

OTC: Taking the Pain Out of Choosing a Pain Reliever

By Heather Buschman, PhD | December 21, 2016

Whether it's thanks to back problems, a sports injury, accident or something else, approximately 100 million Americans are living with chronic pain. That's almost twice as many as those with diabetes, heart disease or cancer combined. Pain relief usually starts in the local drug store, where options range from the standard (Tylenol) to the seemingly bizarre (a device that shocks your skin). What will actually do the most good and the least harm?

According to [Joseph Ma, PharmD](#), associate professor of clinical pharmacy at Skaggs School of Pharmacy and Pharmaceutical Sciences at UC San Diego, there are a few questions to ask yourself when choosing an over-the-counter method of pain relief or deciding when it's time to see a doctor:



- **Where is the pain?**

If your pain affects only a small part of your

body, a topical pain-relieving cream, such as Bengay, might help. An advantage of topical creams is that they are localized — you don't have to take a pill that affects your entire body and may cause unwanted side effects, such as an upset stomach. But if your whole back hurts, a messy cream probably isn't realistic. So in that case, particularly for short-term relief, Ma said you'll probably want to reach for acetaminophen (Tylenol) or a non-steroidal anti-inflammatory drug, or NSAID. NSAIDs include aspirin (e.g., Bayer, Excedrin), ibuprofen (e.g., Advil, Motrin) and naproxen (e.g., Aleve).

- **What's causing it?**

NSAIDs usually work well when pain is caused by inflammation — for example, when

your muscles are sore after running your first 5K. Acetaminophen eases pain, but doesn't dampen inflammation.

- **How bad is the pain?**

If the pain is a nuisance, but not terrible, and you are looking for a non-drug option, icing or heating might do the trick. Ma said distraction methods could also be worth a try for mild pain. While there isn't a lot of hard evidence that they work, some of his patients anecdotally report improvement after doing yoga and meditation, or using transcutaneous electrical nerve stimulation (TENS). With TENS, you strap a small, battery-powered machine to the painful site or a pressure point such as your wrist. Electrodes send small electrical shocks through your skin. Some experts hypothesize TENS may work for some people because it blocks normal pain signals or produces endorphins that block pain perception. Ma said that electrical shocks may simply keep you from thinking about your mild pain all the time.

- **How long have you had the pain? Is it getting worse?**

NSAIDs work for most people, at least in the short-term, Ma said. So if you've been taking them and perhaps using an ice pack or heating pad consistently for one week and don't see improvement, it's time to see a doctor. Most over-the-counter pain medications can relieve pain as a symptom, but they may not be getting to the underlying cause. You'll need to see a doctor to find the true source of your pain.

- **What underlying health conditions do you have?**

Acetaminophen can harm your liver — especially in large doses or in combination with alcohol. NSAIDs can upset your stomach, so it's best to take them with food. NSAIDs can also be hard on the kidneys. Ma said older adults and anyone with kidney problems should be wary of taking too many NSAIDs, and may want to talk to their doctors sooner rather than later. The same is true for people taking blood thinners, since some NSAIDs can affect platelet function. Ma also cautioned that acetaminophen and NSAIDs are found in many products not solely intended for pain relief, so people may be taking more than they realize. For example, acetaminophen is commonly found in sleep aids and cough syrups.

- **What has worked for you in the past?**

Take a moment to think about what's worked in the past and start there, Ma said. Shiny and new isn't necessarily better. If ibuprofen helped after you had your wisdom teeth out a few years ago, chances are it'll help again.

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