

Welcome to the: Orthopaedic Opinion Online Website

The website for the answer to all your Orthopaedic Questions

- **Orthopaedic Opinion Online** is a website designed to provide information to patients who have orthopaedic and musculoskeletal problems and are undergoing treatment.
- **Patient information** is provided in the form of downloadable information sheets.
- **Orthopaedic advice** and second opinions can be provided by our expert internationally renowned Consultant Orthopaedic Surgeons.
- **Online review** of patients' X rays or MRI scans can also be provided and any proposed treatment plans reviewed.
- **Book a clinical consultation** with one of our internationally renowned consultant orthopaedic surgeons in Bristol or London.
- **Orthopaedic reports** can be provided for Injury or Accident Claims and Medical Negligence claims.

This Patient Information Sheet is provided by Orthopaedic Opinion Online

Anti-inflammatory Painkillers

What are anti-inflammatory painkillers?

Anti-inflammatory agents have an effect in reducing inflammation. This is usually in association with musculo-skeletal inflammation of an arthritic joint or following an injury. Such inflammation is commonly associated with local pain, swelling, redness and stiffness. Anti-inflammatory agents have an effect to reduce these symptoms.

Types of anti-inflammatories

Although anti-inflammatory agents come in many forms types including injections. By far the two most common types of anti-inflammatory agents are cortico-steroids and the Non Steroidal Anti-inflammatory Drugs (NSAID's). Cortico-steroids are reserved for severe and resistant inflammatory conditions under careful supervision. The side effects of cortico-steroids include osteoporosis and weight gain. The most commonly encountered anti-inflammatory agents are the NSAID's. These have far fewer side effects and are widely used both on prescription and over the counter at pharmacies and supermarkets.

NSAID's

There are over twenty different types. They include: Aceclofenac, Acemetacin, Aspirin, Azapropazone, Dexketoprofen, Diclofenac, Diflunisal, Etodolac, Etoricoxib, Fenbrufen, Fenoprofen, Flurbiprofen, Ibuprofen, Indomethacin, Ketoprofen, Mefanamic acid, Meloxicam, Nabumetone, Naproxen, Piroxicam, Rofecoxib, Sulindac, Tenoxicam, Tiaprofenic acid, and Valdecoxib. Each of these drugs also come as various brand names. Simple Aspirin is a similar drug and has a mild NSAID effect similar to the other NSAIDs.

Aspirin, Ibuprofen, Brufen are available without a prescription from pharmacies and shops. The detailed instruction leaflet should be read carefully before starting treatment.

Recently Celecoxib a cox-2 type of NSAID was withdrawn from circulation following the discovery of a small potential increase in cardiovascular complications with long term use. The situation as to which NSAID's are currently licensed and available is available through your general practitioner. These drugs are only available on prescription and therefore your own doctor will be able to advise you on the specific type of drug most suitable for the individual patient.

How do anti-inflammatory painkillers work?

Anti-inflammatory agents work mainly by reducing the amount of prostaglandins that are made. Prostaglandins are chemicals which are released by cells at sites of injury. Prostaglandins are involved in causing inflammation and swelling. They also 'sensitise' nerve endings which can cause pain. Anti-inflammatory painkillers stop certain enzymes (chemicals) from working which are needed to make prostaglandins. Thus the process of inflammation is blocked which results in less local pain, swelling, redness and pain.

How effective are anti-inflammatory painkillers?

After a single dose, they work at least as well as Paracetamol to ease pain, and they may be more effective. With repeated doses, they also reduce inflammation. This may further reduce pain and stiffness which occurs with inflammatory conditions such as arthritis and muscle sprains. So, you might not notice the maximum effect for up to 1-3 weeks after starting a course of tablets.

Some general points about taking anti-inflammatory painkillers

It is often worth trying Paracetamol first before considering taking an anti-inflammatory painkiller. Paracetamol is a good painkiller, and is less likely to cause side-effects. However, it does not reduce inflammation. But, some types of muscle and joint pains have little inflammation. For example, osteoarthritis often causes little inflammation. Therefore, Paracetamol is often the preferred painkiller for this type of arthritis

Anti-inflammatory painkillers do not alter the course of painful conditions such as arthritis. They just ease symptoms of pain and stiffness. However, this may have a knock-on effect as if pain is eased, you may then be able to move and use a joint more. The inflammation and pain of various types of arthritis often 'comes and goes'. During good spells, when symptoms are not too bad, you may not need anti-inflammatory painkillers to ease pain.

The different types of anti-inflammatory painkillers have pros and cons which is why different people take different ones. For example:

- Some are better at reducing inflammation, but may be less good as straight-forward painkillers.
- Some are less likely to cause side-effects, but may not be as strong as others.
- Some need to be taken more often each day than others.

Some people find that one type works better than another for them. If one type does not work at first, then a different type may well do so. It is not unusual to try two or more brands before finding one that suits you best.

What are the possible side-effects and risks?

Most people who take anti-inflammatory painkillers have no side-effects, or only minor ones. The leaflet that comes with the tablets gives a full list of cautions and possible side-effects. One important caution is that, ideally, you should not take anti-inflammatory painkillers if you are pregnant. The following highlight some of the most important side-effects to be aware of.

Bleeding into the stomach and gut

Anti-inflammatory painkillers can sometimes cause the lining of the stomach to bleed. Sometimes a stomach ulcer develops. Sometimes bleeding is severe, and even life-threatening. Elderly people are more prone to this problem, but it can occur in anybody. Therefore, if you are taking anti-inflammatory painkillers and you develop stomach or abdominal pains, pass blood or black stools, or vomit blood, then **stop taking the tablets and see a doctor soon.**

The risk of bleeding into the stomach is increased if you are taking anti-inflammatory painkillers plus warfarin, steroids, or low-dose aspirin (used by many people to help prevent a heart attack or stroke). These combinations of medicines should only be used if absolutely necessary.

Usually, you should not take an anti-inflammatory painkiller if you have a past history of a peptic ulcer (duodenal or stomach ulcer) unless under the supervision of a doctor.

Some people need an anti-inflammatory painkiller to ease pain, and yet have stomach side-effects, or are at increased risk of stomach side-effects. In this situation, another medicine may be prescribed to protect the lining of the stomach from the effects of the anti-inflammatory painkiller. This usually prevents bleeding and ulcers from developing if you take anti-inflammatory painkillers.

Asthma

In some people with asthma, the asthma symptoms such as wheeze or breathlessness are triggered or made worse by anti-inflammatory painkillers. Seek medical help if your asthma suddenly becomes worse after taking an anti-inflammatory painkiller.

Some other side-effects which sometimes occur include:

Feeling sick, diarrhoea, rashes, headache, dizziness, nervousness, depression, drowsiness, insomnia (poor sleep), vertigo (dizziness), and tinnitus (noises in the ear). If one or more of these occur they will usually ease off if you stop taking the tablets. There are also a number of other uncommon side-effects - see the leaflet in the tablet packet for details.

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www.Ortho500.co.uk/patientinformation/triggerfinger

Editor: David P Johnson MD. St Mary's Hospital. Clifton Bristol. BS8 1JU.

Web site: www.orthopaedics.co.uk

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