

OHG Standard

Setting the *standard* in Occupational Medicine

April 2005

Occupational Health Group is a service offered to the business community of North Alabama by Decatur General Hospital and Huntsville Hospital Systems

Allergies and Antihistamines

by Joseph Rea, M.D.

With the coming of Spring comes warmth, flowers, possibly romance, and, oh yes, the return of outdoor allergies. With that, we would like to address that topic along with mention of the typical countermeasure against these allergies: antihistamines.

Generally termed "hay fever", seasonal Spring allergies are brought by wind-borne tree pollens. The Summer and Autumn version of such allergies is due to pollens from grass and weeds. Exposure to these materials leads to the typical clinical picture of sneezing, itching, watery eyes, runny nose and, sometimes, headache and irritability.

Antihistamines are a broad class of medicine which work by inhibiting histamine, a natural substance found within our bodies which causes these typical allergic symptoms. There are literally dozens of different over-the-counter antihistamines and many prescription brands. And, they all act in the same way.

Antihistamines also find their way into many over-the-counter cold medicines. Between this use and their role in seasonal allergy, antihistamines may be the most commonly used class of medicine in our society. They are heavily advertised. We are bombarded by commercials almost as much as by the pollen itself. On the whole, antihistamines do an excellent job. They do, however, hold some disadvantages. Their common use and the ease in purchasing them can mask some of the downside.

The chief problem with antihistamines is drowsiness. Even the newer "non-sedating" preparations such as the popular Claritin and Allegra have had occasional reports of dizziness and drowsiness. Any activity requiring attention such as learning a new skill in school or at work can be impacted by the sedation effect. Safety can be a serious issue. It is generally agreed that antihistamines play a role in automobile accidents. For example, there have been studies showing that drivers on antihistamines tend to do more wobbling back and forth across the white dividing line on the highway. Antihistamines may play a role in other accidents, too, such as those occurring at home or in the workplace. When on antihistamines it is good policy not to operate heavy machinery or dangerous equipment nor to work at heights because of the drowsiness feature.

There are other issues with use of these medications. Rarely, side effects can occur, some serious like irregular heartbeat, shortness of breath, and seizure. If any of this were to occur, people would have to seek medical attention immediately. Sometimes, antihistamines will interact adversely with prescription medicines people may already be taking. Antihistamines can also worsen pre-existing medical problems like glaucoma, asthma, or an enlarged prostate. The effects of antihistamines can be exaggerated in certain groups such as young children or the elderly. It is generally a good idea to not take antihistamines (or other medicines, for that matter) when pregnant or when breast-feeding unless the benefits greatly outweigh potential risks.

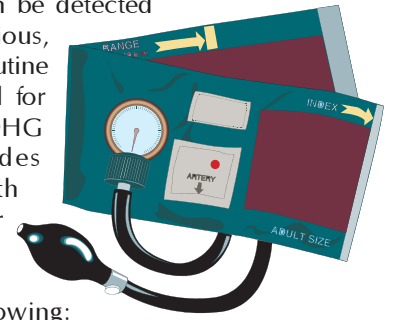
All of this underscores the importance of understanding this class of medicine and how to use them. Reading the package label and the directions carefully along with talking to your pharmacist or doctor can help. It is reasonable to take the minimal dose necessary for symptom relief. When taking other medicines it is important to consider potential unwanted interactions. Timing is important. For example, if you're planning some outdoor activity and the pollen count is high, you would want to consider taking the medicine an hour before you plan to be outdoors.

Antihistamines are widely used and can be quite helpful if used appropriately. With a little understanding of the action and risks, this medication class can serve as a reliable and very welcome aid as allergy season approaches.

Routine Health Screenings are Key to Early Detection

by Jennifer Geist, Wellness Coordinator

Like your car, your body needs preventive maintenance to keep it "well tuned" for a long, healthy life. Problems such as high blood pressure or diabetes can be detected early before they become serious, and more expensive to treat. Routine health screenings are essential for early detection of diseases. OHG Wellness Services provides comprehensive on-site health screenings to employers on our HealthMobile van.



Our screenings include the following:

- **Comprehensive Metabolic Panel** - analyzes kidney and liver function, electrolytes, calcium levels and blood sugar.
- **Lipid Panel** - analyzes triglycerides, total cholesterol, HDL cholesterol, and LDL cholesterol. This is an excellent screening for heart disease.
- **Complete Blood Count (CBC) with Differential** - analyzes red blood cells, white blood cells and platelets. CBC is a screening test that can identify and differentiate between such conditions as infection, anemia, leukemia or bleeding disorders.
- **Urinalysis** - detects abnormalities in the urine such as blood, protein, bacteria and sugar.
- **Blood Pressure and Resting Pulse**
- **Height, Weight and Body Mass Index**
- **Body Composition Analysis** - bio-impedance method of analyzing body composition is used to interpret percentage of body fat, lean body mass, and basal metabolic rate.
- **Vision Screening** - analyzes near and far vision, depth perception and color perception.
- **Hearing Screening** – detects hearing losses.
- **Pulmonary Function Test** - measures total lung capacity. This test can indicate problems such as emphysema or asthma.

In addition to routine health screenings, our good health habits are vital for preventing illness. Be physically active. Eat a healthy diet filled with fruits, vegetables, whole grains, legumes, low-fat dairy products and lean meats. Maintain a healthy body weight.

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Should I Continue Using My Anti-Inflammatory Drugs?

by James F. Gauthier, M.D., MPH

The general public as well as physicians, nurses, and others in the healthcare field often feel, that the "latest is the greatest". That the newest products are the most advanced, effective, and the safest. However, this is not always true. Another common misperception is that over-the-counter medications are completely safe and without side effects. We as prescribers, health advisers and consumers are getting an education with regard to these commonly held beliefs with the controversy surrounding the drugs known as nonsteroidal anti-inflammatory drugs that go by the acronym NSAIDs.

These drugs are available both over-the-counter and by prescription. They are the most used drugs for various aches and pains. There are dozens of them going by trade names such as Mobic, Celebrex, Naprosyn, Orudis and Daypro. You may know some of them by their generic names such as ibuprofen, ketoprofen and naproxen.

In 1999 Vioxx and Celebrex were introduced. With the introduction of these two drugs a new category of NSAIDs was created, namely COX-2 inhibitors. COX is an acronym for "cyclooxygenase", an enzyme found naturally in different forms in the body. Anti-inflammatories such as aspirin and ibuprofen block both the COX-1 enzyme (which protects the stomach lining from possible bleeding) and the COX-2 enzyme (which causes inflammation).

Aspirin's beneficial effects occur by blocking the COX-2 enzyme thereby preventing inflammation. Unfortunately it also blocks the COX-1 enzyme, preventing it from doing its job of protecting the stomach lining. The newer NSAIDs namely Vioxx, Bextra and Celebrex, block only the COX-2 enzyme, the enzyme responsible for inflammation. Because it does not block the COX-1 enzyme, the enzyme is able to function normally theoretically making the stomach lining less vulnerable to bleeding.

Let's take a look at the fallout resulting from the controversy surrounding the COX-2 inhibitors (Vioxx, Bextra, and Celebrex). Under pressure from the FDA, Merck voluntarily pulled Vioxx off the market last September. Merck did this because of studies that showed that individuals taking the drug were at increased risk of heart attack and stroke. There are experts who feel that Merck, the manufacturer of Vioxx, knew of these risks and failed to notify the FDA and warn prescribers and patients. These risks, to a greater or lesser extent appear to be present not only with Vioxx, but with all the COX-2 inhibitors, and may be a class effect of all the NSAIDs.

From the very start, COX-2 inhibitors were marketed as having an advantage over aspirin and other time-tested pain medications such as ibuprofen. These drugs became almost instant sensations as "super aspirins" with sales that rose into the billions of dollars annually. However, Vioxx and its COX-2 relatives are NOT "super" in other ways. Some recent studies question their value in avoiding stomach bleeding. In fact the FDA has cautioned that those claims were never proved. Other studies indicate that they do not relieve pain any better than aspirin. COX-2 drugs also carry super-sized price tags. A daily dose may cost about \$2.50, compared to a few cents for aspirin and a little more for other alternatives.

Many physicians forget that COX-2 drugs were meant for a handful of patients with a high risk of stomach bleeding. Many of these high-risk patients were people with arthritis who needed to take an anti-inflammatory medication for pain and inflammation for months. Instead, the perception is that these drugs were tantamount to "super aspirin" made COX-2 drugs amazingly popular.

About 25 million patients with no high risk of stomach bleeding were on COX-2 inhibitors by 2002 according to a study published in January by scientists at Stanford University and the University of Chicago. Those

patients got one very bad deal: First, there was no advantage of improved pain relief from taking the drugs. Second, patients paid more! Those without prescription drug insurance paid out of their own pockets. And third, they unknowingly exposed themselves to the risk of heart attacks and strokes.

How did it happen? Did patients who saw advertisements for these supposedly amazing new medicines badger their doctors for prescriptions? Did pharmaceutical representatives over exaggerate the benefits of COX-2 inhibitors? Did doctors get too enthusiastic and over prescribed the new medicines? The answer is probably, "all of the above," and more.

So here we are, it is April 2005 and first Vioxx and now Bextra have been pulled off the market. The FDA has cast a shadow on all anti-inflammatory drugs by ordering that 19 other popular prescription drugs carry tough new warnings that they too, may increase the risk of heart attacks and strokes. The warnings, in black boxes on product information literature are likely to cause confusion because they don't provide guidance for prescribers and patients on which of these prescription drugs is a safer choice. Over-the-counter products will also carry stronger reminders to take only low doses for a few days at a time to avoid the same risks of higher dose prescription NSAIDs.

One question that is now going through the minds of millions is "Should I keep taking my anti-inflammatory drug"? Most experts seem to advise the following:

Consider both the risks and benefits of taking any NSAID. Like all medical treatment decisions, an individual needs to consider both the risks and benefits. Each patient should meet with his or her physician to determine the best course of action based on an individual's risk factors, treatment needs, and previous experience with NSAIDs.

The risk of NSAID induced heart attack and stroke is small. Information provided by the FDA for consumer's states that patients, who were prescribed Vioxx, should be aware that the risk that an individual patient may suffer a heart attack or stroke related to Vioxx is very small.¹ The risk is probably even smaller with most other NSAIDs.

Prolonged use of NSAIDs should be avoided when possible. With regard to the side effects of naproxen (e.g. Aleve, Naprosyn), the FDA announced that preliminary results from a long-term study suggest that long-term use of naproxen may increase cardiovascular risk compared to a placebo. The FDA also cautioned patients to take Aleve and other over-the-counter NSAIDs only in the recommended dosages and not for more than 10 days in a row.²

Celebrex is not for everybody needing an NSAID. When should Celebrex, a drug with sales of \$3.3 billion last year, and now the nation's only available COX-2 inhibitor, be used? It should be prescribed only for patients not helped by other painkillers, or who are at particularly high risk for stomach problems. For chronic pain, such as arthritis, many experts recommend starting patients on naproxen, along with a stomach protecting drug if necessary. Alternatively, many doctors recommend low dose Tylenol for daily use for those with osteoarthritis with NSAIDs being reserved for "flare ups."

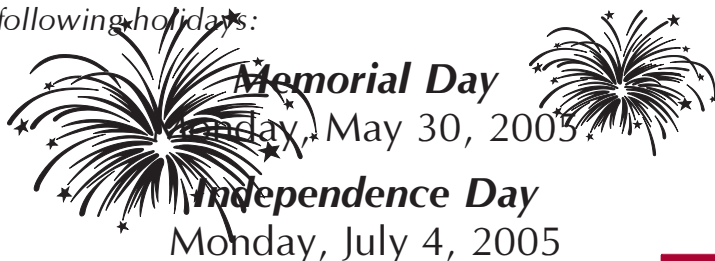
More is known of drugs that are available in generic form. The reality is that it may take years of use on millions of people before many of a drug's side effects are apparent. Look how long it took for epidemiologists and medical scientists to prove that cigarette smoking caused cancer! A drug with a history and a proven track record may be better for your health and your bank account than a medicine that has just hit the market with much fanfare.

U.S. Food and Drug Administration. "Vioxx (rofecoxib) Questions and Answers." September 30, 2004

2 U.S. Food and Drug Administration. "Public Health Advisory: Non-Steroidal Anti-Inflammatory Drug Products (NSAIDs)." December 23, 2004

Holiday Closings

All OHG clinics will be closed in observance of the following holidays:



Detection _____ from page 1

Be tobacco free. Avoid drugs and excess alcohol. Manage stress. Practice safety.

Maintaining these health habits will give you the best chance of staying healthy and active throughout your life. Have your recommended screenings to detect illnesses early. Call OHG Wellness Services for more information about our on-site health screenings at 256-922-6699.

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