

Meta-analysis confirms common painkillers increase risk of heart problems and death but suggests size of these risks can

May 29 2013

NSAIDs have been the cornerstone in managing pain in people with inflammatory disorders like rheumatoid arthritis, and are some of the most commonly used drugs worldwide. Earlier research has linked their use with an increased risk of serious gastrointestinal complications, while a new generation of NSAIDs (coxibs) developed to reduce these gastrointestinal side effects have come under scrutiny for increasing the risk of heart attacks and death.

This new study now shows that higher dose regimens of older NSAIDs, such as diclofenac 150mg and ibuprofen 2400mg daily, are associated with similar risks of heart disease.

As such, for every 1000 individuals with a moderate risk of heart disease allocated to 1 year of treatment with high-dose diclofenac or ibuprofen, about three would experience an avoidable heart attack, of which one would be fatal.

In addition, all NSAIDs double the risk of [heart failure](#) and produce a 2-times increased risk of serious upper [gastrointestinal complications](#) such as [bleeding ulcers](#).

The Coxib and traditional NSAID Trialists' (CNT) Collaboration combined data on outcomes of over 353 000 patients comparing one NSAID with another NSAID or placebo.

Provided by Lancet

Citation: Meta-analysis confirms common painkillers increase risk of heart problems and death but suggests size of these risks can (2013, May 29) retrieved 25 April 2024 from <https://medicalxpress.com/news/2013-05-meta-analysis-common-painkillers-heart-problems.html>

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