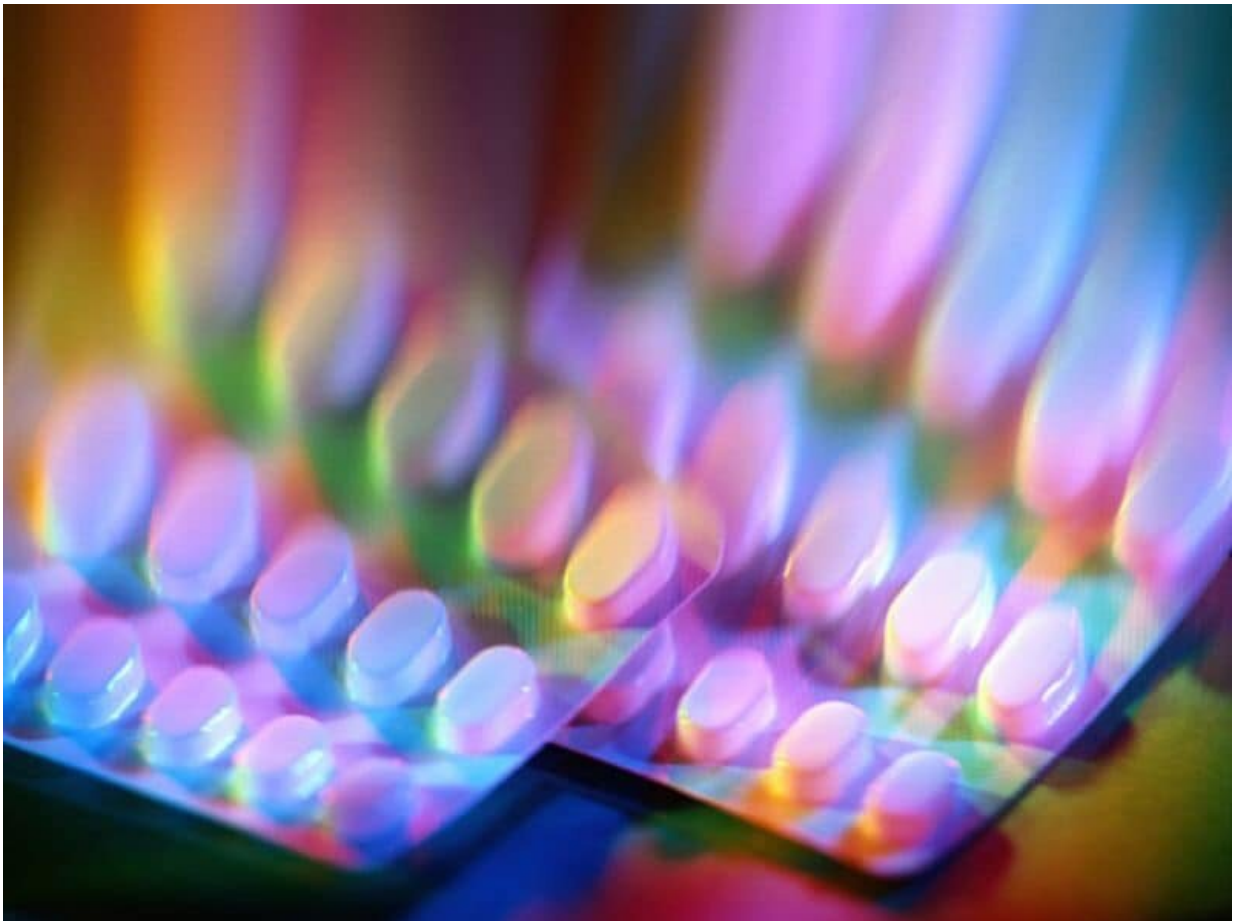


Tramadol may up mortality risk in osteoarthritis patients

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(HealthDay)—The initial prescription of tramadol compared with

commonly prescribed nonsteroidal anti-inflammatory drugs may be associated with increased all-cause mortality among patients with osteoarthritis, according to a study published in the March 12 issue of the *Journal of the American Medical Association*.

Chao Zeng, M.D., Ph.D., from Central South University in Changsha, China, and colleagues used data from the Health Improvement Network database (2000 through 2015) to assess the association of initial tramadol prescription with all-cause mortality among patients with osteoarthritis. The [study participants](#) were 88,902 patients (mean age, 70.1 years; 61.2 percent women) who were diagnosed with osteoarthritis and seen in a [general practice](#) in the United Kingdom and had received an initial prescription of tramadol (44,451 patients), naproxen (12,397), diclofenac (6,512), celecoxib (5,674), etoricoxib (2,946), or codeine (16,922).

The researchers found that over one-year follow-up, there were 278 deaths in the tramadol cohort and 164 in the naproxen cohort (hazard ratio [HR], 1.71; 95 percent confidence interval [CI], 1.41 to 2.07). Mortality was also higher for tramadol compared with diclofenac (HR, 1.88; 95 percent CI, 1.51 to 2.35). A higher all-cause mortality rate was associated with tramadol versus celecoxib (HR, 1.70; 95 percent CI, 1.33 to 2.17) and etoricoxib (HR, 2.04; 95 percent CI, 1.37 to 3.03). There was no statistically [significant difference](#) in all-cause mortality between tramadol and codeine (HR, 0.94; 95 percent CI, 0.83 to 1.05).

"These findings may be susceptible to confounding by indication, and further research is needed to determine if this association is causal," the authors write.

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

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