

Opioid use is reduced in patients treated with NSAIDs

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Patients receiving a post-surgery prescription of ibuprofen with a rescue prescription of Percocet used less opioids than a group of similar patients who were prescribed just Percocet. The research was presented by a group from the New York University Hospital for Joint Diseases in New York City today at the American Orthopedic Society of Sports Medicine's Annual Meeting.

"The current [opioid](#) epidemic demands physicians seek ways to decrease patients' requirements of narcotic medications without sacrificing their postoperative comfort level," said lead researcher Dr. Kamali A. Thompson, from New York University Hospital for Joints Diseases. "This study evaluated patients' pain following arthroscopic shoulder instability repair and compared the use of narcotic medications between patients prescribed NSAIDs with rescue opioid prescription to those prescribed opioids alone."

According to the National Institute of Drug Abuse, more than 130 people in the United States die daily after overdosing on opioids. The Centers for Disease Control and Prevention estimates that the total "[economic burden](#)" of prescription opioid misuse alone in the United States is \$78.5 billion a year, including the costs of healthcare, lost productivity, addiction treatment and criminal justice involvement.

Thompson and his team randomized 40 patients who were to undergo an arthroscopic shoulder instability repair and divided the [patients](#) into two groups: one group received 600 milligrams of Ibuprofen and a 10-pill rescue prescription of Percocet 5/325mg while the other group was only given Percocet 5/325mg.

The researchers found that the total amount of opioid consumption was significantly lower in the group that received both Ibuprofen and Percocet compared to the group that received just Percocet.

"It is possible to alleviate postoperative pain with lower amounts of opioids than are currently being prescribed," said Thompson. "The public health crisis of opioid abuse requires an immediate solution beginning with the reduction of post-operative narcotics distribution."

Provided by American Orthopaedic Society for Sports Medicine

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