

Pain medications linked to higher cardiovascular risks in patients with osteoarthritis

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Nonsteroidal anti-inflammatory drugs (NSAIDs) can help to control the pain and inflammation in individuals with osteoarthritis (OA), but a new *Arthritis & Rheumatology* study suggests that NSAIDs contribute to cardiovascular side effects in these patients.

The study matched 7,743 OA patients with 23,229 non-OA controls. The risk of developing cardiovascular [disease](#) among people with OA was 23% higher compared with people without OA. Among secondary outcomes assessed in the study, the risk of congestive heart failure was 42% higher among people with OA compared with people without OA, followed by a 17% greater risk of ischemic heart disease and a 14% greater risk of stroke.

Investigators found that approximately 41% of the increased risk of cardiovascular disease among people with OA was mediated through their NSAID use. NSAIDs also played a substantial role in developing the study's secondary outcomes.

"To the best of our knowledge, this is the first longitudinal study to evaluate the mediating role of NSAID use in the relationship between osteoarthritis and cardiovascular disease in a large population based sample," said senior study author Aslam Anis, Ph.D., FCAHS, of the School of Population and Public Health at the University of British Columbia. "Our results indicate that osteoarthritis is an [independent risk](#)

[factor](#) for [cardiovascular disease](#) and suggest a substantial proportion of the increased risk is due to the use of NSAIDs. This is highly relevant because NSAIDs are some of the most commonly used drugs to manage pain in patients with osteoarthritis. It's important for people with OA to talk to their care providers and discuss the risks and benefits of NSAIDs."

More information: Mohammad Atiquzzaman et al, Role of Non-Steroidal Anti-Inflammatory Drugs (NSAID s) in the Association between Osteoarthritis and Cardiovascular Diseases: A Longitudinal Study, *Arthritis & Rheumatology* (2019). [DOI: 10.1002/art.41027](https://doi.org/10.1002/art.41027)

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