

HYDROXYZINE PAMOATE (VISTARIL)

A Reference Guide on Use and Effects in a Medication-Naïve 16-Year-Old

Prepared September 13, 2026

Important — Read First

This document is a general educational reference compiled from FDA prescribing information and standard clinical drug references. It is not medical advice and does not replace an individualized evaluation by the prescribing physician or pharmacist. Because this teen has never taken any medication before, the prescriber should be told this explicitly — first-time drug exposure calls for closer observation of both the intended effect and any unexpected reaction, and dosing must be individualized by the prescriber based on weight, indication, and health history.

1. What Vistaril Is

Vistaril is the brand name for hydroxyzine pamoate, an antihistamine (H1 blocker) with additional sedating, anti-anxiety, and anti-nausea properties. It is chemically unrelated to benzodiazepines, opioids, or the phenothiazine class of antipsychotics, and it is not considered habit-forming or a controlled substance.

A closely related salt, hydroxyzine hydrochloride (brand name Atarax), is pharmacologically similar; pamoate and hydrochloride forms are dosed somewhat differently, so prescriptions specify which salt is intended.

Common Reasons It's Prescribed

- Short-term treatment of anxiety and tension
- Relief of itching (pruritus) from allergic skin conditions or hives
- Sedation before and after general anesthesia or minor procedures
- Nausea and vomiting in certain situations

2. How It Works

Hydroxyzine primarily blocks histamine H1 receptors, which produces its antihistamine and sedative effects. It also has mild anticholinergic and antiserotonergic activity, contributing to its calming and anti-itch effects. Clinical effects typically begin within 15 to 30 minutes of an oral dose and its sedating effects generally last several hours.

3. Dosing Considerations for a Pediatric/Adolescent Patient

Only the prescribing clinician should set the actual dose, timing, and duration for this specific teen. The figures below reflect standard published reference ranges so you can follow along with, and ask informed questions about, the prescriber's plan — they are not a substitute for the prescription itself.

Age Group	Typical Reference Range	Notes
6 years and older	50–100 mg per day, total, split into smaller doses through the day	Pediatric dosing is often weight-based (commonly cited around 0.5 mg/kg per dose) rather than a flat adult dose

Adults (18+)	50–100 mg by mouth, up to 4 times daily	Included here only for comparison — not the dose range typically used at 16
First-time / medication-naïve	Prescribers often start at the low end of the range	Allows the child's individual sensitivity to be assessed before any increase

Because this teen has no prior medication history at all, it's reasonable to expect the prescriber to start conservatively and observe response before adjusting. Flag the "no prior medications" history clearly at the appointment, since it affects both dosing caution and how you interpret any new symptom that appears afterward.

4. Expected and Common Effects

Most adolescents tolerate hydroxyzine pamoate well. The most frequently reported effects are:

- Drowsiness or sedation — the most common effect, especially with the first several doses; often lessens after a few days on a steady dose
- Dry mouth
- Dizziness or mild grogginess, particularly if the teen stands up quickly
- Mild headache
- Reduced coordination or slowed reaction time

Because sedation is common and can be more noticeable in someone who has never taken any sedating medication before, avoid scheduling driving, sports practice, or anything requiring sharp attention shortly after a new or increased dose until you know how it affects this particular teen.

5. Less Common but Important Effects to Watch For

Category	What to Watch For
Cardiac	Fast, irregular, or skipping heartbeat; fainting. Hydroxyzine can affect the heart's QT interval, so any of these symptoms warrants prompt medical contact
Skin	A rash with small blisters, especially on the face or in skin folds, sometimes with fever — this is rare but requires stopping the medication and contacting the prescriber right away
Neurological	Tremor or involuntary movements — uncommon and usually associated with doses well above what's typically prescribed
Allergic reaction	Hives, facial or throat swelling, difficulty breathing — treat as an emergency
Paradoxical reaction	Occasionally, children/teens experience unusual agitation, excitability, or restlessness instead of sedation, especially with first exposure

When to Seek Emergency Care

Call 911 or go to the nearest emergency department for: fainting, chest pain, a racing or irregular heartbeat, difficulty breathing, facial/throat swelling, or a blistering skin rash with fever.

6. Precautions Specific to a First-Time Medication User

- Give the very first dose at home, at a time when the teen can be observed for a few hours rather than right before school, driving, or an activity.
- Keep a simple log of the dose, time given, and any effects noticed for the first week — this is genuinely useful information for the prescriber at follow-up.
- Confirm with the prescriber or pharmacist whether the teen is taking anything else at all, including over-the-counter allergy medicine, melatonin, or supplements, since combining sedating substances increases drowsiness risk.
- Avoid alcohol entirely; even a small amount can significantly increase sedation.
- Do not use leftover or shared hydroxyzine from another prescription — the pamoate and hydrochloride forms are dosed differently, and a prescription written for one person accounts for that person's specific situation.

7. Interactions to Flag for the Prescriber

Hydroxyzine's sedating effect is additive with other central-nervous-system depressants. Make sure the prescriber and pharmacist know about any of the following before the first dose:

- Other antihistamines (including over-the-counter allergy or sleep aids)
- Prescription sedatives, sleep medication, or anti-anxiety medication
- Opioid pain medication
- Muscle relaxers
- Antidepressants or antipsychotics, particularly ones that also affect heart rhythm (QT interval)
- Any other medication known to affect heart rhythm

8. Contraindications and Situations Requiring Extra Caution

- Known allergy to hydroxyzine, cetirizine, or levocetirizine
- A personal or family history of prolonged QT interval or other significant heart rhythm problems
- Pregnancy — relevant to discuss confidentially with a physician for any adolescent patient of childbearing potential

9. Discontinuation

Hydroxyzine pamoate is not associated with a well-defined withdrawal syndrome, and for most people stopping it after short-term use is straightforward. If it has been used consistently for several weeks or longer, ask the prescriber whether a gradual taper is preferred rather than stopping abruptly.

10. Questions Worth Asking the Prescriber

- What dose and schedule are you starting at, and why that starting point for a first-time medication user?
- How will we know if it's working, and what would tell us the dose needs to change?

- How long is this expected to be used?
- What specific symptoms should prompt a call to your office versus the emergency room?
- Are there any activities (sports, driving, school exams) we should plan around for the first week?

Sources

FDA-approved Vistaril (hydroxyzine pamoate) prescribing information (accessdata.fda.gov); GoodRx and WebMD consumer drug references; Medscape drug interaction reference. This summary reflects publicly available labeling and reference information current as of the preparation date above; always defer to the specific prescription and the prescriber's most current guidance.