

Naproxen Best NSAID for Heart Disease Patients

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In a study published in the May 2009 issue of *Circulation: Cardiovascular Quality and Outcomes*, Dr. Wayne Ray and colleagues (Vanderbilt University School of Medicine) examined the safety of a number of nonsteroidal anti-inflammatory drugs (NSAIDs) via a retrospective study of patients with heart disease. Cardiovascular safety of NSAIDs is a highly controversial topic due to past research suggesting an increased cardiovascular risk with some older traditional NSAIDs and new COX-2 inhibitors.

The group found that **naproxen or anaprox (Aleve) appears to have better cardiovascular safety than diclofenac (Feldene), ibuprofen (Advil), and higher doses of rofecoxib (Vioxx) and celecoxib (Celebrex)**. In the current study, **naproxen was found to have a lower incidence rate ratio for serious cardiovascular disease than non-NSAID users**.

More specifically, **patients who took diclofenac had a 50% greater risk of MI, stroke, or death** from any cause compared with naproxen users. Diclofenac has been the reference drug in several COX-2 inhibitor outcome trials and this excess risk was present for low to moderate doses as well as higher doses. For users of **ibuprofen**, there was a **25% increased risk for MI, stroke, or death** compared to naproxen users. Relative to NSAID users, results showed an increased risk for serious coronary heart disease from short-term use of ibuprofen, diclofenac, celecoxib, and rofecoxib, but not for naproxen.

These findings have important clinical implications and break new ground by focusing on patients with known cardiovascular disease. Since arthritis and cardiovascular disease frequently coexist, it is important to be aware of the safety of NSAIDs in this high-risk subgroup. Ray cautions that, **“diclofenac use should be limited in this group while naproxen appears relatively safe, but non-NSAID analgesic strategies might also be considered.”**¹ The study group also notes that “these results do not apply to the early post-discharge period, during which NSAID use may be particularly hazardous.”²

In commenting on this study, Dr. Daniel Solomon (Brigham and Women’s Hospital) notes that more information will be available once the PRECISION trial results are released in 2011 (study comparing celecoxib, naproxen and ibuprofen in patients with moderate cardiovascular risk), but for now, it is important that providers “rely on well-done pharmacoepidemiology to help answer questions about the relative safety of various analgesic strategies in patient subgroups.”³

To read the full article from *Circulation: Cardiovascular Quality and Outcomes*, please click here: <http://circoutcomes.ahajournals.org/cgi/content/full/2/3/155>

¹ Hughes, Sue. “Naproxen best NSAID for heart-disease patients,” theheart.org, May 28, 2009.

² Ibid.

³ Ibid.