

—Retaking Control— Nonprescription Drugs Pain Relievers

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We typically believe that nonprescription (OTC; over-the-counter) drugs are quite safe and harmless, even if taken regularly and at maximum daily dosages. But nothing is further from the truth. The very fact that we take them frequently, even daily, puts our health and wellness at great risk. In this article, we will discuss the class of one of the most frequently used nonprescription drugs: the pain relievers.

Pain relievers (analgesics), fever reducers (antipyretics), and anti-inflammatories are of two main types; acetaminophen (Tylenol), which is a pain reliever and fever reducer but *not* an anti-inflammatory, and the NSAIDs (nonsteroidal anti-inflammatory drugs), which are pain relievers, fever reducers, and anti-inflammatory (such as joint pain from arthritis) include the following: aspirin, ibuprofen (Advil, Motrin), and naproxen (Aleve). These are all fine to use when necessary and as directed by the labeling for short periods of time but should be avoided if you have a known sensitivity to them. Trouble comes when we use them consistently or daily at the higher doses.

Acetaminophen can be found in a multiplicity of products for pain and cold remedies and is easily overused. The primary problem with acetaminophen is its propensity for liver toxicity as it directly interferes with the liver's ability to produce glutathione, which is a powerful and necessary antioxidant and protectant. It has been estimated that over 56,000 emergency room visits, 26,000 hospitalizations, and 458 deaths are attributed yearly in the U.S. to acetaminophen overdose and toxicity. This has sparked the makers of Tylenol to modify the daily dosage recommendations. The old standard recommendation (adult dose) was a maximum of 8 tablets or capsules (1-2 per 6 hours) @ 500mg for a total of 4000mg per day. The *new* standard is 6 (1-2 per 6 hours) @ 500mg for a total of 3000mg per day. Please keep that in mind. If you must take acetaminophen regularly, then you should also be taking the supplement N-acetyl cysteine (NAC). N-acetyl cysteine is an amino acid derivative of L-cysteine, an amino acid that your body uses to make proteins. The liver uses the amino acids cysteine, glutamic acid, and glycine to make the antioxidant glutathione. NAC has many medical uses and is given intravenously to spare the liver from acetaminophen (and alcohol) toxicity.

As for the NSAIDs, aspirin (acetylsalicylic acid) has been around the longest. It was originally derived from plant sources, notably white willow bark, which, incidentally, when taken as an herb is a better alternative to the common side effects of aspirin. The primary problem with all NSAIDs is that they deplete essential nutrients (especially vitamin C, the B vitamins, and minerals) and they all have the propensity for severe gastrointestinal upset, ulceration, and subsequent bleeding potentially leading to anemia. If your digestive tract is sensitive to one NSAID, it is highly likely that you will be sensitive to them all. If you must take aspirin, make sure it is "safety coated" (enteric coated, like Ecotrin), which keeps it from dissolving in your stomach acid and spares stomach irritation. Do not take the plain white powdery tablets on a regular basis as they will certainly cause gastric upset. Please note that even if coated, any NSAID can still cause

gastrointestinal upset farther down the tract, notably the large intestine or colon, resulting in ulceration and bleeding there. Aspirin, like acetaminophen, can be found in a multitude of OTC products so you must read labels. Also please note that any ingredient such as “salicylate” is in fact aspirin, and this is found in numerous OTC products. The recommended adult dose for aspirin is 1-2 tablets @ 325mg every 4 hours to a maximum of 12 tablets or 3900mg daily—and that’s a lot. As a special note, aspirin is not advised for children under 12 and caution if used in teenagers due to the risk of developing Reye’s syndrome.

Ibuprofen and naproxen are the new NSAIDs and can work very well but carry with them the same potential problems as with aspirin. Due to the heavy use of these drugs, gastrointestinal upset and bleeding are common. Just so you know, if your stools are hard, dark, and tarry in appearance, this is a typical sign of gastrointestinal bleeding, and you should discontinue NSAID use. The recommended adult dosage for ibuprofen is 1-2 200mg tablets every 4-6 hours to a maximum of 6 tablets or 1,200mg per day. Many people routinely exceed that. Naproxen is a much longer acting NSAID so the recommended dosage is much less at 1 tablet @ 220mg every 8-12 hours or no more than three times daily to a maximum of 3 tablets or 660mg daily. For chronic pain and inflammation sufferers, it’s easy to exceed these dosages routinely and create unintentional problems. Remember to check your Drugs.com app for all the potential side effects of these drugs, as there are many more than we’ve discussed here.

So what about alternatives? For fever and the occasional headache and pain all the above are quite acceptable and probably desirable unless you have a known sensitivity. Just try to stay within the limits and use the least amount to bring about the desired effect and use it for the shortest period of time necessary. Here are some alternative suggestions:

For Pain:

- DL-Phenylalanine (DLPA). This is an amino acid combination of L-phenylalanine, an amino acid used to build proteins, and its mirror isomer form, D-phenylalanine, which is *not* used to build proteins, but is a neuro-modulator and chemical messenger which increases your body’s endorphin production to inhibit pain.
- Methylsulfonylmethane (MSM), also known as dimethylsulfone. This can help with both pain and inflammation (good for joint pain) and it also comes in a topical cream, which is great for skin health too.
- Notable herbals: White willow bark, as we mentioned before contains aspirin-like compounds with minimal side effects. Feverfew is notable for migraines.
- Homeopathic: Arnica has long been used for pain and bruising, both as sublingual pellets and topicals.

For inflammation:

- Digestive plant enzymes, especially bromelain and papain and others, when taken *between* meals, have an anti-inflammatory effect rather than as a digestive aid. Animal-based enzymes (pancreatin) must be enteric coated or they will be denatured and destroyed by stomach acid. Plant-based enzymes are not denatured or destroyed by stomach acid.
- Herbals: Turmeric (curcumin) and tart cherry are anti-inflammatory.