

Friday February 17, 2012

Chronic pain patients warned on drug withdrawal

About 150,000 Australians with chronic pain who have a script for a painkiller containing dextropropoxyphene will have to seek alternative pain relief from next month* after lobbying by anaesthetists and pain medicine specialists to have the drug removed.

The removal of four painkillers containing dextropropoxyphene – Capadex, Di-Gesic, Doloxene and Paradex – which are often used for relief from low back pain and caesarean surgery, will be discussed at this weekend’s meeting of anaesthetists and pain medicine specialists in Tasmania.

Australian and New Zealand College of Anaesthetists (ANZCA) Fellow, Dr Gavin Pattullo, said the Therapeutic Goods Administration (TGA) gave notice last December it would cancel the painkillers from the Australian Register of Therapeutic Goods from March 1.

“Tasmania took the lead on this issue by voluntarily removing this drug from use in public hospitals last year,” Dr Pattullo said.

“This move was a result of lobbying by members of the ANZCA Faculty of Pain Medicine in Tasmania who were concerned for the safety of the Tasmanian public.

“That the TGA has subsequently followed in a similar manner for the rest of Australia validates the actions of the Tasmanian pain management specialists and demonstrates the positive role played in protecting the public by ANZCA members.”

Dr Pattullo said the drug had been found in high doses to affect the electrical activity of the heart leading to serious arrhythmias and, in some cases, deaths from accidental overdoses.

“Patients will be better off without this drug because there are safer alternatives that won’t cause them harm that are just as effective, if not more effective,” he said.

“Multiple scientific studies have shown dextropropoxyphene offers limited pain relief and is no better than paracetamol, which has a better safety profile.”

Dr Pattullo said about 150,000 Australians had filled a script for a seven-day course of dextropropoxyphene in 2011.

“These patients should consult with their doctors on suitable alternatives to the drug before the end of this month,” he said.

***Update: The TGA issued an update on February 17 that the ban on Di-Gesic and Doloxene had been stalled pending an appeal by their sponsor. This does not affect Capadex and Paradex which will be banned from March 1. For more information go to www.tga.gov.au.**

Improved pain relief and recovery for knee replacement surgery

Knee replacement surgery is one of the most commonly performed major operations in western countries and new techniques are able to improve recovery and reduce the length and cost of hospital stays for patients and taxpayers.

Dr Gavin Pattullo will discuss the most effective ways in which local anaesthetics, provided as either a nerve block or as an injection around the knee joint, can be combined with other pain relief medicines to optimise recovery following knee replacement surgery.

Drawing on his learning from a recent two-year fellowship in Canada, Dr Pattullo said: "These nerve blocks are increasingly being performed with pin-point accuracy and greater safety through the anaesthetist using a small portable ultrasound machine to guide the injecting needle toward the target nerve.

"Improvements in recovery are keenly sought by doctors in order to deliver improved pain relief for patients and to deliver maximal value for the taxpayer dollar."

Hydrogen peroxide – a party trick from the past?

Hydrogen peroxide solutions are found in almost every operating theatre and have been used for more than 150 years by many surgical specialties, often with little knowledge of their inherent risk.

Launceston anaesthetist, Dr Chris Reid, will discuss a review article he recently had published in the *Anaesthesia and Intensive Care* journal which concludes the use of hydrogen peroxide as an antiseptic has no direct benefit, but is often associated with significant risk and its use should be reconsidered.

Hydrogen peroxide is used in hospital settings most commonly for cleaning wounds, but also in orthopaedic surgery to prepare the bony bed for cementing new joints.

"When you use hydrogen peroxide in theatre to wash out wounds, it can fizz up inside blood vessels, then the bubbles collect in the heart which can stop your heart working," Dr Reid said.

"It's a really toxic substance to tissues and cells and, looking at the evidence, it's not very effective in killing bugs. You're probably better off using saline or adding soap to a solution to clean out a wound, which is much safer and without the risk of an oxygen embolism."

- **For more information about the meeting, or to speak to any of the speakers, please contact ANZCA Media Manager Meaghan Shaw on (03) 8517 5303, 0408 259 369 or mshaw@anzca.edu.au.**