NSAIDs and heart complications revisited

By ACSH Staff — June 10, 2011

Previous studies have suggested that certain pain-relieving drugs, with the exception of aspirin and acetaminophen, may increase the risk of heart attack or death from a cardiovascular event. The drugs under suspicion are non-steroidal anti-inflammatory agents (NSAIDs). Now a new study published in the *American Journal of Medicine* and led by Dr. Anthony A. Bavry, an assistant professor of medicine at the University of Florida in Gainesville, finds [1] that patients with coronary artery disease and high blood pressure who chronically use NSAIDS for at least three years have a significantly increased risk of suffering from a heart attack. They’re also twice as likely to die from heart disease.

In the study, over 22,000 patients were monitored; those patients who never used NSAIDs (except aspirin) or only occasionally took them had a 16 percent lower rate of cardiovascular events as compared to those who used NSAIDs chronically over three years.

One factor researchers were unable to control for was whether patients had rheumatoid arthritis or osteoarthritis, which could explain why some of them used NSAIDs regularly. Since both conditions are linked to a higher risk of heart complications, this could have confounded the results.

The American Heart Association (AHA) has been recommending since 2007 that patients with heart disease first start taking either aspirin or acetaminophen to treat their pain.

“That’s all well and good,” says ACSH’s Dr. Gilbert Ross, “except that aspirin comes with its own risk factors, including gastrointestinal bleeding. Also, acetaminophen is not as effective as the NSAIDs in treating arthritic pain and can become toxic when taken too often.”

Currently, there is not enough research to determine the potential adverse effects of any single NSAID, but according to the AHA, past research suggests that naproxen (Aleve) may be the safest for the heart.

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