

NSAIDs & Osteoarthritis: Putting Risks Into Perspective

What you need to know



NSAIDs (Non-Steroidal Anti-Inflammatory Drugs) are very helpful in relieving joint pain and swelling associated with osteoarthritis (OA). Two important side effects of NSAIDs are related to your gastrointestinal (GI) and cardiovascular (CV) systems.

Gastrointestinal (GI) effects



NSAIDs can irritate the stomach. Some people can rarely develop holes in the stomach lining (ulcers), blockages in the bowel, or bleeding from the bowels.

Cardiovascular (CV) effects



Taking NSAIDs can increase blood pressure or cause swelling of the legs. They can also worsen a condition called congestive heart failure (CHF). They can slightly increase the risk of heart attacks or stroke.

GI Risks in Perspective

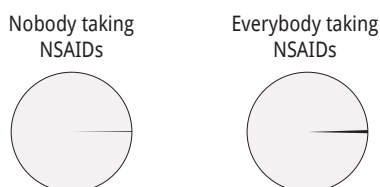


Imagine a city of 100,000 people with no risk factors for peptic ulcers and nobody is taking NSAIDs. If we followed these people for a year, about 200 would develop a serious GI problem. Now imagine if everyone was taking NSAIDs. In that city, 1,600 people would develop a serious GI problem.

There are a couple of key points to remember:

1. Stomach protectors called proton pump inhibitors (PPIs) can reduce the risk of serious GI problems, like ulcers, by up to 60%.
2. Even with every single person taking NSAIDs, 98,400 would have no serious GI problems. NSAIDs or not, 98% of our population (who have no other risk factors) will have no serious GI issues. That means NSAIDs are pretty safe in people with no risk factors.

GI incidents in a city of 100,000 people (in 1 year)



Since NSAIDs do increase risk a little bit, you should think of other things that also increase risk, because risk can add up. Talk to your doctor if any of the following apply to you:

- You are older than 75
- You have had GI bleeding before
- You are taking multiple NSAIDs (including low-dose ASA)
- You are taking blood thinners like Coumadin (warfarin)

CV Risks in Perspective



What's the risk of having a heart attack? If you imagine a normal city of 100,000 people, 820 of them would have a heart attack within one year. If every person in that city were taking NSAIDs, then 900 people would have a heart attack.

NSAIDs increase risk, but in a small way compared to other risk factors. If everyone in our imaginary city wasn't taking NSAIDs, but had high blood pressure instead, 1,870 people would have heart attacks that year. If everyone smoked instead, 1,330 people would have heart attacks. High blood pressure and smoking are much worse risk factors than taking NSAIDs!

Heart attacks in a city of 100,000 people (in 1 year)

1 city bus = 65 people

Nobody taking NSAIDs	x 13
Everybody taking NSAIDs	x 14
Everybody is a smoker	x 21
Everybody has high blood pressure	x 29

What can I do?



Be vigilant and learn as much as you can about your condition and the medications you are taking. Look out for any side effects and report them to your healthcare provider.

Remember, the risk of having any GI or CV side effect when taking NSAIDs is relatively low when put into perspective.

GI risks tend to be higher in older people (>75), those taking multiple NSAIDs, and anyone who has had a prior GI bleed or is taking blood thinners like warfarin.

CV risks are increased in people who have had a recent heart attack, stroke events or have active angina. The risk is also increased in people with traditional heart disease risk factors like smoking, high blood pressure, high cholesterol, diabetes, and a family history of heart disease.

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