



## Medications: Growth Concerns

**Antibiotics** – May cause a temporary decrease in absorption (resulting from diarrhea, nausea, and/or vomiting); destroys “good” intestinal bacteria flora.

**Nutrients affected** – minerals, fats, proteins

**Prevention of interaction** – acidophilus and probiotics may counteract loss of intestinal flora (eg yogurt)

**Anticonvulsants** – may decrease nutrient absorption or nutrient stores.

**Nutrients affected** – Vit D, K, B-6, B-12, folate, and calcium.

**Prevention of interaction** – recommend diet high in these nutrients. Vitamin and mineral supplements may be appropriate; seek physician approval.

**Cardiac medications (diuretics)** – may cause loss or depletion of nutrient stores, e.g., diuretics can produce these effects; may also cause nausea, diarrhea, and vomiting and lead to reduced food intake.

**Nutrients affected** – potassium, magnesium, calcium, and folate.

**Prevention of interaction** – recommend foods and fluids high in potassium and magnesium. Suggest strategies to help with decreased appetite.

**Corticosteroids (used with asthma, chronic lung disease, gastro-intestinal disease, cardiac disease, etc.)** – long-term use can cause stunting of growth; can deplete calcium and phosphorus that can result in bone loss; can affect glucose levels. May also increase appetite, leading to weight gain.

**Nutrients affected** – calcium, phosphorus, glucose

**Prevention of interaction** – monitor weight, laboratory values. Supplement with calcium and vitamin D.

**Sulfonamides (used in spina bifida)** – promotes crystallization of large doses of vitamin C in the bladder; inhibits protein synthesis; decreases serum folate and iron.

**Nutrients affected** – vitamin C, protein, folate, and iron.

**Prevention of interaction** – avoid supplementation of vitamin C in large doses (> 1000 mg). Increase intake of high-folate foods.