August 2012 Pain

1. Q: What are the common types of pain killers?

A: 1. Acetaminophen

2. Anti-inflammatories (NSAIDS such as Aspirin, Naproxen, and 15 others)

3. Narcotics: Codeine, Morphine, and Tramadol

4. Combinations of these

5. Steroids - Prednisone

1. Q: What are the uses of NSAIDS? A: 1. Acute pain 2. Joint pain.
2. Q: Which is more effective, Acetaminophen or NSAIDs?

A: They are equally effective, especially when combined with other supportive actions, such as RICE.

1. Q: In the treatment of joint pain such as Osteoarthritis, which is more effective,

Acetaminophen or NSAIDs? A: They are all equally effective.

1. Q: Do NSAIDs do more than control inflammation and pain? A: No.
2. Q: What are the 4 problems with NSAID use?

A: 1. GI upset, bleeding, and possibly fatal GI bleeds.

1. Along with alcohol produces high blood pressure.
2. May reverse heart drug benefits and damage kidneys.
3. May cause mental confusion, especially in the elderly, and with reduced kidney and liver function.
4. Q: What are the benefits of using Acetaminophen?

A: 1. It produces almost no adverse effects on the heart, blood vessels, stomach

or the kidneys.

2. Acetaminophen is safe for pts with stomach ulcers, HTN, and heart failure

1. Q: Is Acetaminophen a complete pain solution?

A: No, for some people they will need to use an NSAID.

1. Q: What is the recommended dosing for Acetaminophen?

A: 325 mg to 1.0 to 1.5 gm, every 6 to 8 hours.

1. Q: What is the maximum daily dose of Acetaminophen in adults with normal liver

function?

A: 4 gm per day.

1. Q: What is the maximum daily dose of Acetaminophen for an adult with liver disease

or who consumes a large amount of alcohol per day? A: 2 gm per day.

1. Q: What is the incidence of GI problems with NSAIDs?

A: 1. 10 to 20 % of patients develop abdominal pain, dyspepsia and nausea.

2. Upper GI ulcers occur in 1% of patients over 6 months.

1. Q: COX-2 Inhibitors Versus NSAIDs

A: 1. They are equally effective. 2. No difference in overall adverse effects.

3. No effects on platelets. 4. 10 to 25 % absolute difference in endoscopically proven ulcers.

5. No difference in deaths due to GI complications.

1. Q: In treating acute pain with children what to do?

A: 1. Start with Acetaminophen. 2. Add an NSAID: ASA or Ibuprofen.

3. Do not use fixed dosages of NSAIDs.

4. Be aware of possible GI complications with NSAID use.

1. Q: Topical NSAIDs are popular, what is the main problem with topical salicylates?

A: Skin irritation.

1. Q: What is the most effective NSAID? A: All are equally effective.
2. Q: Gabapentin is used to treat what type of pain, and at what dose?

A: Neuropathic pain, at 100 to 900 mg per day.

1. Q: What 3 drugs are used to treat acute migraine headaches?

A: 1. ASA 2. Ibuprofen 3. Sumatriptan.

1. Q: Which is the most effective? A: All three are equally effective.
2. Q: Of the Triptans which is the most effective?

A: All are equally effective.

1. Q: What caution is to be observed with Triptan use?

A: Headache recurrence 24 hours after the first dose.

1. Q: What is the Sumitriptan starting dosage?

A: 25 to 50 mg

1. Q: What are the Triptan AEs?

A: 1. Tingling

2. Paraesthesias

3. Warm sensations in the head, neck, chest, and limbs

4. Dizziness

5. Flushing

6. Neck pain or stiffness

7. CNS AEs

1. Q: What are the drug guidelines for treating migraine headaches?

A: 1. Mild: use an NSAID, caffeine, or Metoclopramide

1. If no effect in 1 hour: use a Triptan.
2. If no effect in a couple of hours: use a Narcotic.
3. Q: How effective are drugs in the prevention of migraine headaches?

A: Equal or better than 50% reduction in headache severity, freq, duration at 3 mos.