



NSAIDS – NON-STEROIDAL, ANTI-INFLAMMATORY DRUGS

PARTIAL LIST OF NSAID'S

1. *Diclofenac (dye-KLOE-fen-ak)*
2. *Diflunisal (dye-FLOO-ni-sal)*
3. *Etodolac (ee-TOE-doe-lak)*
4. *Fenoprofen (fen-oh-PROE-fen)*
5. *Floctafenine (flok-ta-FEN-een)*
6. *Flurbiprofen (flure-BI-proe-fen)*
7. *Ibuprofen (eye-byoo-PROE-fen)*
8. *Indomethacin (in-doe-METH-a-sin)*
9. *Ketoprofen (kee-toe-PROE-fen)*
10. *Meclofenamate (me-kloe-FEN-am-ate)*
11. *Mefenamic Acid (me-fe-NAM-ik)*
12. *Meloxicam (mel-OX-i-kam)*
13. *Nabumetone (na-BYOO-me-tone)*
14. *Naproxen (na-PROX-en)*
15. *Oxaprozin (ox-a-PROE-zin)*
16. *Phenylbutazone (fen-ill-BYOO-ta-zone)*
17. *Piroxicam (peer-OX-i-kam)*
18. *Sulindac (sul-IN-dak)*
19. *Tenoxicam (ten-OX-i-kam)*
20. *Tiaprofenic Acid (tie-a-pro-FEN-ik)*
21. *Tolmetin (TOLE-met-in)*

A new class of NSAIDs (called COX 2 inhibitors) that have the same anti-inflammatory effects, but don't upset most people's stomachs, are now used commonly. Celebrex, Vioxx, and Bextra are the currently available forms of this type of drug.

The most commonly used drugs for arthritis are called non-steroidal, anti-inflammatory drugs. Almost 25 drugs fall into this category including over-the-counter Ibuprofen (found in Advil, Motrin, Nuprin, and Metaprin) and naproxen sodium (found in Aleve). These medications are members of the aspirin family, and share many of the same risks and complications. If they were taken for a full year at full dosage, there is a small risk of kidney or liver damage (1 in 20,000) or stomach ulcers (1 in 800). Some newer medications such as Vioxx, Bextra and Celebrex don't seem to cause upset stomach as much and may have a lower risk for causing stomach ulcers. When there is an inflammation in the body, chemicals (prostaglandins) are produced that cause pain, including arthritis pain. NSAIDs block the production of these chemicals and work best when taken regularly. It takes about 3-5 days of regular use to reach a helpful level of the medication.

There is debate whether any one of these drugs works better than another. What is known is that what works best for one person may not work well for another. Often, a person may have to decide which medication works best for them by trial and error. The only exception to this would be if they have a history of stomach ulcers, which might make it safer to use one of the medications that is less likely to cause stomach ulcers.

Persons with kidney or liver failure, a history of stomach ulcers, allergies to aspirin products or Sulfa drugs, or who are also taking a blood thinning medication like Coumadin should consult their physician before taking any of these medications.

Each of these medications has a recommended daily dose. The amount of medication for that daily dose may vary between drugs, but the benefits and risks are roughly the same from one to another. For example, one 200 mg tablet of Celebrex per day, a daily dose, is equal to two 500 mg tablets of naproxen sodium (one 500 mg tablet taken twice a day) or three 800 mg tablets of Ibuprofen (one 800 mg. tablet taken three times a day). Taking the recommended amount of milligrams each day achieves the same effect whether the pills are prescribed or purchased "over-the-counter", but the patient may have to take more pills per day to make up those milligrams in the over-the-counter form. For example, to take the recommended 2400 mg per day of Ibuprofen, a patient would take twelve Advil OR three prescribed 800 mg Ibuprofen tablets.

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NSAIDs – Non-Steroidal, Anti-Inflammatory Drugs, *continued from front*

Another medication for arthritis is glucosamine and chondroitin sulfate. These chemicals are normally found in the smooth cartilage in joints (articular cartilage) but there may be a smaller amount than normal in joints with arthritis. Even though scientists haven't discovered for certain how it works, studies have shown that taking these chemicals as dietary supplements can work as well as NSAIDs in relieving joint pain.

As dietary supplements, glucosamine and chondroitin sulfate don't go through the quality testing and clinical trials that would be applied to a drug. However, no important health risks have been reported yet. Their dosage, absorption, and efficiency may vary from manufacturer to manufacturer and even from batch to batch made by the same manufacturer. There is no current proof that they can "regrow" cartilage in spite of marketing claims. The benefits of combining minerals or other additives with glucosamine or chondroitin sulfate haven't been determined.

Glucosamine and chondroitin sulfate should be used for 30 days according to most manufacturers before determining if they are of benefit. As with the NSAIDs, the response will vary from one individual to the next, but these supplements are a reasonable alternative.

Hopefully, this information has been interesting and helpful to you. As with any general information, some of it may not apply to your case and it is not intended to take the place of an orthopedic evaluation and personalized treatment plan. If you still have questions, please do not hesitate to discuss them with Dr. Nickel.

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