



Accurate Clinic

2401 Veterans Memorial Blvd. Suite 16
Kenner, LA 70062 - 4799
Phone: 504.472.6130 Fax: 504.472.6128

www.AccurateClinic.com

What are topical medications?

Topical medications are medications that are introduced into the body thru the skin and come in the form of creams, ointments and patches. The patches offer the advantage over creams and ointments in their ability to provide time release of the medication, allowing the medication to be delivered to the tissues over hours and sometimes days.

What non-opiate topical medications are useful in pain management?

There are three types of prescription topical medications currently in common use: Lidoderm patches, nonsteroidal (NSAIDs) and capsaicin. While they tend to be expensive, they are usually covered by insurance, medicare and medicaid. Also, the manufacturers usually offer programs that provide these medications free to those who cannot afford them. To investigate these programs, ask your physician or check out the web site of the manufacturer.

Lidoderm patches

Lidoderm patches provide a time-release form of the anesthetic, lidocaine, commonly used by dentists and physicians when they inject patients to numb someone prior to minor surgical procedures or placing stitches. Unlike these injections, the Lidoderm patches are painless and can provide a local numbing effect for up to 12 hours. They can be placed on the neck, back or over joints to provide local relief of pain to that area. Their effectiveness varies from individual to individual but many patients achieve significant benefit from their use.

The only adverse reactions or side effects generally experienced are skin irritation sometimes from the adhesive on the patch and from allergic reactions to the medication itself. If one is allergic to the injectable form of lidocaine, one should not attempt to use the patch form as an allergic reaction would also be expected.

Topical NSAIDs (Flector Patches, Voltaren Gel, Pennsaid)

Topical NSAIDs and their oral counterparts, ibuprofen, naproxen and prescription NSAIDs, offer essentially the same benefits: reduction in pain and inflammation. And, **like their oral counterparts, the topical preparations require daily use up to 4 times a day for 2-4 weeks before their full benefits may be appreciated.** The topicals have the advantage of significantly less risk of the side effects typical for NSAIDs: stomach upset, ulcers, bleeding, kidney injury and slight increased risk of stroke or heart attack.

The disadvantage of the topicals include the inconvenience of topical application and the benefits are restricted to the area of application making them less practical for those with multiple joints requiring treatment.



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The three prescription topical NSAIDs are all the same medication: Voltaren (diclofenac). **Flector patches** have the advantage of needing to be applied only every 12 hours but have a tendency to fall off when a patient is active or sweaty.

Voltaren Gel is well tolerated, odorless and effective but requires applications 4 times/day.

Like Voltaren Gel, **Pennsaid** also requires 4x/day dosing but is more concentrated than Voltaren Gel and has a second ingredient, DMSO, which provides enhanced penetration of the medicine through the skin. Each of these three preparations are effective although patients often have individual preferences.

The only adverse reactions or side effects generally experienced with the topical NSAIDs are dry skin, rash and skin irritation sometimes from the adhesive on the patches. If one is allergic to aspirin, ibuprofen or other nonsteroidal anti-inflammatories like aleve, one should not attempt to use the topicals because an allergic reaction would also be expected.

Topical Capsaicin (Capsagel, Salonpas-Hot, Zostrix)

This medication is used to treat minor aches and pains of the muscles/joints (e.g., arthritis, backache, sprains). It may also be used to treat nerve pain. Capsaicin works by decreasing a certain natural substance in your body (substance P) that helps pass pain signals to the brain. A prescription version is also available for treating shingles (Herpes Zoster) pain.

Arnica

Arnica gel probably improves symptoms as effectively as a gel containing non-steroidal anti-inflammatory drug.

Comfrey

Comfrey extract gel probably improves pain.

DMSO (and methylsulfonylmethane or MSM)

The studies on MSM are conflicting with some studies supporting benefit, others not. It is believed that MSM may reduce the pain and inflammation with knee arthritis. When MSM and glucosamine were combined one study showed a significant difference in swelling, joint function, walking time, joint mobility and overall functional ability.