

## Medication Information

A few words about medication: more is not always better! It may be tempting to just increase pain medication while waiting for your surgery. There are some important precautions to consider.

**Acetaminophen (Tylenol)** is a nonspecific pain reliever that is generally safe to use up to 4 g (4000mg) total dose per day. People with liver disease are the exception. Acetaminophen has a small but measurable effect on arthritis pain. Regular dosing, rather than waiting until the pain is bad, may provide more relief. Many combination medications, such as cold remedies, also contain acetaminophen, so use caution to not exceed your total daily dose.

**Anti-inflammatory medications such as ibuprofen, naproxen, and other prescription medications** have a bit better effect on arthritis pain. They also have more potential side effects. There is risk of heart disease including heart attacks, kidney problems, and serious intestinal bleeding. These risks are present as soon as you start using the medications, but the risk increases with duration of use and dose. Anti-inflammatory gels such as diclofenac can have similar side effects, although the risk is decreased. There are small amounts of conflicting evidence about the effect of anti-inflammatories on the novel coronavirus. Using these medications does not increase your risk of getting COVID-19. It is currently uncertain if using them during a COVID-19 infection makes patients worse.

**Strong painkillers include codeine, tramadol, morphine, hydromorphone and oxycodone.** These are opioids and are the same class of medications associated with the current opioid overdose epidemic. They have many side effects and can cause serious harms including complications like constipation, nausea, bowel obstruction, sleep apnea, dizziness, increased falls, increased osteoporosis and fractures, new and worsening depression and anxiety, heart complications including heart attack, hormone effects including sexual dysfunction, and immune suppression. These are in addition to the serious risks of accidental overdose and addiction. New research shows that while these medications are helpful for acute pain, such as for a day or two after surgery, they are much less effective in pain that lasts longer. In patients taking opioids for several months, the pain-relieving effect is similar to the benefit from acetaminophen and anti-inflammatories. When patients are taking opioids regularly before orthopaedic surgery, studies support trying to reduce opioid doses even before the surgery. This results in significant decreases in postoperative complications.

There are other medications that are useful at times to modulate pain as well as the anxiety and depression that can accompany chronic pain.

If you have questions about your medication, please talk with your primary care provider, your navigator or your surgeon.