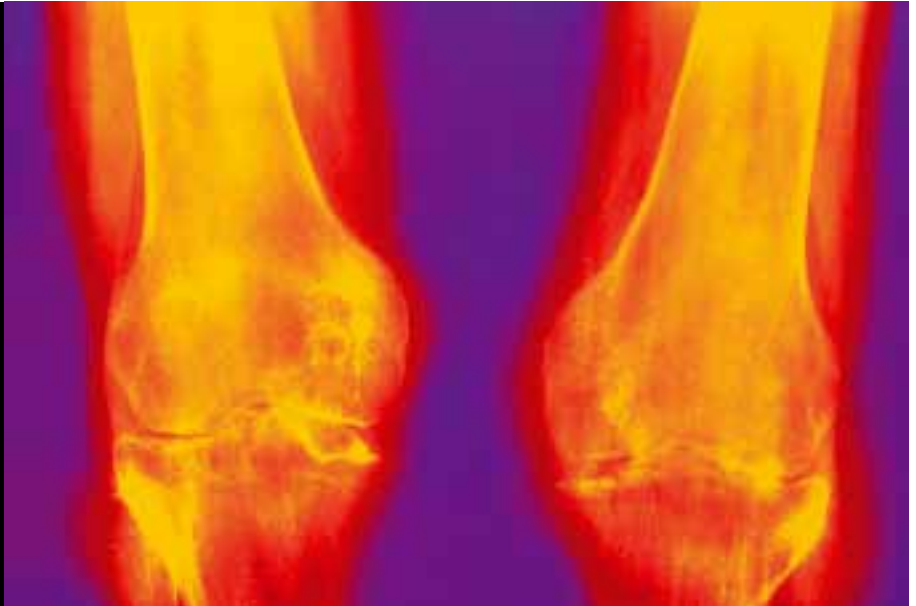


# Diclofenac

*Diclofenac reduces inflammation of the joints by lowering prostaglandin levels*



## GENERIC AND PROPRIETARY NAMES

- Diclofenac.
- Voltarol.
- Voltarol Rapid.
- Voltarol Retard.
- Diclomax SR.
- Diclomax Retard.
- Motifene.
- There are also other brands of modified release or combined formulation diclofenac.

## ACTION

- Inhibits an enzyme needed for prostaglandin synthesis resulting in decreased levels.

## CLASSIFICATION

- Non-steroidal anti-inflammatory drug (NSAID).

## INDICATIONS

- Pain and inflammation in rheumatic disease, musculoskeletal disorders, acute gout and following surgery.

## CONTRAINDICATIONS

- Porphyria.
- Active peptic ulceration.
- Hypersensitivity including hypersensitivity to other NSAIDs or aspirin.

## CAUTIONS

- Severe renal disease.
- Severe hepatic disease.
- History of peptic ulceration.
- Breastfeeding.
- Older people.
- Coagulation problems.

## SIDE-EFFECTS

- Gastrointestinal problems including ulceration.
- Hypersensitivity reactions.
- Headache.
- Dizziness.
- Depression.
- Drowsiness.
- Sleeping problems.
- Hearing disturbance.
- Photosensitivity.
- Haematuria.
- Fluid retention.
- Raised blood pressure.
- Papillary necrosis.
- Hepatic damage.
- Alveolitis.
- Pulmonary eosinophilia.
- Pancreatitis.
- A recent study (Hippisley-Cox, 2005) has suggested an increased risk of myocardial infarction.

## INTERACTIONS

- Increased risk of renal impairment with ACE inhibitors.
- Increased risk of bleeding with some antidepressants or anticoagulant medications.
- The possible enhancement of phenytoin.
- May reduce excretion of methotrexate, baclofen, digoxin and lithium.

## ADMINISTRATION

- Oral – tablets, dispersible tablets or capsules.
- Injection.
- Suppositories.
- Gel.

## PATIENT TEACHING

- Onset of pain relief is about one hour depending on route of administration.
- Full anti-inflammatory effect may take up to three weeks.
- Take oral preparations with food and keep alcohol consumption low to decrease risk of stomach irritation.
- If using as a long-term treatment for arthritis, consult the prescribing professional before stopping it.
- Do not take any other NSAIDs.

## NURSING CONSIDERATIONS

- Evaluate therapeutic response by assessing pain, joint stiffness, joint swelling and mobility.
- Assess any worsening of asthma in appropriate patients.
- Regular full dosage has both lasting analgesic and anti-inflammatory effects, making it useful for continuous pain associated with inflammation.

## REFERENCES

Henry, J. A. (ed) (2004) *The British Medical Association New Guide to Medicines and Drugs*. London: Dorling Kindersley.

Hippisley-Cox, J. (2005) Risk of myocardial infarction in patients taking cyclo-oxygenase-2 inhibitors or conventional non-steroidal anti-inflammatory drugs. *British Medical Journal*; 330: 1366.

Mehta, D.K. et al (eds) (2005) *British National Formulary*. London: BMA/Royal Pharmaceutical Society of Great Britain.

Nurses should refer to manufacturer's summary of product characteristics and to appropriate local guidelines