

SMMGP SPECIAL INTEREST TRAINING DAY

*Problematic use of over-the-counter (OTC)
medication: prevalence, evidence and how to
manage people with these problems*

Wednesday 11th May 2011



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Director and GP

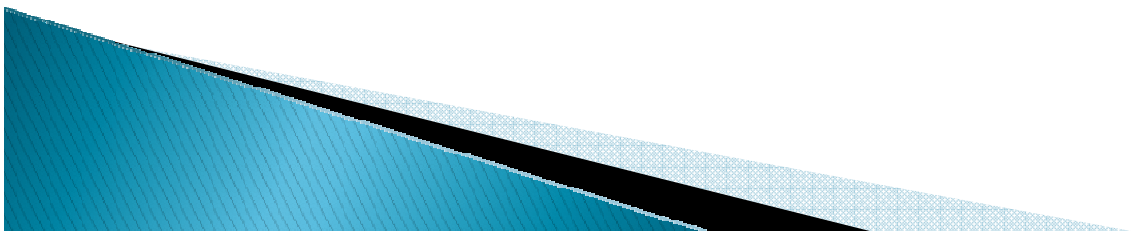
Size of problem

- ▶ Worldwide problem
- ▶ Unknown, signs are increasing – 30,000
- ▶ All Party Parliamentary Drugs Misuse Group- APPDMG 2007-2008
- ▶ No reliable figures – DH trying to address now
- ▶ Scotland study 5/week potential misusers
- ▶ Not much written about it
- ▶ On-line pharmacies



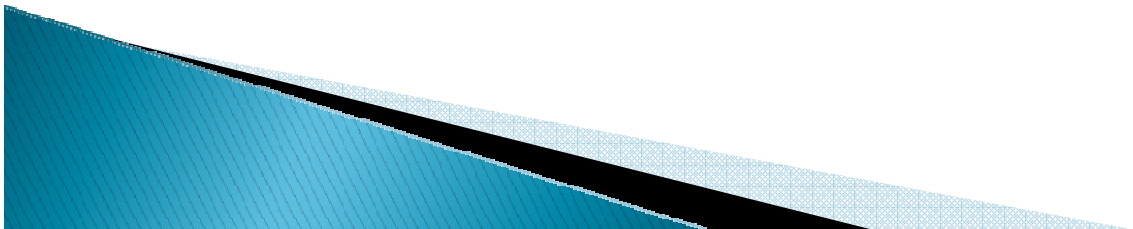
Who takes?

- ▶ Older adults
- ▶ More 'middle aged' women
- ▶ 'Respectable addiction'
 - Adolescents
 - Healthcare professionals



Why take?

- ▶ Self-medication
 - To treat minor ailment, don't want to bother doctor
- ▶ Start as prescription drug
 - e.g. post-op pain
- ▶ Top up prescription drug
 - e.g. not enough for chronic pain
- ▶ Back and forth between the two





- Why increasing?

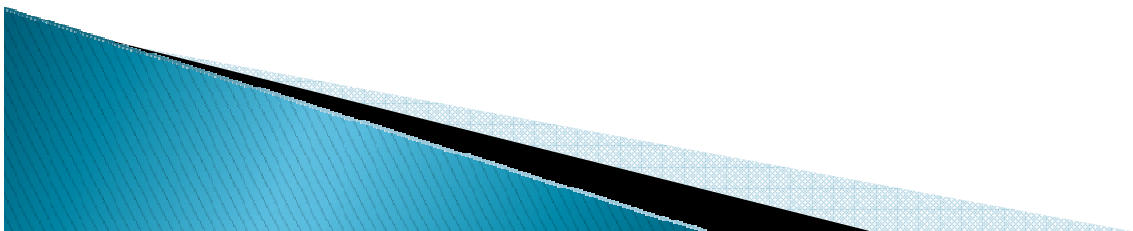
The screenshot shows a Windows Internet Explorer browser window displaying the Amazon.co.uk website. The search results for "nurofen plus" are shown, listing three items:

- 1. Nurofen Plus Tablets 32 by Nurofen (Personal Care)**
Buy new: £4.46 | 8 Used & new from £4.39
In stock
★★★★★ (1)
Health & Beauty: [See all 6 items](#)
- 2. Nurofen Plus Tablets 24 by Nurofen (Personal Care)**
Buy new: £5.26 | 3 Used & new from £5.21
In stock
Health & Beauty: [See all 6 items](#)
- 3. Paramol Tablets 32 by Paramol (Personal Care)**
Buy new: £5.29 | 4 Used & new from £5.19
In stock
Health & Beauty: [See all 6 items](#)

The browser's address bar shows the URL: http://www.amazon.co.uk/s/ref=nb_ss?url=search-alias%3Daps&field-keywords=nurofen+plus. The taskbar at the bottom shows the Start button and several open applications: Amazon.co.uk, Complete guide for th..., How To Cook Meth ak..., Network, and Microsoft PowerPoint...

What do people take?

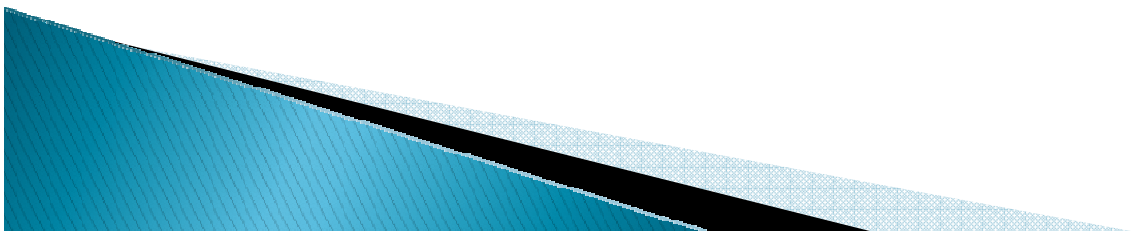
- ▶ Codeine based products
- ▶ Decongestants
- ▶ Cough mixtures
- ▶ Antihistamines
- ▶ Laxatives
- ▶ Combinations: Nytol (diphenhydramine and antihistamine)
- ▶ Caffeine and weight loss stimulants



1. Codeine containing OTC drugs used / misused

- ▶ Codeine (42 prods) and dihydrocodeine (4) are analgesics and cough suppressants
- ▶ Containing in many OTC medicines
 - Codeine 42 products, 36 with paracetamol, 2 ibuprofen, 4 aspirin
 - Dihydrocodeine 4 products, all with paracetamol
- ▶ Maximum dose:
 - Codeine 25.6mg / dose (12.8mg / tablet)
 - DHC 14.92mg / dose (7.46mg /tablet)
- ▶ Some also in combination with:
 - Caffeine

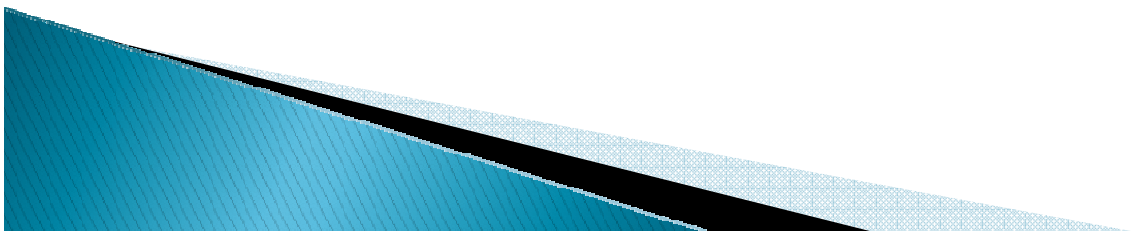
NB: The body converts codeine into morphine so its effects are similar, if less intense.





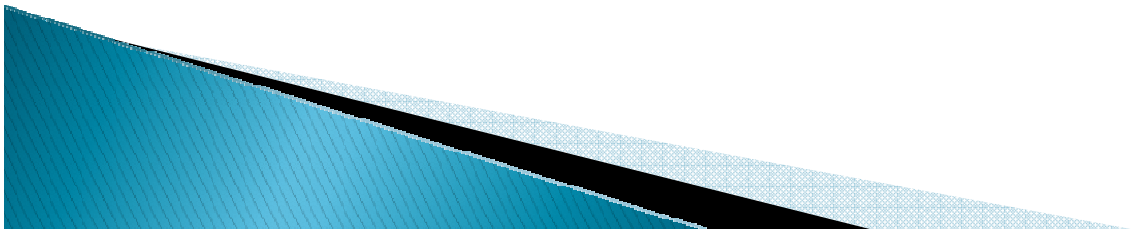
Common OTC drugs used / misused

- ▶ **Solpadeine Plus**: combination of codeine (8mg) paracetamol (500mg) and caffeine (30mg)
- ▶ **Nurofen Plus**: combination of codeine (12.8mg) and ibuprofen (200mg)
- ▶ **Generic co-codamol**: codeine (8mg) and paracetamol (500mg)
- ▶ **Syndol**: codeine (10mg) paracetamol (450mg) caffeine (30mg) and doxylamine succinate (5mg)
- ▶ **Feminax Express tablet**: codeine (8mg) paracetamol (500mg) and ibuprofen lysine (342mg equivalent to 200mg ibuprofen)
Used to contain Hyoscine Hydrobromide (0.1mg) and Caffeine (50mg)



Will making codeine more difficult to access help the problem ?

- ▶ Guidelines by the MHRA on codeine prescribing 3.9.09
 - Indications– Short term only
 - Acute/moderate pain–not relieved by paracetamol/ibuprofen/aspirin alone
- ▶ Patient information leaflets– PIL and Labels
 - Short term only, up to 3 days
 - Can cause addiction and /or overuse headaches
- ▶ Pack Size– maximum 32, paracetamol 16
- ▶ Advertisements
 - Can cause addiction, for 3 days only
 - Removal of any references to pain killing power or strength





Managing your pain effectively using “Over the Counter” (OTC) Medicines

We all know what pain is. Sometimes we hardly notice it. However, other times it is so severe that we ask a doctor or pharmacist for help. Sometimes we take a painkiller (analgesic) to lessen the pain until it goes away.

Short-term (acute) pain relief

Most of us have had occasional headaches, muscle or joint pain, or in women, period pain. Short-term pain does not last long and tells the body that something is wrong.

Short-term pain can be treated by painkillers that can be bought “over the counter” (OTC) either from a pharmacy or other shop, such as a supermarket or corner shop.

Long-term pain relief

Long-term pain, sometime called chronic or persistent pain, is present everyday or comes and goes. Some people with long-term illnesses need to take painkillers everyday to manage this.

You may find it helpful to read ‘*Understanding and Managing Pain*’ published by the British Pain Society which can be downloaded from

www.britishpainsociety.org

2. Pseudoephedrine and ephedrine

- ▶ Used for illicit manufacture of methylamphetamine
- ▶ Limited number of packs / transaction to one
- ▶ Major pharmacy chain show 26% drop in number of tablets sold between July 2008 – August 2009



The Layman's Guide to making Methamphetamine

The screenshot shows the homepage of homemadedrugs.net, a website for recreational drug information. The header features the site's name in a stylized font and a search bar. A navigation menu includes links for Home, Who We Are, Contact, Join Now!, and Members. The main content area is divided into two columns. The left column features a large article titled "How To Cook Meth aka The Laymans Guide To Making Methamphetamine" with a sub-header "Stimulants" and an "Add comments" link. Below the title is a small image of a round-bottom flask on a stand. The article text describes methamphetamine and its common names. The right column contains sections for "TESTIMONIALS" and "CATEGORIES", with a testimonial from Gladice K, UK and category links for "2cb" and "Alcohol".

homemadedrugs.net
Recreational Drug Information SuperSite

Type and hit enter to search

Home Who We Are Contact Join Now! Members

How To Cook Meth aka The Laymans Guide To Making Methamphetamine

Stimulants [Add comments](#)



How To Cook Meth aka The Laymans Guide To Making Methamphetamine is a comprehensive collection of documents to on how to make Methamphetamine.

Methamphetamine (also known as speed, meth, crystal, crank, and sometimes confusingly called ice) is a chemical widely known for its *stimulant* properties on the human body.

It is frequently confused with other drugs that share similar symptoms, including [amphetamine](#), [4-methyl-aminorex](#), [ephedrine](#), [caffeine](#), and other chemicals, both legal and illegal.

This guide features multiple documents detailing the three most common and

TESTIMONIALS

"At first I couldn't understand how you were charging for information - I took the gamble and joined, I'm super glad I did because I've learned more off this site than all the books I've purchased put together!"
Gladice K, UK

CATEGORIES

[2cb](#)

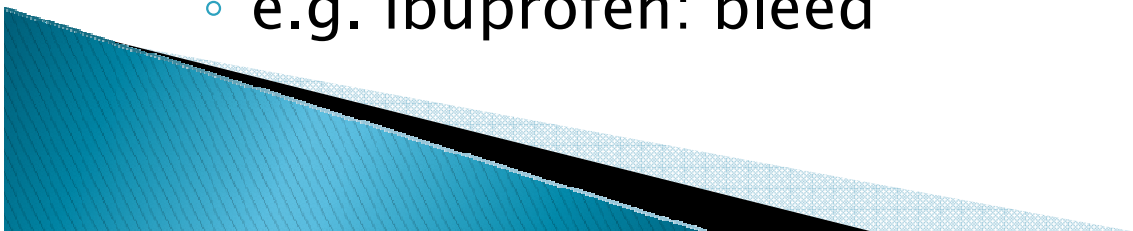
[Alcohol](#)

OTC medications in young people in US

- ▶ Caffeine stimulants
- ▶ Antihistamines like Benadryl containing diphenhydramine
- ▶ Decongestants like Sudafed containing pseudoephedrine
- ▶ Weight loss supplements containing ma haung or ephedra
- ▶ Sleep aids containing doxylamine, like Unisom, etc.
- ▶ Motion sickness treatments with dimenhydrinates, like Dramamine
- ▶ Teens think abusing common OTC medicines is safer than using illicit drugs
- ▶ 10 percent of teens (2.4 million) report abusing cough medicine to get high

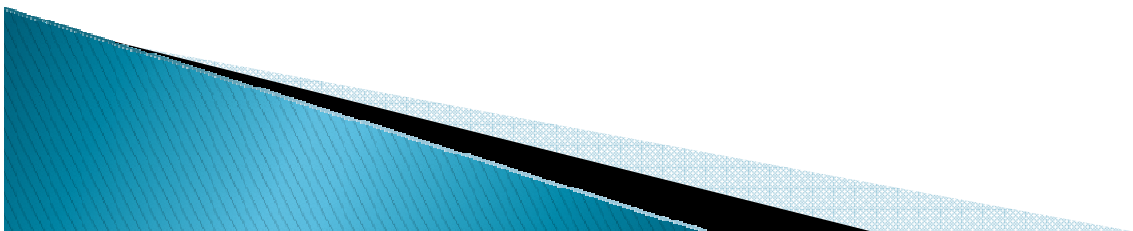
Potential harms

- ▶ Psychological – shame
 - hidden problem, unable to get help
- ▶ Effect of dependency on self, family and others
 - e.g. depression, loss of work
- ▶ Lapse into another addiction
 - e.g. alcohol, opioids
- ▶ Physical consequences of active ingredient
 - e.g. codeine, constipation
- ▶ Physical consequences of another ingredient
 - e.g. ibuprofen: bleed



Co-morbidity

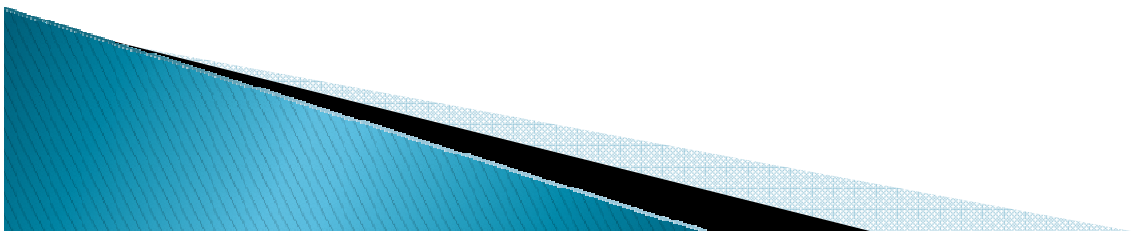
- ▶ Can have dependency along with mental health problems
- ▶ Self-medication psychological or physical
- ▶ Between 10-25% say start opiates cause of pain
- ▶ Prevalence chronic pain is 30-50% in treated substance users, compared with 10-15% of the general population



What happens when go for help?

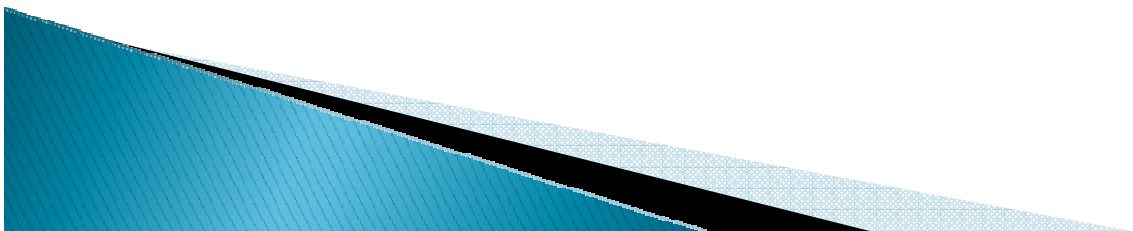
- ▶ Over Count Study

- those patients who approached their GPs saying that they felt they had a problem didn't get the help and support they required



Why getting help difficult to get?

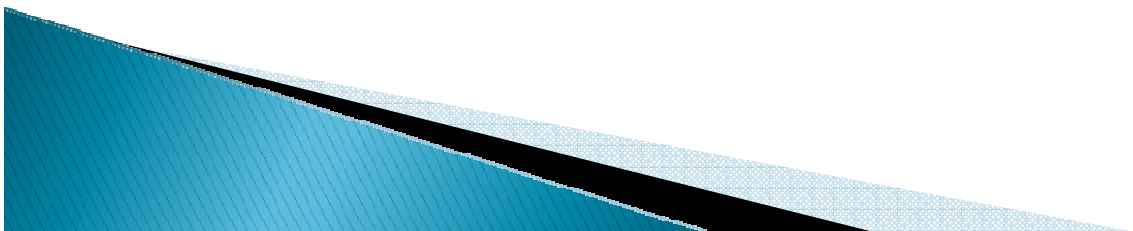
- ▶ Poorly recognised problem by clinicians and patients
- ▶ Misunderstood and hidden problem
- ▶ Lack training and guidance



What can we offer in Primary Care?

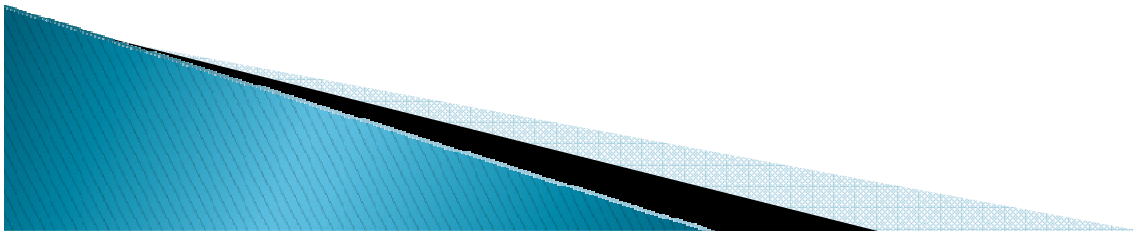
Three parts:

1. Psychological support
2. Prescribing
3. Groups – local or internet based



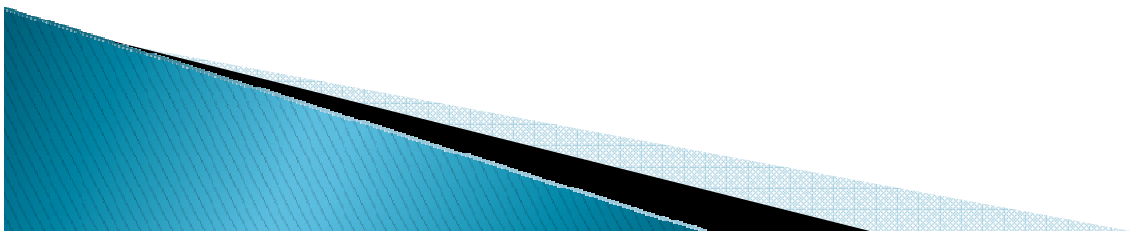
1. Psychological support

- ▶ CBT
- ▶ Motivational interviewing
- ▶ Behavioural change
- ▶ International Treatment Effectiveness Project (ITEP)



Preparation

- ▶ List benefits and adverse things that get from using
- ▶ Keep drug diary of use for 1-2 weeks
- ▶ Engage with support
- ▶ Explain tolerance



2. Prescribing

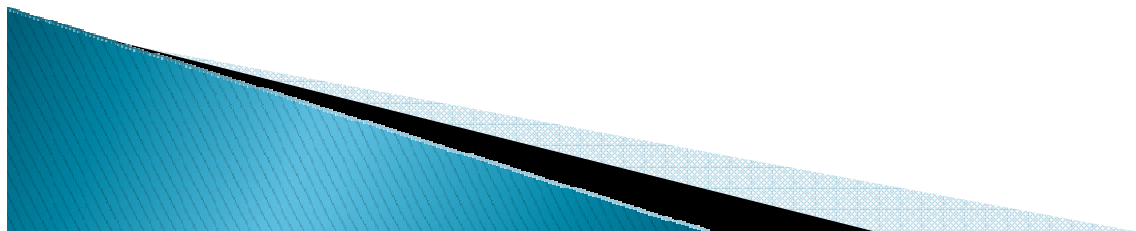
- ▶ Methadone
- ▶ Buprenorphine
- ▶ Dihydrocodeine
- ▶ Codeine
- ▶ Morphine (MST, MXL)



2. Equivalents

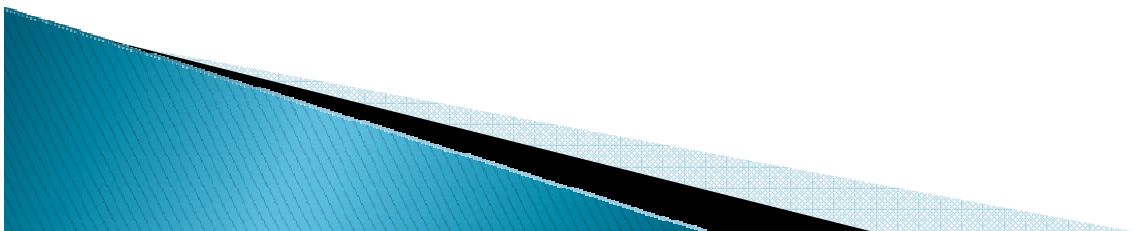
- ▶ Not exact, need to titrate

DRUG	EQUIV 10mg METHADONE
Buprenorphine	= 2-4mg?
Dihydrocodeine	= 60-120mg (in 2 doses)
Codeine	= 40-120mg (divided 2)
Morphine (MST, MXL)	= 60-90 mg



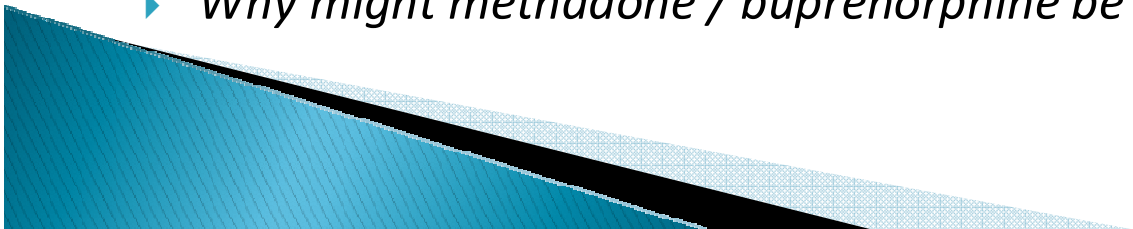
Prescribing plan

- ▶ Detoxification or maintenance
- ▶ Same principles:
 - Titrate until steady
 - Reduce at patient speed
- ▶ Support same time



Success of different drugs used for detoxification

- ▶ Dihydrocodeine and codeine more effective?
- ▶ Survey on 'Overcount'
 - Success rate with methadone / buprenorphine around the 26% mark i.e. 3/4 of people who try or are given this method, fail within the initial 4-6 weeks
 - Structured gradual Withdrawal Programme, based on the actual OTC product which they have been misusing, the success rate rises to over 80%, i.e. 4 out of 5 people succeed in quitting their habit
- ▶ All programmes dependant on:
 - length of time that the person has had the addiction
 - daily dose
- ▶ *Why might methadone / buprenorphine be less successful?*



3. Support Groups

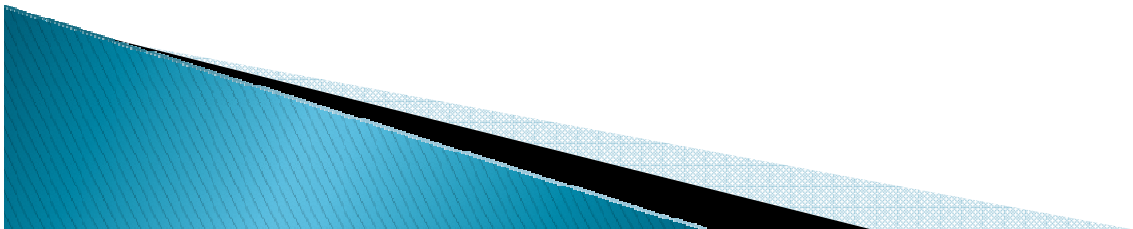
- ▶ Internet based

- Codeine-free codeinefree.me.uk

- Overcount

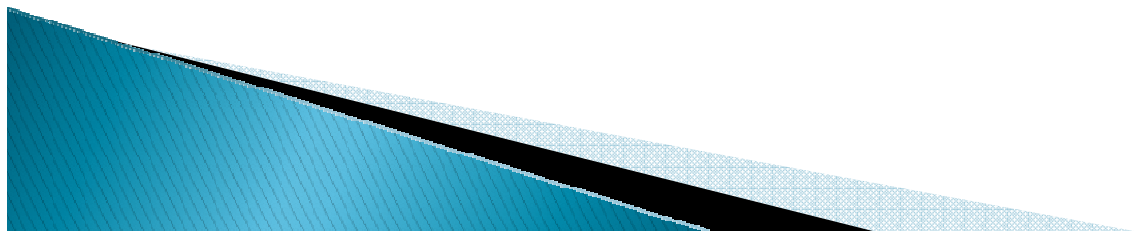
- myweb.tiscali.co.uk/overcount/index.htm

- ▶ Local groups



Conclusions

- ▶ Unrecognised problem, size unknown but increasing
- ▶ Evidence leaves scope for further research
- ▶ Little guidance and training
- ▶ But many things can do to help
- ▶ Don't forget: psychological help, prescribing and group support
- ▶ And detox if part of the process not the end
- ▶ Important GPs, Pharmacists and all health care professionals are educated about this problem
- ▶ Need for most help and services for people who have problematic OTC use



Thank you
Case studies post coffee
break

chrishelen.ford@virgin.net

www.smmgp.org.uk

