



Pharmaceutical Compounding – Popsicle-Based Acetaminophen: A Novel Approach to Pediatric Dental Pain Management

¹Tarun Sethi, ²Tapan Singh, ³Divya Gera, ⁴Ronauk Singh, ⁵Roop Deep Kaur

¹Professor & Head, ²Associate Professor, ³Assistant Professor, ⁴Associate Professor, ⁵Private Practitioner

¹Department of Pediatric and Preventive Dentistry, Rajasthan Dental College and Hospital, Jaipur, Rajasthan

²Department of Pediatric and Preventive Dentistry, Government of India

³Department of Pediatric and Preventive Dentistry, Rajasthan Dental College and Hospital, Jaipur, Rajasthan

⁴Department of Prosthodontics, Crown and Bridge, Government of India

⁵Private Practitioner, Kannur, Kerala

Abstract: Pain management in pediatric dentistry presents unique challenges due to behavioral responses, fear of conventional drug forms, and compliance issues. Traditional oral medications such as syrups or tablets often elicit resistance due to their taste or form. Integrating compounded pharmaceutical practices with novel delivery systems such as popsicle-based acetaminophen represents an innovative and palatable solution. This article examines the scientific rationale, formulation possibilities, regulatory aspects under the Pharmacy Council of India (PCI), and global precedents that support the use of such formulations in clinical practice.

Index Terms - Pain management; acetaminophen; pharmaceutical practice

Introduction

Pediatric dentistry demands innovative approaches to pain management due to children's heightened anxiety, limited communication abilities, and physiological differences. Traditional pharmacologic strategies often involve nonsteroidal anti-inflammatory drugs (NSAIDs), acetaminophen, or local anesthetics. However, issues such as the bitter taste of medication, the fear of injections, and parental concerns over side effects contribute to poor compliance and increased dental anxiety in children. In response to these challenges, alternative drug delivery systems that improve compliance while maintaining therapeutic efficacy have been explored. Among them, the most used drug delivery vehicles are lollipops, lozenges, and gummies, which offer increased acceptability, improved bioavailability, reduced dosage, reduced intestinal absorption, and bypass of primary metabolism¹.

It is believed that poor compliance with medication by pediatric patients is still incipiently addressed in national and international literature. Hence, it is proposed to establish pharmaceutical compounding to cater to bespoke patient medication.

Scientific Rationale

Administering medications to children involves addressing several behavioral and physiological hurdles. Pediatric patients frequently reject traditional oral forms due to their unpleasant taste or fear of the medication itself. Popsicle-based drug delivery offers a child-friendly format that enhances palatability and acceptance². Additionally, the cryo-therapeutic effect of a frozen popsicle provides a local analgesic effect, especially beneficial following dental procedures³. This combination of systemic drug action with local soothing contributes to enhanced pain relief. Importantly, oral mucosal drug delivery allows bypassing of hepatic first-pass metabolism, improving the bioavailability of acetaminophen⁴. Lower doses can thus achieve effective plasma concentrations, reducing the risk of toxicity and side effects. Controlled and localized delivery further enables precision in dosing, which is crucial in pediatric care.

Formulation Possibilities

The development of medicated popsicles requires careful consideration of excipients and formulation integrity. Acceptable base ingredients include sugar alternatives like xylitol and sorbitol, which are not only tooth-friendly but also contribute to taste masking⁵. Stabilizers and natural flavoring agents ensure texture and palatability. Maintaining drug potency during the freezing process is critical. Acetaminophen's stability at low temperatures must be tested along with evaluations of weight variation, friability, dissolution, and disintegration characteristics⁶. Precise dosing must be ensured, considering that popsicles may vary in size or consistency. Palatability trials and pediatric acceptability studies are essential to ensure adherence. Moreover, formulations must be free from allergens and irritants, especially considering flavoring agents and colorants⁷.

Regulatory Aspects (Pharmacy Council of India)

In India, pharmaceutical compounding is governed by the Pharmacy Act, 1948, and the Drugs and Cosmetics Act, 1940⁸. However, there is currently no dedicated regulatory pathway for edible compounded formulations like medicated popsicles. The Pharmacy Council of India (PCI) has issued professional practice guidelines, but standardized protocols for food-based pharmaceuticals remain undefined. Compounding in hospitals is largely extemporaneous and varies by institution. Introduction of food-based drug forms will require inclusion under Schedule M and relevant advisories⁹. Pharmacists will need specialized training in food-safe pharmaceutical practices, with rigorous quality assurance and documentation. Additionally, any pediatric compounding effort must comply with ICMR ethical guidelines for clinical use and trials in children¹⁰. Until formal recognition of such compounded forms is granted, their use will likely be limited to controlled hospital-based settings.

Global Precedents

Internationally, popsicle-based medications have seen limited but promising applications. In the U.S., Bayview Pharmacy offers patient-specific acetaminophen popsicles containing 80 mg of the drug per unit¹¹. These are prepared under strict compounding standards like USP <795> for non-sterile preparations. Other countries have explored similar methods with lidocaine, menthol, and NSAIDs for both pediatric and geriatric patients. Clinical trials have shown benefits such as rapid pain relief and improved hydration, particularly in postoperative settings¹². Regulatory bodies like the U.S. FDA and European Medicines Agency (EMA) require detailed evidence on stability, bioavailability, and patient outcomes before approval¹³. These global precedents can inform the development of Indian regulatory standards and support future integration into clinical practice.

Clinical Applications in Pediatric Dentistry

Pain scenarios in pediatric dental settings where compounded acetaminophen popsicles may be applicable include:

1. Post-extraction pain in primary dentition
2. Soft tissue trauma from accidental bites
3. Pain from aphthous ulcers or herpetic stomatitis
4. Orthodontic appliance-related soreness
5. Post-pulp therapy discomfort

Challenges and Limitations in the Indian Context

Despite its promise, the introduction of compounded popsicle-based analgesics in India faces multiple hurdles:

1. Lack of a formal regulatory framework for edible compounded drugs
2. Need for pharmacist and clinician training in compounding methodologies
3. Cold chain logistics and infrastructure for storage and distribution
4. Allergen risk from dairy and flavoring agents
5. Dosing accuracy and stability over shelf life

Conclusion

The evolution of drug delivery systems in pediatric dentistry is driven by the dual necessity of ensuring therapeutic efficacy and improving patient compliance. Medicated popsicles, particularly those compounded with acetaminophen, represent a promising innovation in this regard, offering the benefits of localized action, cryotherapy, and avoidance of hepatic first-pass metabolism. While such formulations are currently available only in select international settings like Bayview Pharmacy in the U.S., their potential in addressing pain management challenges in pediatric patients is noteworthy. However, the lack of clinical data, peer-reviewed studies, and standardized regulatory guidelines limits their widespread adoption. Rigorous pharmacological evaluations—including dissolution, disintegration, and stability studies—are essential to validate the safety and effectiveness of these novel preparations.

As an adjunctive option, acetaminophen popsicles may offer immediate post-operative relief, but they should be integrated thoughtfully into broader analgesic regimens to optimize pediatric dental care. Moving forward, a greater focus on pharmaceutical compounding and tailored dosage forms could significantly enhance the quality and accessibility of pediatric pain management in dentistry.

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