Therapeutic Review

Tartrazine: a potentially hazardous dye in Canadian drugs

MARY E. MACCARA,* PHARM D

The literature was reviewed to determine the incidence of idiosyncratic reactions to tartrazine. From 4% to 14% of individuals with asthma or allergies or both and from 7% to 20% of persons who are sensitive to acetylsalicylic acid may react to this dye. The mechanism of such reactions is unknown. Pharmaceutical manufacturers and distributors were surveyed and a list was prepared of approximately 450 Canadian pharmaceuticals that contain tartrazine. The 53 pharmaceutical manufacturers and distributors whose drug products do not contain this dye were also listed. It is recommended that information concerning the tartrazine content of drugs be included on package labels.

On a fait une revue de la littérature afin de déterminer la fréquence des réactions idiosyncrasiques à la tartrazine. De 4% à 14% des individus souffrant d'asthme ou d'allergie, ou les deux, et de 7% à 20% des personnes sensibles à l'acide acétylsalicylique peuvent réagir à ce colorant. Le mécanisme de ces réactions est inconnu. Une enquête a été menée chez les fabricants et distributeurs de produits pharmaceutiques à partir de laquelle on a dressé une liste d'environ 450 préparations pharmaceutiques canadiennes contenant de la tartrazine. On a également fait une liste de 53 fabricants ou distributeurs de produits pharmaceutiques dont les médicaments ne contiennent pas de tartrazine. On recommande que de l'information relative à la teneur en tartrazine des médicaments fasse partie de l'étiquette apposée sur le contenant.

Dyes are an important ingredient in the processing of foods and in the manufacture of drugs and cosmetics. They are widely used, and consumers tend to expect and accept their presence. Yet several dyes, particularly those derived from coal tar and those that have an aniline or azo structure, have been reported to cause allergic reactions. Dyes such as tartrazine, amaranth, sunset yellow, FD&C (Food, Drug and Cosmetic [Act] — USA) no. 6 and new coccine have all been implicated in hypersensitivity reactions. However, the association of such reactions with tartrazine has received the most publicity.

Tartrazine (FD&C no. 5, Colour Index [CI] food yellow 4)

Reprint requests to: Dr. Mary E. MacCara, College of pharmacy, Dalhousie University, Halifax, NS B3H 3J5

is a monazo dye derived from coal tar.⁶ It exists as a bright yellow-orange powder that is freely soluble in water. It becomes redder in the presence of sodium hydroxide,⁷ and if it is mixed with blue a lime-green colour results. At least 60 countries have approved this dye, and it is one of the nine colours permitted for use in food in Canada.⁶

Many processed foods contain the dye, including some dairy products, juices, pickles, candies and cake mixes, as do most home food-colouring kits.6 Cosmetics and toiletries, such as shampoos, after-shave lotions, colognes, toothpastes and soaps, may all contain tartrazine. Pharmaceutical manufacturers use this dye in many types of drug products. Tablets and capsules may contain tartrazine in coatings, shells and excipient materials.8 Other dosage forms in which tartrazine may be found include liquids for ingestion, lozenges, ointments and douches. The amount of tartrazine found per dosage unit is usually very small — probably within the range of 0.001 to 2.5 mg (written communication from Canadian pharmaceutical manufacturers, 1981). Idiosyncratic reactions have been reported to occur following the ingestion of drug products containing such small amounts.²⁴ As well, a tartrazine-containing enema was reported to have caused an anaphylactoid reaction.5 There have been no reports in the literature of allergic reactions occurring because of the topical application of drug products containing tartrazine.

Several family physicians in active practice had commented to me that they have not encountered a patient in whom they had recognized a sensitivity to tartrazine. Partly in response to these comments I reviewed the literature to determine the incidence and mechanism of reactions to this dye and the characteristics of patients at greatest risk of such reactions.

Canadian pharmaceutical manufacturers are not required to indicate the dye content of their drug products on the package labels. Manufacturers were surveyed for this information, and from data they supplied two lists were compiled. One is a list of the pharmaceutical manufacturers and distributors whose Canadian products do not contain tartrazine (Table I). The other is a list of drug products manufactured or distributed, or both, in Canada that contain tartrazine and are intended for oral use (Table II).

Literature review

Idiosyncratic reactions to tartrazine

The first report of a reaction secondary to the ingestion of medication containing tartrazine appeared in 1959. Lockey² reported on three patients who reacted to tartrazine present in three different corticosteroid products. Since then more than 25 cases of tartrazine sensitivity have been reported.⁹ The reactions, which occur most commonly in patients with acetylsalicylic acid (ASA) sensitivity, may vary from mild to severe. Patients with this sensitivity have been described as presenting with the following: severe pruritus with generalized

^{*}Assistant professor, college of pharmacy and lecturer, department of family medicine, faculty of medicine, Dalhousie University, Halifax

urticaria, ^{2,4,5,10,11} edema of the lips, tongue or uvula, ^{2,4} wheezing and asthmatic attacks, ^{4,10,12} periorbital swelling, ^{2,10} blurred vision, ^{4,11} conjunctival irritation, ¹⁰ increased nasopharyngeal secretions, ¹¹ a feeling of warmth and suffocation, ¹¹ palpitations, ¹¹ anaphylaxis, ^{5,12} severe headache, ² vomiting, ² and tingling of the mouth and tongue. ^{2,4} There have been three reports of a reaction occurring in a patient not sensitive to ASA, ^{5,13,14} Two of these patients presented with systemic anaphylaxis. ^{5,13}

The prevalence of tartrazine sensitivity is not known, but it has been suggested to be 1 in 10 000.8 Several researchers have attempted to predict the incidence of tartrazine sensitivity in asthmatic or allergic individuals. Settipane and associates conducted a double-blind, crossover challenge test using 0.22 mg of tartrazine and placebo in a group of patients with at least a 2-month history of chronic urticaria. Of the 22 patients tested, 3 (14%) had an exacerbation of urticaria within 3 hours of the tartrazine challenge. Farr and colleagues reported that 11 (4%) of 277 asthmatic individuals challenged with 1 to 50 mg of tartrazine had a 20% or greater reduction in forced expiratory volume within 4 hours of ingestion.

In a single-blind study of 122 patients (97 with allergic disorders, 25 without), 32 (26%) had an allergic reaction to 50 mg of tartrazine within 15 minutes; the 32 who reacted were all described as having "allergic disorders", whereas none of the "nonallergic" patients reacted. Although the dose of tartrazine used in this study was several times greater than the amount of tartrazine usually found in medications, a lower dose (10 mg) produced the same response in the four patients who were rechallenged.

From these reports it appears that the incidence of tartrazine idiosyncratic reactions in allergic and asthmatic individuals ranges from 4% to 14% and may be as high as 26%

Cross-reactivity with ASA

A cross-reaction between ASA and tartrazine was first reported in 1967 by Samter and Beers. ¹⁷ In their double-blind study, which was reported in summary form only, cross-reactivity occurred in 7.5% of patients known to be allergic to ASA who were given a 25-mg dose of tartrazine. Delaney, ¹⁸ in a single-blind study in which 35 patients with a history of asthma and ASA idiosyncratic reactions were given 25 mg of

tartrazine and placebo, observed cross-reactivity in a similar percentage (7%). Settipane and associates¹⁵ reported a double-blind study in which they administered 0.22 mg of tartrazine and placebo to 10 patients with ASA intolerance; 2 (20%) reacted to the tartrazine.

In a carefully designed project Settipane and Pudupak-kam¹⁹ used a double-blind crossover method to study known ASA reactors and matched nonreactors. All subjects were challenged with 0.22 or 0.44 mg of tartrazine and placebo. Of the 40 ASA reactors 6 (15%) reacted adversely to tartrazine but not to the placebo. The subjects reacted to tartrazine in the way that they did to ASA; that is, those who reacted to ASA with generalized itch and urticaria had similar symptoms after taking tartrazine, while those in whom ASA caused bronchospasm had a similar reaction to tartrazine. None of the controls reacted to tartrazine.

These studies indicate that the incidence of cross-reactivity to ASA and tartrazine ranges from 7% to 20%.

In contrast, Speer and coworkers²⁰ recently reported on a 17-year prospective study of the clinical characteristics of patients with a history of allergic reactions to ASA. Only 4 (2%) of their 205 ASA-allergic patients also reacted to tartrazine. Therefore, they were unable to confirm that tartrazine cross-reacts with ASA.

Mechanism of idiosyncratic reactions to tartrazine

The mechanism of idiosyncratic reactions to tartrazine is not known. Because of possible cross-reactivity between ASA and tartrazine it has been suggested that these substances cause reactions by the same mechanism. Recent suspicion that idiosyncratic reactions to ASA may be due to inhibition of prostaglandins from series E^{21} has led to research on whether tartrazine also interferes with prostaglandins, but no such effect has been observed. 22,23

Studies of the role of immunoglobulins in ASA and tartrazine intolerance have shown that IgA, IgE and IgM do not mediate the idiosyncratic reactions. 11.24 However, one investigator has reported a correlation between IgD levels in the serum and tartrazine hypersensitivity. 25

The metabolite of tartrazine, sulfanilic acid, was found not to produce idiosyncratic reactions.³ Neuman and colleagues¹¹ suggested that an excess of vasoactive material, such as bradykinin, may be associated with the reaction. Nevertheless, the actual mechanism of the tartrazine hypersensitivity reaction remains unknown.

Table I—Pharmaceutical manufacturers and distributors whose Canadian drug products do not contain tartrazine

Adrem Limited
Alcon Laboratories Ltd.
Allergan Inc.
Alza Pharmaceuticals
Austin Laboratories (Canada) Ltd.
Ayerst Laboratories
Baxter Travenol Laboratories of Canada Ltd.
Brioschi Inc.
Burton, Parsons
Carter Products
A.W. Chase
Commerce Drug (Canada), Inc.
Cress Laboratories Ltd.
Cutter Ltd.
Daillac Limitée

Johnson & Johnson Inc. K-Line Pharmaceuticals Ltd. Kremers-Urban (Canada) Lewis-Howe Company* Eli Lilly & Company (Canada) Limited† Mallinckrodt Canada Inc. **Maltby Brothers Limited** Marion Laboratories Inc. Jeffrey Martin, Inc. Medinex Limited/Limitée The T. Milburn Company Ltd. Novopharm Limited Odan Laboratories Ltd. Owen Laboratories Person & Covey, Inc. Pfizer Canada Inc.

Halocarbon (Ontario) Ltd.

ICI Pharmaceuticals

Robinson & Webber (1978) Ltd. Roussel (Canada) Inc.‡ Schering Canada Inc.* Julius Schmid of Canada Limited Scholl (Canada) Inc. Shaklee Canada Inc. Smith & Nephew Inc. Syntex Inc. **Texcan Pharmaceuticals Limited** Therapex-Unik Inc. Trans Canada Contact Lens Ltd. Trans-Canada Dermapeutics Ltd. **Unimed Canada Incorporated** Wampole Inc.* **Westwood Pharmaceuticals** Whitehall Laboratories Limited

Pharmacia (Canada) Ltd/Ltée

*Products recently reformulated without tartrazine.

†See individual Lilly products in Table II.

Dispar Veterinary Products Ltd.

Elliott-Marion

Fx-lax ltd

‡Tartrazine recently removed from Rythmodan 100-mg capsules.

AB AB Ac Ac	ble II—Drug products manufactured or distributed in C	Canada, or both, that contain tartrazine	
AB Ac Ac Ac	RS & C tablets_Cert (Drug Trading)		
Ac Ac Ac		Cloxapen caps (ICN) ¶	Forhistal 1 mg (Ciba)
Ac Ac	3S & C tablets IDA (Drug Trading) hrocidin tabs (Lederle) (2nd, 1984)*†	Cloxilean caps 250 & 500 mg (Harris) Co-Actifed tabs (BW Inc.)	Formule Ner (Fréga) Fortamines 10 caps (Rougier)
	chromycin V caps 250 mg (Lederle) (3rd, 1986)*†	Colchicine tabs 0.6 mg (Welcker-Lyster)	Fregalex (Fréga)
	tifed-Plus Syrup (BW Inc.) tifed Syrup (BW Inc.)	Colchine tabs 0.6 mg (Drug Trading) Cold & decongestant tabs (Drug Trading)	Furoside tabs (ICN) Gel-II butterscotch (Cooper)
Ad	denex tabs (ICN)	Coldecon Plus caps (Parke-Davis)	Gel-II lemon (Cooper)
	droyd tabs 5 mg (Parke-Davis)	Combid Spansule caps (SK & F) Conjugated estrogen tabs 1.25 mg (Sands)	Geritol tabs (Williams) Geviral tabs (Lederle) (1st, 1982)†‡
	dactazide tabs (Searle) dactone tabs 25 & 100 mg (Searle)	Contac C caps (Menley & James)	Glysennid 12 mg (Anca)
Alc	domet tabs 125, 250 & 500 mg (MSD)	Cophylac drops (Hoechst)	Gravol liquid (Horner)
	ka Butazolidin tabs (Ciba) ka Tandearil tabs (Geigy)	Cophylac expectorant drops (Hoechst) Co-Pyronil caps (Lilly)‡§	Gravol tabs (Horner) Haldol tabs 5 & 10 mg (McNeil)
	kabutazone tabs (ICN)	Corax caps (ICN)	Halotestin tabs 5 mg (Upjohn)
	nitriptyline tabs 25 & 50 mg (Sands)	Cordex Forte Improved tabs (Upjohn) Cordex Improved tabs (Upjohn)	Hip-Rex tabs (Riker)
	noxican caps 250 & 500 mg (ICN) noxican susp. 250 mg (ICN)	Cough suppressant syrup (Drug Trading)	Histalon tabs (ICN) Hycodan-E syrup (Endo)
Am	npicillin caps 250 & 500 mg (Sands)	Cuprimine caps (MSD)	Hycomine syrup (Endo)
	npicin caps 250 & 500 mg (Bristol) nytal tabs 30 mg (Lilly)‡§	Cyclex tabs (MSD) Cyclospasmol tabs 200 & 400 mg (Wyeth)	HydroDIURIL tabs 100 mg (MSD)
	nytar tabs 30 mg (Lmy) + 8 nadol-C½ tabs (Dow)	Cynax (500 mg artichoke ext.) (Québeurope Import)	Hydropres-25 & -50 mg tabs (MSD)
	nafranil tabs 10 & 25 mg (Geigy)	Cystex tabs (Cooper)	Hygroton tabs 50 mg (Geigy)
	thrombin-K tabs 2 mg (Purdue Frederick) o-imipramine tabs 10, 25 & 50 mg (Apotex)	Dalmane caps 30 mg (Roche)‡§ Daltose-100 & -200 tabs (Nordic)	llosone caps (Lilly)‡§ llosone chewable (Lilly)‡§
	o-methyldopa tabs 125, 250 & 500 mg (Apotex)	Decadron tabs 0.5 & 0.75 mg (MSD)	llosone tabs (Lilly)‡§
	o-thioridazine tabs 25 mg (Apotex)	Declomycin FC tabs 150 mg (Lederle) (2nd, 1986)†‡	Imipramine HCl tabs 10, 25 & 50 mg (Drug Trading)
	resoline 10 mg (Ciba) wamox with reserpine tabs (Lederle) (2nd, 1985)*†	Declomycin FC tabs 300 mg (Lederle) (1st, 1984)†‡ Decongestant syrup (Drug Trading)	Imipramine tabs 10, 25 & 50 mg (Sands) Impril tabs 10, 25 & 50 mg (ICN)
	istocort tabs 2 mg (Lederle) (3rd, 1985)†‡	Demure cleansing deodorant douche (Vick Chem)	Intal-p caps (Fisons)**
	cofer (Desbergers)	Dequadin lozenge (lemon) (Glaxo)	lodaminol 10 (Desbergers)
	thmophylline elixir (Sabex) asol-8, -15 & -30 tabs (Horner)	Dexasone tabs 0.5 mg (ICN) Dexedrine Spansule caps 10 & 15 mg (SK & F)	lonamin caps 30 mg (Pennwalt)†† Ismelin tabs 10 mg (Ciba)
	C Dienestrol suppositories (Merrell)	Dexedrine tabs (SK & F)	Isotamine-B-300 tabs (ICN)
	C suppositories (Merrell)	Dilantin Infatabs (Parke-Davis)	Kalium Durules (Astra) ‡‡
	entyl caps 10 & 25 mg (Lilly)‡§ osulfizole tabs (ICN)	Dilantin with phenobarbital caps 30 mg (Parke-Davis) Dimedrine tabs (Robins)	KCL 20% (Rougier) Keflex caps 250 mg (Lilly)‡§
	& C caps (ICN)	Dimelor tabs (Lilly)‡§	Keflex tabs 250 & 500 mg (Lilly)‡§
	forte tabs (Frosst) llergal Spacetabs (Sandoz)	Dimetapp-DM tabs (Robins) Donnatal Extentabs (Robins)	Kérabec composé (Rougier) Kérabec simple (Rougier)
	llergal tabs (Sandoz)	Donnazyme tabs (Robins)	KI tabs (Rougier)
Ber	nzedrine tabs 5 mg (SK & F)	Dopamet tabs (ICN)	Lanoxin tabs 0.125 mg (BW Inc.)
	opaque (Winthrop) ron caps (Lilly)‡§	Dramamine tabs (Searle) Drops-Ear-analgesic (Drug Trading)	Largactil liquid 100 mg/5 ml (Rhône-Poulenc) Lasix tabs 40 & 80 mg (Hoechst)
	o-Minal (Fréga)	Dual Action cough drops cherry flavour (Vick Chem)	Lasix oral solution (Hoechst)
	osan caps 250 & 500 mg (ICN)	Ducolax tabs 5 mg (Boehringer)	Lasix Special tabs 500 mg (Hoechst)
	sacodyl tabs 5 mg (Sands) sacolax tabs 5 mg (ICN)	Dynapen oral susp. (Bristol) Earache drops (Drug Trading)	Lecithin with D caps (Swiss Herbal) Lederon caps (Lederle) (3rd, 1982)†‡§§
Bra	adosol green lozenge (Ciba)	ECT ASA tabs 650 mg (Drug Trading)	Lemon Time (hot lemon drink) (Buckley)
	adosol yellow lozenge (Ciba)	Elavil tabs 25 & 50 mg (MSD) Elixin creosote & terpin hydrate compd. (Drug Trading)	Levazine 4/25 tabs (ICN)
	oncho-Grippol-DM syrup (Charton) fergot-PB tabs (Sandoz)	Eltor liquid (Dow)	Librium caps 5 & 25 mg (Roche) ‡ § Limonade Asepta (Rodeca)
Cai	mpain elixir (Winthrop)	Eltroxin tabs 100 & 300 μg (Glaxo)	Limonade Rodeca (Rodeca)
	mpain pediatric drops (Winthrop) rbolith caps 300 mg (ICN)	Emetrol solution (Rorer) Energex Fort (Fréga)	Linodil (Winthrop) Lipoflavonoid caps (Cooper)
	rbrital caps (Parke-Davis)	Enovid tabs 10 mg (Searle)	Listerine lozenges — lemon mint flavour (Warner-
	rbrital half-strength caps (Parke-Davis)	E-Pam tabs 5 mg (ICN)	Lambert)
	rdialine caps (Fréga) scara tabs 300 mg (Drug Trading)	Ergodryl caps (Parke-Davis) Esidrix tabs 50 mg (Ciba)	Livertal (Fréga) Loestrin 1.5/30 tabs, inert tabs only (Parke-Davis)
	scara Sagrada tabs 200 mg (Parke-Davis)	Everyday multiple vitamins (Drug Trading)	Loxapac tabs 5 mg (Lederle) (2nd, 1983)*†
	fracycline tabs (Frosst)	Everyday multiple vitamins with iron (Drug Trading)	Loxapac tabs 10 mg (Lederle) (2nd, 1984)*†
	pacol anesthetic discs (Merrell) pacol mouthwash/gargle (Merrell)	ExNa tabs (Robins) Falapen tabs (Frosst)	Ludiomil 25 mg (Ciba) Maalox Plus LSC tabs (Rorer)
	pacol throat lozenge (Merrell)	Fem iron tabs (Williams)	Madribon susp. (Roche)
	S tabs (ICN)	Ferrofume (Nordic)	Madribon tabs (Roche)
	ildren's chewable vitamins (Drug Trading) loral hydrate caps 500 mg (Drug Trading)	Ferrous gluconate tabs (ICN) Ferrous gluconate tabs 300 mg (Drug Trading)	Mebroin (Winthrop) Megacillin 250 susp. (Frosst)
Chl	loralvan caps (ICN)	Ferrous sulphate tabs (ICN)	Menrium tabs 5-2 & 5-4 (Roche)
	lordiazepoxide caps 5, 10 & 25 mg (Drug Trading) lordiazepoxide caps 5, 10 & 25 mg (Sands)	Fertinic C (Desbergers) Fesofor tabs (SK & F)	Mentholatum medicated lozenge (natural flavour) (Mentholatum)
	lorpheniramine maleate tabs 4 mg (Sands)	Flintstones lemon & lime flavours (Miles) #	Mephyton tabs (MSD)
Chl	lorprom tabs (ICN)	Fluorinse 0.2% mint (Cooper)	Metandren Linguets 10 & 25 mg (Ciba)
	oloxin tabs 2 & 6 mg (Flint) ro-Mag (Rougier)	Fluotic-20 (Nordic) Folvit tabs 5 mg (Lederle) (2nd, 1985)*†	Methaqualone HCl caps 300 mg (Bio-Chem) Methidate tabs 20 mg (ICN)
	omid tabs 50 mg (Merrell)	Food or fruit colouring green (Drug Trading)	Methotrexate tabs 2.5 mg (Lederle) (2nd, 1986)*†

Stresscaps 600 (Lederle) (2nd, 1984)*† Methyldopa tabs 125, 250 & 500 mg (Drug Trading) Phenazo tabs 100 mg (ICN) Methyldopa tabs 125, 250 & 500 mg (Sands) Sulfarlem-choline tabs (Charton) Phenbuff caps (Sands) Methylergobasine-Sandoz tabs (Sandoz) Phenbutazone tabs (ICN) Sulla tabs (Robins) Phenobarbital tabs 15, 30 & 50 mg (Bio-Chem) Supres tabs 150 & 250 mg (Frosst) Mi-Cebrin tabs (Lilly)‡§ Mi-Cebrin T tabs (Lilly) \$ Phenobarbital tabs 30 & 60 mg (ICN) Survit-Plus (ICN) Symmetrel caps (Endo) Minocin caps 50 mg (Lederle) (2nd, 1982)†‡ Phenoxene 50 mg (Dow) Minocin caps 100 mg (Lederle) (1st, 1983) †‡ Phenylbutazone tabs (Sands) Synthroid tabs 0.1 & 0.3 µg (Flint) Modacon (28 day) green placebo tabs (Ortho) Tabron tabs (Parke-Davis) Plexonal Forte tabs (Sandoz) Moditen HCl tabs 2 mg (Squibb) Polyfer (Fréga) Tace caps 12, 25 & 72 mg (Merrell) Polymine No. 2 (Fréga) Tarasan tabs 15 & 50 mg (Roche) Multicebrin tabs (Lilly) \$\frac{1}{2}\$ Polymox caps 250 & 500 mg (Bristol) Multiple vitamin and mineral tabs (Drug Trading) T-Caps 250 mg (ICN) Myadec caps (Parke-Davis) \$ Polymox 125 & 250 mg/5 ml susp. (Bristol) Tegopen caps 250 mg (Bristol) Tenuate tabs 25 mg (Merrell) Mycostatin oral tabs 500 000 IU (Squibb) Ponderal Pacaps (Servier) Nadopen-V tabs (Nadeau) Potassium citrate & hyoscyamus (Drug Trading) Terfluzine concentrate 10 mg/ml (ICN) Terpo-Dionin (Winthrop) Nadozone (Nadeau) Praminil 10, 25 & 50 mg (Nordic) Tetracycline caps & tabs 250 mg (Sands) Nalfon caps 300 mg (Lilly) \$\frac{1}{2}\$ Prednisolone tabs 5 mg (Drug Trading) Nalfon tabs 600 mg (Lilly)‡§ Pro-65 caps (ICN) Tetrex caps 500 mg (Bristol) Natulan caps (Roche) \$ Pro-Biosan kit (ICN) Theolixir (ICN) Thioridazine tabs 25 & 100 mg (Drug Trading) Naturetin 2.5 & 5 mg (Squibb) Proco-65 caps (ICN) Naturetin-K 5 mg (Squibb) Program 20 tabs (Ortho) Thioridazine tabs 10, 25 & 100 mg (Sands) Prolopa caps 100-25 & 200-50 (Roche) Thioril tabs 10, 25 & 100 mg (ICN) Nervosyl (Fréga) Neuro-Trasentin (Ciba) Promaquid caps 20 mg (Rhône-Poulenc) Throat Aids (Buckley) Nikoban lozenges mint (Williams) Promazine HCl tabs 25 & 50 mg SCT (Drug Trading) Throat lozenges (Drug Trading) Nilstat oral drops (Lederle) (2nd, 1984)*† Pronestyl caps 250 & 500 mg (Squibb) Thyroid tabs 100 mg (Parke-Davis) Nitrofurantoin tabs 50 & 100 mg (Drug Trading) Torecan tabs (Sandoz) Propanthel tabs 15 mg (ICN) Nobesine-75 (Nadeau) Prosedyl tabs (Rougier) Tracinet troches (MSD) ¶ Norlestrin 1/50 tabs (Parke-Davis) Prostalgine suppositories (Nova) Trancopal (Winthrop) Norlutate tabs (Parke-Davis) Prostaphlin caps 250 & 500 mg (Bristol) Triaminic AC (Anca) Norlutan tabs (Parke-Davis) Provera tabs 5 mg (Upjohn) Trifluoperazine HCl tabs 1, 2 & 5 mg (Drug Trading) Norpramin 50 & 75 mg (Merrell) PVF suspension 150 & 300 mg (Frosst) Trifluoperazine tabs 1.18, 2.36, 5.9 & 11.8 mg Noscatuss syrup (Fisons) †† Pvr-Pam tabs (ICN) Tri-Vi-Flor chewable tabs (Mead Johnson) Novahistex liquid (Dow) Quide 10 & 25 mg (Dow) Tri-Vi-Sol chewable tabs (Mead Johnson) Novahistex tabs (Dow) Ouinine caps 200 & 300 mg (Parke-Davis) || Trulfacillin suspension 3-200 & 71/2-300 (Frosst) Novahistine liquid (Dow) Raudixin tabs 50 & 100 mg (Squibb) Nozinan tabs 5, 25 & 50 mg (Rhône-Poulenc) Rautractyl-2 (Squibb) Tualone-300 mg (ICN) Tussionex susp. (Pennwalt) Nyquil Nighttime Cold Medicine (Vick Chem) Rautractyl-4 (Squibb) Osetrilin 0.625, 1.25 & 2.5 mg (Desbergers) Revit Plus caps (ICN) Tutamate BF tabs (Frosst) Urecholine tabs 25 mg (Frosst) Oestrilin-Testo-Pheno (Desbergers) Revitonus C-1000 (Sabex) One Daily chewable tabs (ICN) Ritalin 20 mg (Ciba) Uridon tabs 50 mg (ICN) One Daily with iron tabs (ICN) Valda (Rodeca) Robimycin tabs (Robins) Valpin PB tabs (Endo) Oragrafin sodium caps 500 mg (Squibb) Rofact caps 300 mg (ICN) Orap 4 mg (McNeil) Roniacol Supraspan tabs 150 mg (Roche) Varicyl (Nadeau) VC-K Pediatric (Lilly)‡§ Orenzyme tabs (Merrell) Rouqualone (Rougier) Rovamycine caps 250 & 500 mg (Rhône-Poulenc) Velosef caps 500 mg (Squibb) Organol 39 (Fréga) Venoplant (Nordic) Orifer (Dow) Rythmodan caps 100 mg (Roussel)‡ Viamon (Nadeau) Ortho-gynol contraceptive jelly (Ortho) (2nd, 1986) †‡ Sandomigran tabs 0.5 mg (Sandoz) Vicks lemon throat drops (Vick Chem) Ortho-Novum 1/35-28 d (green placebo tabs) (Ortho) Sansert tabs (Sandoz) Seconal sodium caps 50 & 100 mg (Lilly)‡§ Victors Medicated "Vapo-lyptus" (Vick Chem) Ortho-Novum 1/50 tabs (Ortho) Vi-met syrup (Nordic) Ortho-Novum 1/50-28 d (green placebo tabs) (Ortho) Serax tabs 10 & 15 mg (Wyeth) Orudis cap 50 mg (Rhône-Poulenc) Serpasil-Esidrix 25 & 50 mg (Ciba) Vimicon syrup (Frosst) Vitamin B compound with C tabs (ICN) Oxpam tabs 10 & 15 mg (ICN) Solatene caps (Roche) Vitamin B compound with C Fortis caps (Drug Trading) P-50 liquid (Horner) Solazine tabs 1 mg (Horner) Panectyl liquid 2.5 mg/5 ml (Rhône-Poulenc) Sopalamine-3B (Nordic) Vitamin C chewable tabs 100, 250 & 500 mg (Drug Panteric tabs (Parke-Davis) Sopalamine-3B plus C (Nordic) Trading) Vitamin E caps 100, 200 & 800 IU (ICN) Sparine tabs 25 mg (Wyeth) Pardec chocolate chewable tabs (Parke-Davis) Pathibamate tabs 400 mg (Lederle) (1st, 1985)† Spec-T (orange) lozenge (Squibb) Vitathion (Servier) Pentobarbital sodium caps 100 mg (Drug Trading) Vivol 2, 5 & 10 mg tabs (Horner) Stelazine concentrate (SK & F) Stemetil caps "spans" 10 mg (Rhône-Poulenc) Percodan tabs (Endo) Vontrol tabs (SK & F) Stemetil tabs 5 & 10 mg (Rhône-Poulenc) Periactin syrup (MSD) Warfilone tabs (Frosst) Peritrate tabs 20 mg (Parke-Davis) Sterazolidin (Geigy) Zarontin caps (Parke-Davis)

Peritrate SA tabs 80 mg (Parke-Davis)

Phenaphen No. 3 & 4 caps (Robins)

Peritrate Forte (Parke-Davis)

Pertofrane (Geigy)

Stibilium 5 mg (Desbergers)

Stilboestrol tabs 1 mg (Glaxo)

Stress-Pam tabs 5 mg (Sabex)

Stresscaps (Lederle) (2nd, 1984)*†

Zaroxolyn tabs 10 mg (Pennwalt)

Z-BEC tabs (Robins)

282 tabs (Frosst)

642 tabs (Frosst)

^{*}Expected to change to tartrazine-free formula by the second quarter of 1981.

[†]Expecting to remove tartrazine product from retailers' shelves by quarter and year in parenthesis.

[‡]Present formula is without tartrazine.

[§]Product on retailers' shelves may contain tartrazine.

^{||} Capsule imprinting ink only. Currently phasing in new ink without tartrazine.

[¶]Discontinued.

[#]Flavour discontinued January 1981.

^{**}Tartrazine in coloured end of capsule only. This end is not pierced, and there is no leaching of tartrazine into capsule contents.

^{††}Some batches may contain tartrazine, depending on supplier of capsule shells.

^{##}Current batch contains tartrazine; new batches will not contain tartrazine.

^{§§}Two products are marketed — one with and the other without tartrazine.

Survey of drug manufacturers

Methods

To identify the Canadian drug products that presently contain tartrazine, a form letter was mailed in January 1981 to 253 pharmaceutical companies listed in the 1980 editions of the "Compendium of Pharmaceuticals and Specialties" (CPS) and "Canadian Self-Medication," a handbook of over-the-counter drugs. The company officials were asked to indicate which of the products they manufacture or distribute in Canada contain tartrazine. Officials of companies that apparently did not use tartrazine in any of their products were asked to verify that they did not.

Results

Most replies were received by April 1981. Of the 135 (53.4%) pharmaceutical manufacturers who responded approximately 39% indicated that none of their drug products contained tartrazine; these companies are listed in Table I. Companies who indicated that tartrazine was being completely phased out of their drug formulations and who gave dates for these changes are also included in Table I.

From the responses of the other manufacturers who indicated that one or more of their drug products intended for oral use contained tartrazine a list of approximately 450 tartrazine-containing drug products was compiled (Table II). Some of the products listed are being reformulated: a company may have removed tartrazine from a formulation, but batches currently on retailers' shelves may contain the dye. Details on expected dates of these changes are included in Table II. As with previous listings, 8,9,26,27 the information, obtained in the first quarter of 1981, will change as manufacturers continue to reformulate their products.

Discussion

Tartrazine is one of several agents included in drug formulations that may cause idiosyncratic reactions. In the general population the incidence of tartrazine sensitivity is low. Among asthmatic and allergic individuals and those sensitive to ASA the incidence of tartrazine hypersensitivity is probably less than 20%. However, although the number of individuals at risk is small, the problem remains serious, as the reaction in those who are sensitive may be anaphylactoid.

The drug products listed in Table II are of many therapeutic classes and include some that are commonly administered to asthmatic and allergic persons: theophylline preparations, antibiotics, corticosteroids, antihistamines and antihistamine—decongestant combinations. Physicians should be aware that tartrazine is contained in certain drug products so that they can avoid prescribing these products to those who are known to be tartrazine-sensitive or to those who may be at risk of such a reaction. The presence of tartrazine in some antihistamine and corticosteroid products may explain the idiosyncratic reactions that some patients have to these drugs.

Since 1980, pharmaceutical manufacturers in the United States have been required to state on the label that a product contains tartrazine.²⁸ Prescription drugs requiring a package insert must also include this information in the "Precautions" section. These labelling requirements are the most thorough method of ensuring that drug products containing tartrazine are easily recognized. Listings of drugs are useful guides, but their completeness is limited and constant revision is required.

I recommend that the Canadian government join the Food and Drug Administration (FDA) in the United States in requiring drug products intended for oral use to be labelled as to tartrazine content. Requiring manufacturers to include this information in the monographs they supply to the compilers of the CPS and "Canadian Self-Medication" would be an additional safeguard.

I thank those who assisted in the preparation of this article: Elizabeth Soy provided literary searches and Lori Simpson gave technical assistance. I also thank the pharmaceutical manufacturers who responded to the survey.

References

- JUHLIN L, MICHAËLSSON G, ZETTERSTROM O: Urticaria and asthma induced by food and drug additives in patients with aspirin hypersensitivity. J Allergy Clin Immunol 1972; 50: 92-98
- LOCKEY SD: Allergic reactions due to FD and C yellow no. 5, tartrazine, an aniline dye
 used as a coloring and identifying agent in various steroids. Ann Allergy 1959; 17:
 719-721
- 3. MICHAËLSSON G, JUHLIN L: Urticaria induced by preservatives and dye additives in food and drugs. Br J Dermatol 1973; 88: 525-532
- LOCKEY SD: Hypersensitivity to tartrazine (FD&C yellow no. 5) and other dyes and additives present in foods and pharmaceutical products. Ann Allergy 1977; 38: 206–210
- TRAUTLEIN JJ, MANN WJ: Anaphylactic shock caused by yellow dye (FD&C no. 5 and FD&C no. 6) in an enema (case report). Ann Allergy 1978; 41: 28-29
- KHERA KS, MUNRO IC: A review of the specifications and toxicity of synthetic food colours permitted in Canada. CRC Crit Rev Toxicol 1979; 6: 81-133
- WINDHOLZ M, BUDAVARI S, STROUMTSOS LY, FERTIG MN (eds): Merck Index, 9th ed, Merck, Rahway, NJ, 1976: 1175
- 8. Tartrazine: a yellow hazard. Drug Ther Bull 1980; 18: 53-55
- 9. COHON MS: Tartrazine revisited. Drug Intell Clin Pharm 1975; 9: 198-203
- MAKOL GM, PINNAS JL: Angioedema and urticaria associated with yellow dye in medications. Ariz Med 1980; 37: 79-81
- NEUMAN I, ELIAN R, NAHUM H, SHAKED P, CRETER D: The danger of "yellow dyes" (tartrazine) to allergic subjects. Clin Allergy 1978; 8: 65-68
- CHAFEE FH, SETTIPANE GA: Asthma caused by FD&C approved dyes. J Allergy 1967: 40: 65-72
- DESMOND RE, TRAUTLEIN JJ: Tartrazine (FD&C yellow 5) anaphylaxis: a case report. Ann Allergy 1981; 46: 81-82
- ZLOTLOW MJ, SETTIPANE GA: Allergic potential of food additives: a report of a case of tartrazine sensitivity without aspirin intolerance. Am J Clin Nutr 1977; 30: 1023-1025
- SETTIPANE GA, CHAFEE FH, POSTMAN IM, LEVINE MI, SAKER JH, BARRICK RH, NICHOLAS SS, SCHWARTZ HJ, HONSINGER RW, KLIEN DE: Significance of tartrazine sensitivity in chronic urticaria of unknown etiology. J Allergy Clin Immunol 1976; 57: 541-546
- FARR RS, SPECTOR SL, WANGAARD CH: Evaluation of aspirin and tartrazine idiosyncracy. J Allergy Clin Immunol 1979; 64: 667–668
- SAMTER M, BEERS RF: Concerning the nature of intolerance to aspirin. J Allergy 1967; 40: 281-293
- DELANEY JC: Response of patients with asthma and aspirin idiosyncracy to tartrazine (a dye commonly used in the food and drug industries). Practitioner 1976; 217: 285-287
- SETTIPANE GA, PUDUPAKKAM RK: Aspirin intolerance. III. Subtypes, familial occurence, and cross-reactivity with tartrazine. J Allergy Clin Immunol 1975; 56: 215-221
- 20. SPEER F, DENISON TR, BAPTIST JE: Aspirin allergy. Ann Allergy 1981; 46: 123-126
- SZCZEKLIK A, GRYGLEWSKI RJ, CZERNIAWSKA-MYSIK G: Clinical patterns of hypersensitivity to nonsteroidal anti-inflammatory drugs and their pathogenesis. J Allergy Clin Immunol 1977; 60: 276-284
- GERBER JG, PAYNE NA, OELZ O, NIES AS, OATES JA: Tartrazine and the prostaglandin system. J Allergy Clin Immunol 1979; 63: 289-294
- VARGAFTIG BB, BESSOT JC, PAULI G: Is tartrazine-induced asthma related to inhibition of prostaglandin biosynthesis? Respiration 1980; 39: 276-282
- WELTMAN JK, SZARO RP, SETTIPANE GA: An analysis of the role of IgE in intolerance to aspirin and tartrazine. Allergy 1978; 33: 273-280
- WELIKY N, HEINER DC, TAMURA H, ANDERSON S, STENIUS-AARNIALA B, GERMAN DF, HOWLEY CD, LOCKEY SD SR: Correlation of tartrazine hypersensitivity with specific serum IgD levels. *Immunol Commun* 1979; 8: 65-71
- SMITH LJ, SLAVIN RG: Drugs containing tartrazine dye. J Allergy Clin Immunol 1976; 58: 456–470
- 27. BARTLE WR: Tartrazine-containing drugs. Can Med Assoc J 1976; 115: 332-333
- 28. Yellow no. 5 tartrazine labelling on drugs to be required. FDA Drug Bull 1979; 9: 18