A recent study suggesting that ibuprofen and morphine are equally effective for pain management in children with fractures has been gaining a lot of attention in recent days.

The study, which was published online October 27th in the Canadian Medical Association Journal, included 134 children between the ages of five and seventeen who were admitted to the hospital with uncomplicated extremity fractures that did not require surgery. The children were randomly assigned to receive either morphine or ibuprofen as needed for 24 hours after discharge. The medications were not labeled so participants did not know which painkiller they received. The patients then rated their pain on a 0-5 scale both before and 30 minutes after receiving each dose.

The researchers found no significant differences in the recorded pain scores between morphine and ibuprofen. However, more than half the participants who received morphine reported adverse side effects such as drowsiness compared to only about 30 percent of the ibuprofen group. The authors conclude, Our results suggest that ibuprofen remains safe and effective for outpatient pain management in children with uncomplicated fractures.

This study, however, has limitations. First, only 134 participants were included the in study. Second, the pain levels and adverse side effects were based completely on self-report, which can often be subjective and inaccurate. Third, both the medication administration and pain reduction reporting took place after the patients had been discharged from the hospital and were not under supervision.

ACSH's Dr. Josh Bloom, who has written frequently about opiate addiction, and misguided government policies to combat it says, Although this story is intriguing, there is an element of it that troubles me. Opiates are the pariah of the medical world right now because of an enormous addiction problem in the US. There is already pressure on doctors to limit their prescriptions of these drugs, and it would be unfortunate if this study were to be interpreted in a way such that patients who are suffering from chronic, severe pain are told to take Advil instead. It has its own
set of problems (gastrointestinal, kidney) and is not strong enough to handle severe pain.

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