

Two simple concrete methods to reduce the dosage of non-steroidal anti-inflammatory drugs (NSAIDs) dramatically - As with antihyperlipidemic drugs, efficacy should be examined after administration of NSAIDs. When NSAIDs are administered for more than 2 weeks, it is necessary to confirm that NSAIDs are more analgesic than acetaminophen.

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## Abstract

Abstract There are two simple concrete methods to reduce the dosage of NSAIDs dramatically. An attending physician is suspected of being a fake doctor if the blood test is never performed after administration of the antihyperlipidemic drug. However, the analgesic effects are often not examined after the administration of analgesics. As with antihyperlipidemic drugs, efficacy should be examined after administration of analgesics. Analgesics should not be administered continuously without examining the analgesic effects. One study shows no difference in the analgesic effects between NSAIDs and acetaminophen at the latest 2 weeks after injury or surgery. If NSAIDs are administered for more than 2 weeks, it is necessary to confirm that NSAIDs are more analgesic than acetaminophen. If NSAIDs are more analgesic than acetaminophen, prolonged administration of NSAIDs is acceptable, knowing that they have more adverse effects than acetaminophen. If the analgesic effects of both medicines are comparable, acetaminophen should be administered. These are a matter of course. The two methods reduce the administration of NSAIDs dramatically, reducing the aforementioned adverse effects due to NSAIDs dramatically.

Two simple concrete methods to reduce the dosage of non-steroidal anti-inflammatory drugs (NSAIDs) dramatically - As with antihyperlipidemic drugs, efficacy should be examined after administration of NSAIDs. When NSAIDs are administered for more than 2 weeks, it is necessary to confirm that NSAIDs are more analgesic than acetaminophen.

Two simple concrete methods to reduce the dosage of non-steroidal anti-inflammatory drugs-examination of the analgesic effects, and comparison of the analgesic effects with acetaminophen over 2 weeks of medication-

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non-steroidal anti-inflammatory drugs, acetaminophen, reverse placebo effects, analgesic effects, adverse effects

## Abstract

There are two simple concrete methods to reduce the dosage of NSAIDs dramatically. An attending physician is suspected of being a fake doctor if the blood test is never performed after administration of the antihyperlipidemic drug. However, the analgesic effects are often not examined after the administration of analgesics. As with antihyperlipidemic drugs, efficacy should be examined after administration of analgesics. Analgesics should not be administered continuously without examining the analgesic effects. One study shows no difference in the analgesic effects between NSAIDs and acetaminophen at the latest 2 weeks after injury or surgery. If NSAIDs are administered for more than 2 weeks, it is necessary to confirm that NSAIDs are more analgesic than acetaminophen. If NSAIDs are more analgesic than acetaminophen, prolonged administration of NSAIDs is acceptable, knowing that they have more adverse effects than acetaminophen. If the analgesic effects of both medicines are comparable, acetaminophen should be administered. These are a matter of course. The two methods reduce the administration of NSAIDs dramatically, reducing the aforementioned adverse effects due to NSAIDs dramatically.

## 1 Introduction

Non-steroidal anti-inflammatory drugs (NSAIDs) are risk factors for stroke, myocardial infarction, kidney injury, and gastrointestinal complications, etc. Although concomitant medications can reduce gastrointestinal complications to some extent, we have no such medications for stroke, myocardial infarction, and kidney injury. The administration of NSAIDs should be reduced to reduce those adverse effects. Because of the high dosage of NSAIDs worldwide, reduction of them is of great clinical significance.

There are two simple concrete methods to reduce the dosage of NSAIDs dramatically.

## 2 As with antihyperlipidemic drugs, efficacy should be examined after administration of analgesics.

An attending physician is suspected of being a fake doctor if the blood test is never performed after administration of the antihyperlipidemic drug. If a physician does never check the efficacy of analgesics after administration, it is a similar situation. However, the analgesic effects are often not examined after the administration of analgesics. I have confirmed this with interviewing patients who had consulted me and with the medical records of patients who had consulted me at the medical institutions where I previously worked. I often did not confirm it, before I specialized in the pharmacological treatment of pain. Does the previous physician (who may be a physician at the same medical institution as the readers) of patients who consulted the readers (physicians) always examine the analgesic effects of analgesics? Please check the medical records or interview patients. Analgesics should not be administered continuously without examining the analgesic effects. Analgesics are classified into analgesics for nociceptive pain and analgesics for neuropathic pain. Narcotics are effective for both nociceptive and neuropathic pain. It is necessary to examine the efficacy in all analgesics. Because placebo cannot be administered in clinical practice, the analgesic effects may be completely or partially due to the placebo effects. Traumatic pain usually decreases over time. Taking this into account, if pain is relieved after administration, we have to decide that the analgesics are effective. If one analgesic is determined to be ineffective, we have to choose to discontinue, increase the dose, or switch to another analgesic.

The efficacy of antihyperlipidemic drugs is easily determined with the blood test. However, the efficacy of analgesics is determined by a patient's statements alone. If the patient's statements are ambiguous, the analgesic effects cannot be determined. In that case, the medication should be discontinued to determine whether the pain changes or not. Pain sometimes deteriorates after discontinuation of ineffective analgesics. There is no clear term for this phenomenon, however, I call it reverse placebo effects. If pain deteriorates after discontinuation of analgesics, the pain exacerbation may be due to completely or partially reverse placebo effects. Taking this into account, if pain deteriorates after discontinuation of analgesics, we have to decide that the analgesics are effective.

Changing NSAIDs to acetaminophen can reduce the possibility of reverse placebo effects. Acetaminophen is analgesic for nociceptive pain as with NSAIDs. They are presumed to be ineffective for neuropathic pain. In general, acetaminophen is less analgesic than NSAIDs. However, acetaminophen has far fewer adverse effects than NSAIDs. Therefore, if the analgesic effects of NSAIDs and acetaminophen are comparable, acetaminophen should be administered. In this case, both medicines may be equally effective or equally ineffective. In both cases, high-risk NSAIDs should not be administered if their analgesic effects are comparable.

3 When NSAIDs are administered for more than 2 weeks, it is necessary to confirm that NSAIDs are more analgesic than acetaminophen.

One study shows no difference in the analgesic effects between NSAIDs and acetaminophen at the latest 2 weeks after injury or surgery.<sup>1</sup> High-risk NSAIDs should not be administered if the analgesic effects of both medicines are comparable. Taken together, if NSAIDs are administered for more than 2 weeks, it is necessary to confirm that NSAIDs are more analgesic than acetaminophen. If NSAIDs are more analgesic than acetaminophen, prolonged administration of NSAIDs is acceptable, knowing that they have more adverse effects than acetaminophen. If the analgesic effects of both medicines are comparable, acetaminophen should be administered. If acetaminophen is more analgesic than NSAIDs, naturally, acetaminophen should be administered.

#### 4 Conclusion

When analgesics are administered, the analgesic effects should be examined. When NSAIDs are administered for more than 2 weeks, it is necessary to confirm that NSAIDs are more analgesic than acetaminophen. These are a matter of course. It is true that this article does not have novelty and scientific rigor. However, my two recommendations are often not performed in clinical practice. The two recommendations reduce the administration of NSAIDs dramatically, reducing the aforementioned adverse effects due to NSAIDs dramatically. It is of sufficient international importance to point out that what should be performed is often not performed.

#### CONFLICT OF INTEREST

My child is an employee of Nippon Zoki Pharmaceutical Co., Ltd..

#### REFERENCES

1. Toda K. No difference in analgesic effects between non-steroidal anti-inflammatory drugs and acetaminophen at the latest two weeks after injury or surgery. *J Clin Invest Stud.* 2018;1(1):1000104.