

Commentary

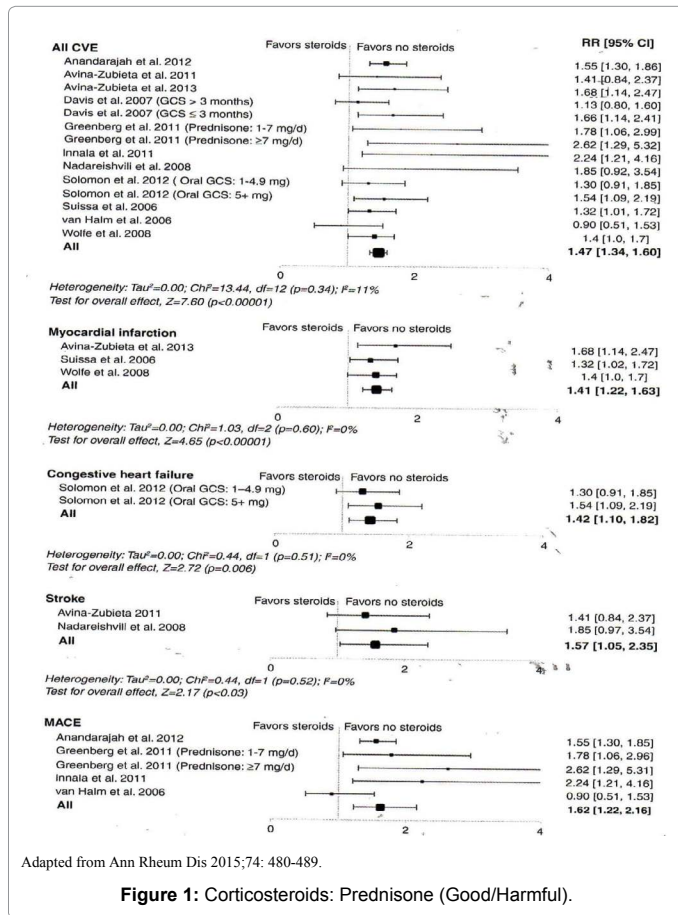
Open Access

Painful Choices

Greenwald M*

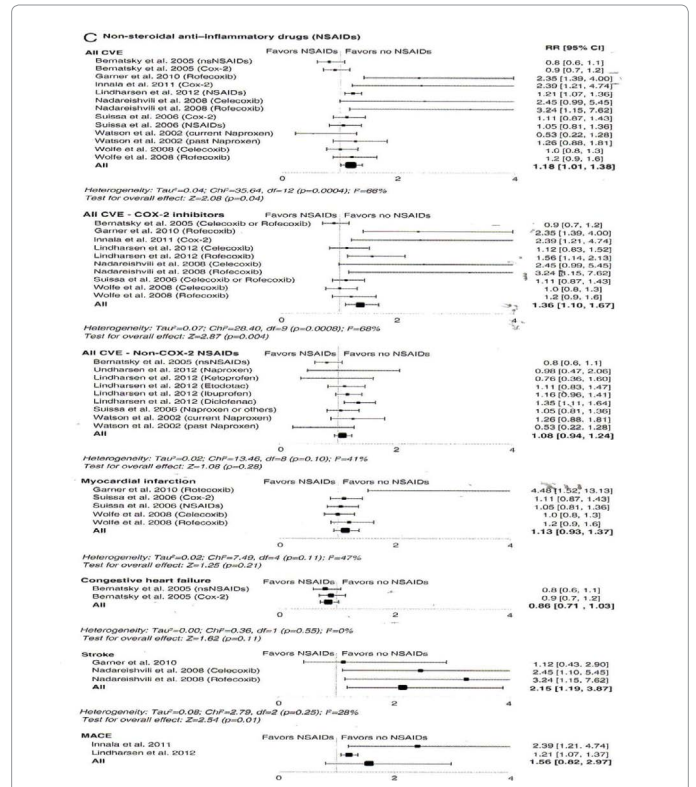
Desert Medical Advances, Palm Desert, CA, USA

The Hippocratic oath reminds every physician to first do no harm. "I will devise and order for them the best... according to my judgment and means; and I will take care that they suffer no hurt or damage." As physicians, we attempt to remedy pain. The three categories of drugs most prescribed for pain include non-steroidal anti-inflammatory drugs (NSAIDs), narcotics, and corticosteroids. After the concerns raised about cardiovascular disease with Vioxx and nearly all NSAIDs, prescriptions for narcotics skyrocketed from 2002-2012 [1]. This increased use of narcotics led to over 16,000 deaths per year in the US. There has also been an increased prescription of corticosteroids, despite the fact that corticosteroids have by far the worse record for cardiovascular disease and death [2]. Determining how to alleviate pain without harm is indeed a challenge. Looking at the deaths caused by narcotics, and the morbidity/mortality associated for chronic corticosteroid use, the case should be made to prescribe a NSAID for patients in chronic pain. The safest choice would be naproxen at 1000-1500 mg/day (Figures 1-3).



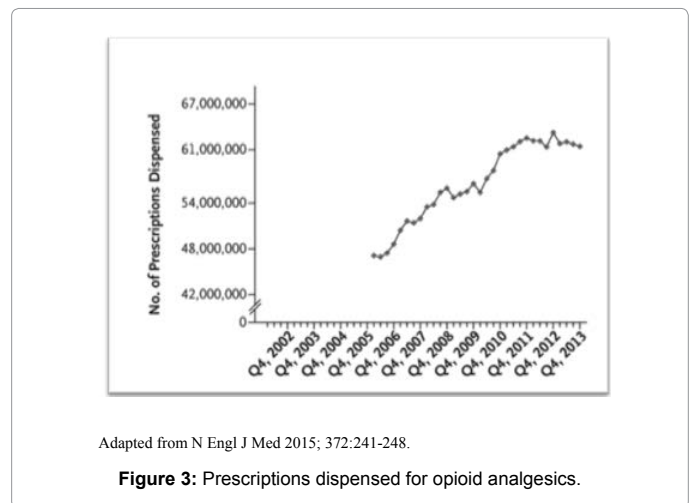
Adapted from Ann Rheum Dis 2015;74: 480-489.

Figure 1: Corticosteroids: Prednisone (Good/Harmful).



Adapted from Ann Rheum Dis 2015; 74: 480-489.

Figure 2: Non-steroidal anti-inflammatory drugs (NSAIDs) (Good/Harmful).



Adapted from N Engl J Med 2015; 372:241-248.

Figure 3: Prescriptions dispensed for opioid analgesics.

*Corresponding author: Greenwald M, Desert Medical Advances, Palm Desert, CA, USA, Tel: 760-341-9638; E-mail: greenwald.maria@gmail.com

Received July 19, 2015; Accepted August 10, 2015; Published August 12, 2015

Citation: Greenwald M (2015) Painful Choices. J Pain Relief 4: 196. doi:10.4172/21670846.1000196

Copyright: © 2015 Greenwald M. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

References

1. Richard C. Dart, Hilary L. Surratt, Theodore J. Cicero, Mark W. Parrino, Geoff Severtson S, et al. (2015) Trends in Opioid Analgesic Abuse and Mortality in the United States N Engl J Med 372: 241-248
2. Roubille C, Vincent Richer V, Starnino T, McCourt C, McFarlane A, et al. (2014) The effects of tumour necrosis factor inhibitors, methotrexate, non-steroidal anti-inflammatory drugs and corticosteroids on cardiovascular events in rheumatoid arthritis, psoriasis and psoriatic arthritis: a systematic review and meta-analysis. Ann Rheum Dis 74: 480-489