

# Choosing a pain reliever

What to do if you have kidney disease or heart problems

f you need a painkiller but suffer from high blood pressure, heart failure, or kidney disease, it's best to steer clear of some commonly used pain relievers. Those include:

• Ibuprofen, which is sold under the brand names Advil and Motrin, and also as a generic or store brand. You can buy it without a prescription at the drug store. It's sometimes combined with other drugs in other over-the-counter products, such as certain cold remedies.

• Naproxen, sold under the brand name Aleve and as a generic or store brand. It doesn't need a prescription, either.

• Celecoxib, a prescription drug sold as Celebrex. All three of those drugs, which are called nonsteroidal anti-inflammatory drugs, or NSAIDs, can ease pain and inflammation. But they are too risky if you have any of those health problems. Here's why.

#### They're bad for high blood pressure.

All NSAIDs can cause or worsen high blood pressure. That increases your chance of having a heart attack or stroke. The drugs can also make some blood pressure drugs less effective. That



includes diuretics such as hydrochlorothiazide (Hydrodiuril and generic), ACE inhibitors such as lisinopril (Prinivil, Zestril, and generic) and ARBs such as losartan (Cozaar and generic).

#### They're bad for the heart and kidneys.

Long-term use of NSAIDs can make your body hold onto fluid, which can worsen heart failure

symptoms, such as shortness of breath, swollen ankles, and a rapid or irregular heartbeat. They can also reduce kidney function. That makes the drugs risky for people who already have kidney disease from diabetes or other causes.

#### Which painkillers should you consider?

Over-the-counter acetaminophen (Tylenol and generic) is often a good first option for people with high blood pressure, heart failure, or kidney problems. But high doses of that drug can damage the liver, so take the lowest dose that provides enough pain relief, and never take more than 4,000 milligrams (mg) a day. That's equal to the amount in 12 325 mg pills. If that doesn't work, ask your doctor about short-term use of stronger narcotic painkillers, such as tramadol (Ultram and generic). But if you have kidney problems, limit your daily dose of tramadol to no more than 200 mg and only take it once every 12 hours to reduce your risk of side effects. If you have epilepsy or take certain antidepressants, such as amitriptyline, fluoxetine (Prozac and generic), or sertraline (Zoloft), skip tramadol because it might increase the risk of seizures.

#### USING THIS INFORMATION

This information is provided for you to use in discussions with your health care provider. The content is for educational use only and is not a substitute for professional medical advice, diagnosis, or treatment. Unfortunately, we cannot help you with individual medical questions. Always seek the advice of your physician or other qualified health provider with any questions you may have regarding a medical condition. Never disregard, avoid or delay in obtaining medical advice from your doctor or other qualified health care provider because of something you have read in this report. Use of this report is at your own risk. Consumer Reports, American Society of Nephrology (ASN), ABIM Foundation, and their distributors are not liable for any loss, injury, or other damages related to your use of this report. The report is intended solely for consumers' personal, noncommercial use and may not be altered or modified in any way or used in advertising, promotion, or for any other commercial purpose. Special permission is granted to organizations participating in the Consumer Reports consumer health communication program to disseminate free copies of this report in print or digital (PDF) formats to individual members and employees. Learn more at ConsumerHealthChoices.org or email HealthImpact@cr.consumer.org. Published by Consumer Reports © 2012 Consumers Union of U.S., Inc., 101 Truman Ave., Yonkers, NY 10703-1057. Developed in cooperation with American Society of Nephrology for Choosing Wisely, a project of the ABIM Foundation. Portions of this report are derived from ASN's "Five Things Physicians and Patients Should Question" list. © 2012 American Society of Nephrology. For more information, go to www.asn-online.org/choosingwisely.

### **Consumer Reports' Advice**

## Managing pain without drugs

Non-drug treatments, such as yoga or massage, can often reduce or even eliminate your need for drugs. Here are some options that can help, depending on your kind of pain.

• **Back pain.** Staying physically active often helps. Acupuncture, massage, physical therapy, and yoga, might work, too. Chiropractic care might also be beneficial.

• Headaches. Cutting back on alcohol and avoiding foods that trigger your headaches might help, as can controlling

stress with meditation, relaxation therapy, or other means. Exercise can also help.

• **Osteoarthritis.** Lowimpact exercise, such as walking, biking, and yoga, can ease pain and

improve function. But it's best to avoid high-impact activities, such as running or tennis, that might aggravate your symptoms.

• **Fibromyalgia.** Regular exercise can help reduce pain and fatigue. Other options to consider include cognitive behavioral therapy—a type of psychotherapy—as well as meditation, and tai chi, which is a form of exercise involving slow, gentle movements combined with deep breathing.

