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## Racecadotril A Viewpoint by Lulu C. Bravo

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Based on clinical studies in children, racecadotril, an antisecretory agent, appears to provide a much needed reduction in stool output and duration of acute diarrhoea without the potential hazards of intestinal bacterial overgrowth, interference in local bowel function and malabsorption. Currently available antidiarrhoeal and antimotility drugs have no proven value in the treatment of acute diarrhoea in children younger than 5 years of age, who have the greatest risk of dying from diarrhoea.

There is no doubt that the advent of oral rehydration therapy (ORT) has significantly reduced diarrhoea-related mortality in countries like the Philippines that have successfully implemented the use of ORT. However, ORT does not offer rapid relief of diarrhoeal symptoms, and pressures on physicians by mothers and other caregivers to prescribe a drug have led to increased use of antimicrobials

which favours the development of antibiotic resistance of bacterial pathogens.

Although racecadotril should never replace ORT, a reduced stool output will mean less oral rehydration solution requirement. It is thus expected that use of racecadotril may minimise the harmful consequences of inadequate fluid therapy which occurs due to lack of maternal knowledge and poor physician-patient communication. The main problem in using drugs for acute diarrhoea in children is the possibility of inadequate fluid replacement, when mothers and even doctors place more emphasis on drug therapy rather than on management of dehydration and nutrition.

More studies and investigations are needed to assess the efficacy and safety of racecadotril for persistent or chronic diarrhoea, in malnourished children and in particular in acute infantile diarrhoea in less developed countries. It is noteworthy that the drug also showed a reduction in stool output and duration of diarrhoea even in the presence of rotavirus. This could prove beneficial for both developed and developing countries which have varied incidence rates of viral and bacterial enteropathogens.