



[Home](#) → [Medical Encyclopedia](#) → Dimenhydrinate overdose

URL of this page: //medlineplus.gov/ency/article/002634.htm

Dimenhydrinate overdose

Dimenhydrinate is a type of medicine called an antihistamine. Dimenhydrinate overdose occurs when someone takes more than the normal or recommended amount of this medicine. This can be by accident or on purpose.

This article is for information only. DO NOT use it to treat or manage an actual overdose. If you or someone you are with has an overdose, call your local emergency number (such as 911), or your local poison control center can be reached directly by calling the national toll-free Poison Help hotline (1-800-222-1222) from anywhere in the United States.

Poisonous Ingredient

Dimenhydrinate can be harmful in large amounts.

Where Found

Dimenhydrinate is found in some allergy medicines. It is also in many medicines used to treat nausea, vomiting, and motion sickness.

It may be in medicines with these brand names:

- Dramamine
- Driminate
- Wal-Dram
- Gaviscon Nausea
- Airmit
- Gravol
- Marmine
- Nico-Vert
- Triptone

Symptoms

Below are symptoms of a dimenhydrinate overdose in different parts of the body.

BLADDER AND KIDNEYS

- Inability to urinate

EYES, EARS, NOSE, MOUTH, AND THROAT

- Blurred vision
- Dry mouth
- Enlarged pupils
- Very dry eyes
- Ringing in the ears

HEART AND BLOOD VESSELS

- Low blood pressure
- Rapid heartbeat

NERVOUS SYSTEM

- Agitation
- Confusion
- Seizures
- Delirium
- Depression
- Drowsiness
- Hallucinations (seeing or hearing things that aren't there)
- Increased sleepiness
- Nervousness
- Tremor
- Unsteadiness

SKIN

- Dry, red skin

STOMACH AND INTESTINES

- Nausea
- Vomiting

Before Calling Emergency

Have this information ready:

- Person's age, weight, and condition
- Name of the product (ingredients and strength, if known)

- Time it was swallowed
- Amount swallowed
- If the medicine was prescribed for the person

Poison Control

Your local poison control center can be reached directly by calling the national toll-free Poison Help hotline (1-800-222-1222) from anywhere in the United States. This national hotline will let you talk to experts in poisoning. They will give you further instructions.

This is a free and confidential service. All local poison control centers in the United States use this national number. You should call if you have any questions about poisoning or poison prevention. It does NOT need to be an emergency. You can call for any reason, 24 hours a day, 7 days a week.

What to Expect at the Emergency Room

Take the container to the hospital with you, if possible.

The health care provider will measure and monitor the person's vital signs, including temperature, pulse, breathing rate, and blood pressure.

Tests that may done include:

- Blood and urine tests
- Chest x-ray
- Electrocardiogram (ECG)

Treatment may include:

- Fluids through a vein (by IV)
- Medicines to treat symptoms or reverse the effects of the overdose
- Activated charcoal
- Laxative
- Breathing support, including a tube through the mouth into the lungs and connected to a breathing machine (ventilator)

Outlook (Prognosis)

Recovery is likely if the person survives the first 24 hours. Complications such as pneumonia, muscle damage from lying on a hard surface for a long period of time, or brain damage from lack of oxygen may result in permanent disability.

Few people actually die from an antihistamine overdose. However, serious heart rhythm disturbances may occur, which can cause death.

Keep all medicines in child-proof bottles and out of reach of children.

Alternative Names

Dramamine; Dimetabs

References

Aronson JK. Anticholinergic drugs. In: Aronson JK, ed. *Meyler's Side Effects of Drugs*. 16th ed. Waltham, MA: Elsevier; 2016:534-539.

Collins SR. D. Book Chapter D: Dimenhydrinate. In: Collins SR, ed. *Gahart's 2022 Intravenous Medications: A Handbook for Nurses and Health Professionals*. 38th ed. St Louis, MO: Elsevier; 2022:385-508.

Hoppe JA, Monte AA. Anticholinergics. In: Walls RM, ed. *Rosen's Emergency Medicine: Concepts and Clinical Practice*. 10th ed. Philadelphia, PA: Elsevier; 2023:chap 140.

Review Date 11/2/2023

Updated by: Jesse Borke, MD, CPE, FAAEM, FACEP, Attending Physician at Kaiser Permanente, Orange County, CA. Also reviewed by David C. Dugdale, MD, Medical Director, Brenda Conaway, Editorial Director, and the A.D.A.M. Editorial team.

Learn how to cite this page



Health Content
Provider
06/01/2028

A.D.A.M., Inc. is accredited by URAC, for Health Content Provider (www.urac.org). URAC's [accreditation program](#) is an independent audit to verify that A.D.A.M. follows rigorous standards of quality and accountability. A.D.A.M. is among the first to achieve this important distinction for online health information and services. Learn more about A.D.A.M.'s [editorial policy](#), [editorial process](#), and [privacy policy](#).

The information provided herein should not be used during any medical emergency or for the diagnosis or treatment of any medical condition. A licensed medical professional should be consulted for diagnosis and treatment of any and all medical conditions. Links to other sites are provided for information only – they do not constitute endorsements of those other sites. No warranty of any kind, either expressed or implied, is made as to the accuracy, reliability, timeliness, or correctness of any translations made by a third-party service of the information provided herein into any other language. © 1997-2025 A.D.A.M., a business unit of Ebix, Inc. Any duplication or distribution of the information contained herein is strictly prohibited.



National Library of Medicine 8600 Rockville Pike, Bethesda, MD 20894 U.S. Department of Health and Human Services

National Institutes of Health