

Certain pain medications do not appear to be associated with skin cancer risk

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Contrary to previous hypotheses, the use of non-steroidal anti-inflammatory drugs does not appear associated with risk of squamous cell skin cancer, according to a report posted online today that will appear in the April print issue of *Archives of Dermatology*, one of the JAMA/Archives journals.

Non-steroidal anti-inflammatory drugs (NSAIDs) such as aspirin, ibuprofen and celecoxib reduce pain and inflammation by blocking an enzyme involved in producing inflammatory compounds, according to background information in the article. NSAIDs may also inhibit the development of <u>cancer cells</u> by inducing cells to die and inhibiting the growth of new blood vessels.

Laboratory studies of cells and animals have indicated that NSAIDs protect against squamous cell carcinomas, common types of cancers that appear in the upper layers of the skin. However, while some studies have examined the associations between NSAIDs and other types of cancers—including colorectal, breast, prostate and lung—few have assessed the association between NSAID use and squamous cell carcinoma risk in human populations.

Maryam M. Asgari, M.D., M.P.H., of Kaiser Permanente Northern California, Oakland, and colleagues studied 415 health plan members who were diagnosed with squamous cell carcinoma in 2004 and 415 control patients who were the same age, [Bleep] and race but had no history of skin cancer. Participants completed a questionnaire about



NSAID use in the 10 years prior.

The majority of participants (61 percent) reported regular use of NSAIDs within the previous ten years, including 48 percent who used aspirin, 18 percent who used ibuprofen, 5 percent who used naproxen and 4 percent who used nabumetone.

"Regular use of any NSAID was not associated with a reduction in squamous cell carcinoma risk," the authors write. "Although NSAID users whose exposure was of short duration (one to three years) appeared to be at somewhat increased risk for squamous cell carcinoma, we found no consistent effects of duration of use of any NSAID on squamous cell carcinoma risk." Squamous cell carcinoma risk also did not appear to change regardless of NSAID dose, whether the medications were administered by a pharmacy nor with any individual type of NSAID medication.

"Given the potential toxic effects of NSAIDs, including platelet dysfunction and gastric ulcers, more uniformly efficacious chemopreventive agents with safer adverse effect profiles need to be explored," the authors conclude.

More information: Arch Dermatol.

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