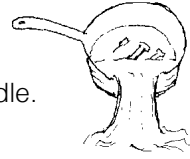
## HOW TO PREPARE A SYRINGE FOR INJECTION

Before preparing a syringe, **wash hands with soap and water.**

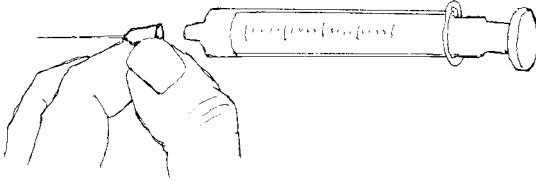
1. Take the syringe apart and boil it and the needle for 20 minutes.



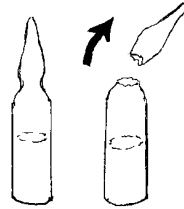
2. Pour out the boiled water without touching the syringe or the needle.



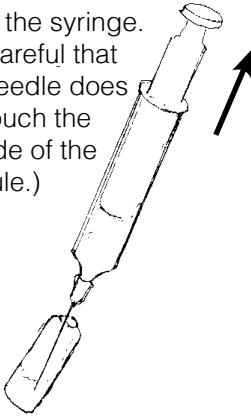
3. Put the needle and the syringe together, touching only the base of the needle and the button of the plunger.



4. Clean the ampule of distilled water well, then break off the top.



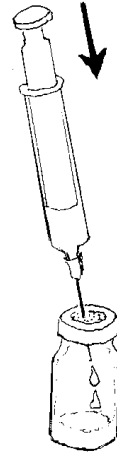
5. Fill the syringe. (Be careful that the needle does not touch the outside of the ampule.)



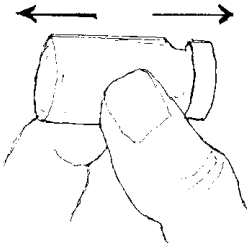
6. Rub the rubber of the bottle with clean cloth wet with alcohol or boiled water.



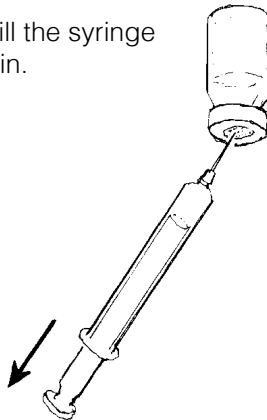
7. Inject the distilled water into the bottle with the powdered medicine.



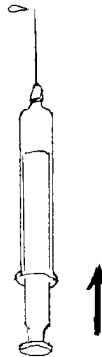
8. Shake until the medicine dissolves.



9. Fill the syringe again.



10. Remove all air from the syringe.



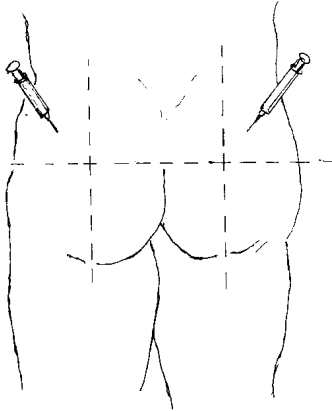
**Be very careful not to touch the needle with anything—not even the cotton with alcohol. If by chance the needle touches your finger or something else, boil it again.**



## WHERE TO GIVE AN INJECTION

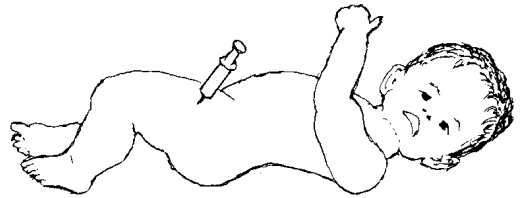
Before injecting, **wash hands with soap and water.**

It is preferable to inject in the muscle of the buttocks, always in the **upper outer** quarter.



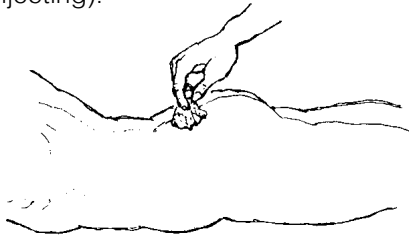
**WARNING:** Do not inject into an area of skin that is infected or has a rash.

Do not inject infants and small children in the buttock. Inject them in the **upper outer** part of the thigh.

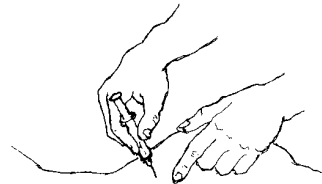


## HOW TO INJECT

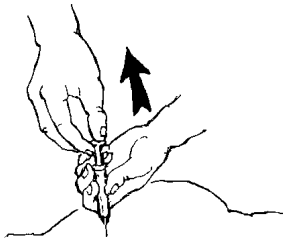
1. Clean the skin with soap and water (or alcohol—but to prevent severe pain, be sure the alcohol is dry before injecting).



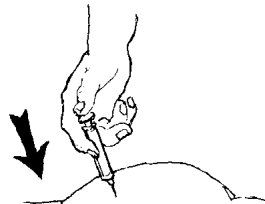
2. Put the needle straight in, all the way. (If it is done with one quick movement, it hurts less.)



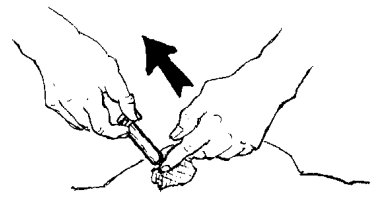
3. Before injecting, pull back on the plunger. (If blood enters the syringe, take the needle out and put it in somewhere else).



4. If no blood enters, inject the medicine slowly.



5. Remove the needle and clean the skin again.



6. After injecting, rinse the syringe and needle at once. Squirt water through the needle and then take the syringe apart and wash it. Boil before using again.

## HOW INJECTIONS CAN DISABLE CHILDREN

When used correctly, certain injected medicines, such as vaccinations, are important to protect a child's health and prevent disability. But if injections are given with needles or syringes that are not sterilized, the injections may cause a serious infection. Unclean needles and syringes can pass germs that cause HIV/AIDS or other serious diseases, such as hepatitis, from one person to another. Dirty needles and syringes can also cause infections that lead to paralysis or death. **Never inject more than 1 person with the same needle or syringe without disinfecting it first.**

Some injected medicines can cause dangerous allergic reactions, poisoning, deafness, or other harmful effects. For example, pregnant women are often given hormone injections to speed up childbirth and 'give strength'—but these injections are dangerous for the mother and can cause brain damage or death of the baby.

For more information on how injections disable children, see *Disabled Village Children*, Chapter 3.

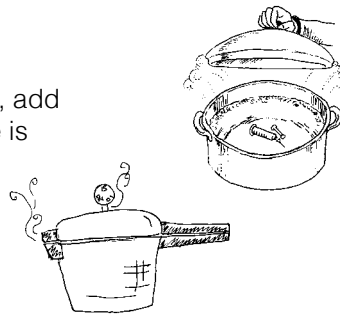
For ideas on teaching people about the danger of unnecessary injections, see *Helping Health Workers Learn*, Chapters 18, 19, and 27.

## HOW TO CLEAN (STERILIZE) EQUIPMENT

Many infectious diseases, such as HIV/AIDS (see p. 399), hepatitis (see p. 172), and tetanus (see p. 182), can be passed from a sick person to a healthy person through the use of syringes, needles, and other instruments that are not sterile (this includes the instruments used for piercing ears, acupuncture, tattoos, or circumcision). Many skin infections and abscesses also start because of this. **Any time the skin is cut or pierced, it should be done only with equipment that has been sterilized.**

Here are some ways to sterilize equipment:

- Boil for 20 minutes. (If you do not have a clock, add 1 or 2 grains of rice to the water. When the rice is cooked, the equipment will be sterile.)
- Or use pressure steaming for 20 minutes in a pressure cooker (or an autoclave).
- Or soak for 20 minutes in a solution of 1 part chlorine bleach to 7 parts water, or in a solution of 70% ethanol alcohol. If possible, prepare these solutions fresh each day, because they lose their strength. (Be sure to sterilize the inside of a syringe by pulling some solution inside and then squirting it out.)



When you are helping someone who has an infectious disease, wash your hands often with soap and water.