

Title: Oral pediatric medicines: factors affecting children acceptability

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Abstract:

Background Pediatric medications come in several oral formulations and, for a long time, oral liquid dosage forms have been considered the best choice for children because of their simplicity of administration. However, their bad taste is often cited as a primary problem for non-adherence to therapy, for example, in preventing dehydration in children with gastroenteritis. **Purpose** To review the determinant factors in the overall acceptability of oral pharmaceutical forms by children and strategies to improve them. **Methods** A literature review was performed, in March of 2017, through research and analysis of articles (from January/2010 to February/2017) indexed by PubMed database, intersecting the terms "bad taste drugs" and "children". **Results** Three articles were retrieved representing a total of 440 children. Children show a distinct preference for tablets and syrups rather than suspension and powder. Children with homozygous PP and heterozygous AP TAS2R38 genotypes are more sensitive to bitter taste and more likely to take medication in a solid formulation. When liquid formulations are required, kids show a preference for flavours they already know such as "coke" (87,9%) and strawberry (62,1%). **Conclusion** In order to improve adherence to therapy, children should be asked, whenever possible, about their preferred flavours, since individual differences in taste responses to medicines highlight the need to consider their genetic variation. The pharmaceutical form should also be considered, because the acceptance depends on the ability of children to swallow.