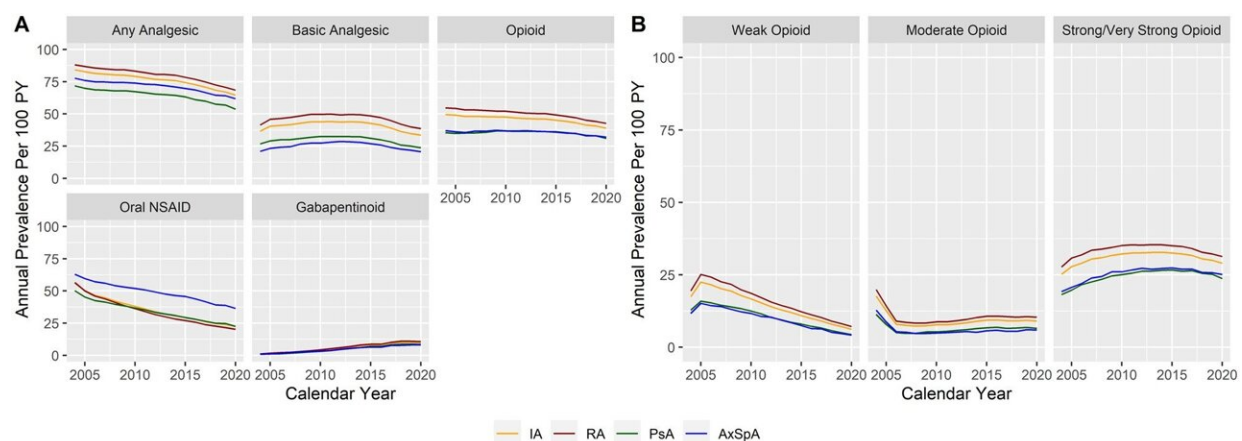


Ineffective painkillers are widely prescribed to patients with inflammatory arthritis in England, research finds

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Annual prevalence of all analgesic (A) and opioid strength (B) prescriptions in patients with inflammatory arthritis. AxSpA: axial spondyloarthritis; IA: inflammatory arthritis (RA, PsA and axSpA combined); PY: person-years. Credit: *Rheumatology* (2023). DOI: 10.1093/rheumatology/kead463

Researchers from Keele University's School of Medicine have found that analgesic medicines—commonly known as "painkillers"—are widely prescribed to people with inflammatory arthritis across England despite little research evidence that they improve pain for these patients, and studies showing they can cause serious side-effects.

The study [published](#) in the journal *Rheumatology*, showed that all types of painkillers were widely prescribed, with around two thirds of patients with [inflammatory arthritis](#) receiving a prescribed painkiller in 2020, and 1 in 4 patients receiving prescribed opioids long-term. Many of these long-term opioid prescriptions were started around the time people were diagnosed with inflammatory [arthritis](#).

Concerningly, many types of painkillers were prescribed more often in people with inflammatory arthritis that were older (and therefore most at risk of drug side-effects), female, lived in areas of deprivation, and in the North of England. This suggests there is an unfairness about [pain](#), or the way pain is managed in people with inflammatory arthritis in the NHS.

Inflammatory arthritis groups together conditions causing [joint pain](#) and swelling. Its three main types—[rheumatoid arthritis](#), [psoriatic arthritis](#), and axial spondyloarthritis—affect over 1% of adults in England. Pain is a major challenge for patients with inflammatory arthritis, with most patients suffering daily pain and rating pain as the area of their health they most want improved.

The crucial first step in improving NHS pain care for these patients is to understand how it is being managed. To address this, the research team looked at data from a large GP database—the Clinical Practice Research Datalink Aurum—which currently includes information from more than 1,400 GP practices across England.

They looked at data from 2004 to 2020, to understand how different types of painkillers are being prescribed in patients with inflammatory arthritis, and how this varies across people based on their age, gender, ethnicity, and where they live.

Lead author Dr. Ian Scott said the findings show an urgent need to

improve the way pain is managed in patients with inflammatory arthritis in the English NHS. He described the fact that one in four patients were prescribed opioids long-term, and 1 in 10 patients were prescribed gabapentinoid medicines in 2020 despite these drugs having many potential side-effects and no [clinical trials](#) existing to show they help if used in this way, as being "very concerning."

Dr. Scott added, "There are better ways to treat pain in [patients](#) with inflammatory arthritis, which have been shown to help in clinical trials. These include reducing joint inflammation using specialist disease-modifying medicines and exercise. We need to move the focus of pain care away from the long-term use of ineffective painkillers, towards the use of treatments that have been shown to help."

More information: Ian C Scott et al, Analgesic prescribing in patients with inflammatory arthritis in England: observational studies in the Clinical Practice Research Datalink, *Rheumatology* (2023). [DOI: 10.1093/rheumatology/kead463](#)

Provided by Keele University

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