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IBUPROFEN FOAM DRESSINGS FOR WOUND PAIN POTENTIAL AS SUBSTITUTE FOR ORAL NSAIDS TO REDUCE SYSTEMIC SIDE EFFECTS

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Aim: Half of the patients suffering from painful leg ulcers use oral pain killers, mainly NSAIDs or opioids. NNTs for oral NSAIDs and opioids are about 3-5. NSAIDs cause serious side effects like GI-bleeds with yearly frequencies of about 1%.

The Ibuprofen foam is the only available wound dressing containing an analgesic (Ibuprofen). It causes local pain relief only, as systemically absorbed ibuprofen is not detectable. The aim was to estimate the ibuprofen foam's potential to reduce the need for oral pain killers (avoid their systemic side effects).

Methods: A pain relief score of at least 50% of the maximum is a validated, clinically meaningful outcome; the proportion of patients with this score was determined in two controlled ibuprofen foam trials (973 patients) which contained data on pain relief.

Results: Overall, two-thirds of Ibuprofen foam treated patients reported pain relief of at least 50% compared to one-third of those treated with moist-wound-healing dressings, giving NNTs for Ibuprofen foam of 3-5.

Conclusion: Local wound pain treatment with Ibuprofen foam dressing appears to provide pain relief of the same order as oral NSAIDs or opioids. Therefore, hypothetically, one third of the patients taking oral NSAIDs/opioids for wound pain could profit from Ibuprofen foam treatment. In an ulcer population of 600.000 subjects (France) this roughly corresponds to 50.000 patients. Assuming that half use NSAIDs, approximately 250 GI-bleeds yearly could be avoided as well as the serious side effects attributable to opioids.