

Taking painkillers increases death risk, second heart attacks in survivors

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Heart attack survivors who take common painkillers after a heart attack have a higher long-term risk of dying or having a second heart attack, according to a new study published in *Circulation*, an American Heart Association journal.

The <u>painkillers</u>, known as non-steroidal anti-inflammatory drugs (NSAIDs), include over-the-counter medicines such as ibuprofen and <u>naproxen</u> and <u>prescription drugs</u> such as <u>Celebrex</u> (celecoxib), which is used to treat conditions including arthritis.

"It is important to get the message out to clinicians taking care of patients with cardiovascular disease that NSAIDs are harmful, even several years after a heart attack," said Anne-Marie Schjerning Olsen, M.D., the study's lead author and a fellow in the cardiology department at Copenhagen University Hospital Gentofte in Denmark.

Schjerning Olsen and her colleagues used national hospital and pharmacy registries in Denmark to identify almost 100,000 people 30 or older who had a first heart attack between 1997 and 2009, and to see if they were prescribed NSAIDs afterwards.

Forty-four percent of the patients filled at least one NSAID prescription. Among those receiving an NSAID, risk of death from any cause was 59 percent higher one year after their heart attack, and 63 percent higher after five years.



Similarly, risk of having another heart attack or dying from <u>coronary</u> <u>artery disease</u> was 30 percent higher one year later and 41 percent higher after five years. The findings considered other illnesses and medication use in the NSAID patients, as well as differences in age, sex, income and year of hospitalization.

"The results support previous findings suggesting that NSAIDs have no apparent safe treatment window among <u>heart attack patients</u>, and show that coronary risk related to using the drugs remains high, regardless of the time that has passed since the heart attack," Schjerning Olsen said.

Normally, patients who have a heart attack face higher risk of death or another heart attack within the first year. But the extra risk is gone within five to 10 years.

Because the new study instead showed a persistently higher risk over at least five years for patients on the drugs, "long-term caution with any use of NSAIDS is advised in all patients after heart attack," Schjerning Olsen said.

A 2007 <u>American Heart Association</u> statement urged doctors to carefully weigh risks versus benefits when considering NSAID use in patients with a history or high risk of cardiovascular disease.

These data showed no difference in risk for men versus women. Because researchers used nationwide data, the findings extend across races, age, income groups and hospitals.

Researchers didn't test the drugs' effects in a controlled clinical trial, so the study didn't definitely show that NSAIDs, rather than other unknown factors, cause additional deaths or heart attacks. But the researchers consider NSAIDs the likely culprit behind the higher risk.



Use of <u>NSAIDS</u> should be limited and their over-the-counter availability should be re-evaluated, Schjerning Olsen said.

"Allowing a drug to be sold without prescription must be perceived by the general public as a strong signal of safety, and may be contrary in this case," she said.

Provided by American Heart Association

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