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## Quick review of oral nonsteroidal anti-inflammatory drugs (NSAIDs)

Examples include **aspirin, ibuprofen, naproxen**, diclofenac, sulindac, nabumetone, piroxicam, etodolac, indomethacin, celecoxib (Celebrex), and others.

When pain from inflammation is prominent, a short, scheduled (regular) course of the medicine is going to be most effective. Studies show that a course of medicine for 7-12 days is most effective in quieting an acutely inflamed tissue or joint. Beyond this, side-effect tendency increases and effectiveness is lessened. Of course, many people have to use these medications daily due to chronic pain from conditions such as moderate to severe arthritis. Such use significantly associates with increased risk of gastritis (inflammation of the stomach lining) and ulcer of the stomach wall or small intestine. Less likely can severe kidney disease be associated.

### Reasonable courses of common over-the-counter NSAIDs include:

Ibuprofen 400-800mg taken orally every 6-8 hours with food for 3 to 12 days.

Naproxen (Aleve) two tablets (440mg) every 10-12 hours with food for 3 to 12 days.

\*Proactive use of these medicines is also reasonable when you expect that demanding activities are likely to cause pain and inflammation. You should always keep yourself well-hydrated when using these medicines; particularly during endurance sports.

It is reasonable for a person to take a tablet of over-the-counter Pepcid, Zantac, or Prilosec once daily during a scheduled course of anti-inflammatory to decrease stomach acid, and lower the risk of gastrointestinal irritation or injury. The pharmacist can be a great resource for questions or further recommendations in this regard.

So long as a person does not have a liver impairment (most commonly caused by a viral hepatitis or heavy alcohol intake) or allergy to acetaminophen (a.k.a. Tylenol), this medicine can be added to the NSAIDs to help supplement the control of pain. However, acetaminophen does not have anti-inflammatory qualities.