

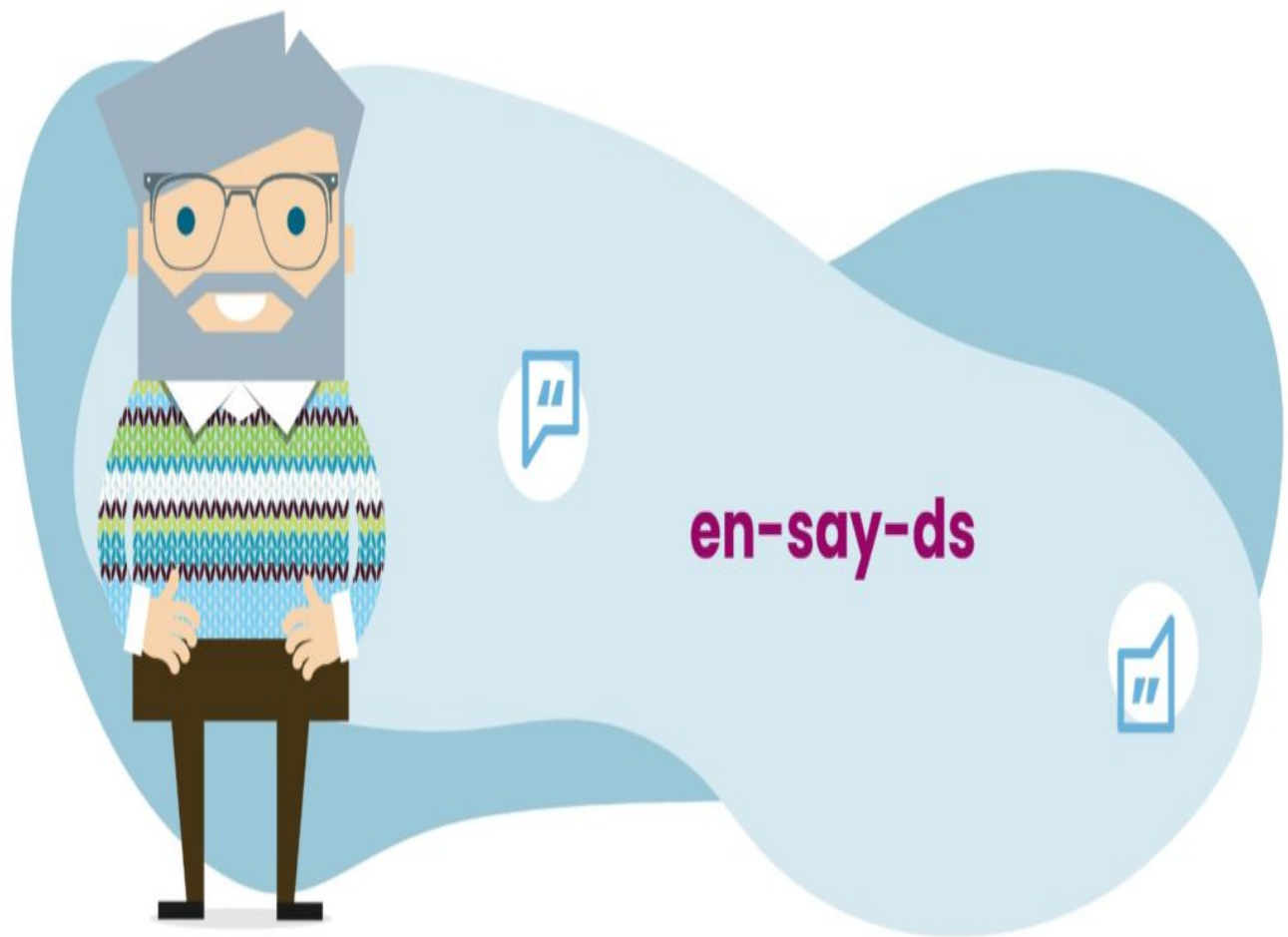


Resource

Anti-Inflammatories (NSAIDs)

NSAIDs stands for Non-Steroidal Anti-inflammatory Drugs. These include Ibuprofen, naproxen, diclofenac, indomethacin, piroxicam, meloxicam

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NSAIDs explained

Anti-inflammatories work in two ways:

1. To reduce pain, the effect from the prescribed NSAID dose taken with or after food may be felt

after the first dose. It can take a week to achieve complete pain relief

2. To reduce inflammation (the swelling in the joints) a regular dose must be taken (with or after food) thereby keeping a constant level of the drug in the blood stream and the full benefit in reducing swelling may take up to 3 weeks

Occasionally in JIA, NSAIDs may take 4 -12 weeks to be fully effective in controlling the swelling, redness, heat and pain. If necessary, an alternative NSAID may be required for improved control of symptoms.

NSAIDs are available as a liquid, as tablets or as a melt. A melt is a small tablet (which is prescribed in the required dose) that will either melt in the mouth or can be dissolved in a small flavoured water based drink (not fruit juice).

Which drug is prescribed?

The following bullet points are a summary of information from The BNF (British National Formulary) for Children 2014/2015 as the reference work for prescribing doctors:

- There is very little difference between the different drugs and the way they work but individual children and young people (and adults) can have considerable differences in the way they respond to them
- Ibuprofen combines the benefits of pain relief, reduction of inflammation and lowering of fever. It has fewer side effects than other NSAIDs but its anti-inflammatory properties are weaker
- Naproxen is an effective NSAID which is well tolerated
- Diclofenac is similar to Naproxen
- Indomethacin is a little more effective than naproxen but has a high incidence of side effects that include headache, dizziness, and gastrointestinal disturbance. It is rarely used in children and only when other NSAIDs have been unsuccessful
- Piroxicam is as effective as naproxen but works for longer so that one dose daily is effective. It has more gastrointestinal side effects and can cause frequent skin reactions
- Meloxicam may be prescribed for adolescents over 12 years old who are intolerant of other NSAIDs.

Prescribing precautions

- Prescribing doctors will be aware of the precautions they need to take in their choice of NSAID. This is based on taste of the medicine, the age of the child, the convenience of the dosing times and the possible side effects
- It is vitally important that the patients or their family inform the doctor of all the information needed to prescribe safely. This includes information about any other diagnosed medical conditions and medicines currently prescribed (particularly heart or kidney disease, asthma or blood disorders)
- NSAIDs must only be taken with or after food because of the irritant effect they can have on the stomach
- The dose range for each NSAID is specific to the individual drug and therefore the dose of one cannot be compared to another
- Antibiotics containing trimethoprim are avoided when NSAIDs are being taken

- There is a theoretical risk that NSAIDs might increase the toxicity of methotrexate. In practice, however, as stated in the Paediatric Rheumatology textbook (2012) this is 'rarely a clinical problem'.

What are the possible side effects?

As with any medication, NSAIDs have a number of possible side effects, although it is important to remember that these are only potential side effects. They may not occur at all.

The potential side effects listed below cover all the NSAIDs in the previous section. Ibuprofen, naproxen and diclofenac have the least side effects, with the risk of side effects increasing in the subsequent 3 NSAIDs.

- Gastrointestinal disturbances include discomfort, nausea, diarrhoea, and occasionally bleeding and ulceration. Children tolerate NSAIDs better than adults and these side effects are less common. A few children may need a drug to protect their stomach, such as omeprazole or lansoprazole.
- Hypersensitivity reactions such as rash, bronchospasm (mimicking asthma), angioedema (swelling of lips, tongue, around the eyes)
- Headache, dizziness, nervousness, hearing disturbances such as tinnitus (ringing in the ears), sensitivity to sunlight and blood in the urine
- NSAIDs have the potential to worsen asthma, but this will be checked by your specialist or GP
- There are other rare but potentially serious side effects and these are listed in the specific patient information leaflet in the packaging.

The treatment of JIA involves the relief of pain as well as all the associated symptoms of swelling of the joints with the limitations these can bring. NSAIDs give invaluable benefit initially but long term control of the processes within the body driving the arthritis is the important goal and may require disease controlling drugs.

Remember to report any side effects and concerns you may have of other possible side effects to your doctor

Important Message

Only 1 NSAID is ever prescribed at a time. It is dangerous to take a prescribed NSAID and add to it an 'over the counter' purchased NSAID, such as ibuprofen.

The availability of some 'over the counter' NSAID preparations (meaning not requiring a prescription) can lead to the incorrect belief that these drugs do not have side effects and therefore can be taken with less caution.

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Pain relief can be helped by alternating an NSAID with a simple pain killer, such as paracetamol. This should be discussed with your doctor or nurse.

NSAIDs are drugs and must be taken or given to a child responsibly according to the advice from the doctor or pharmacist

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