A New Pain Relief Option For Dentists; A Tablet Combining Acetaminophen And Ibuprofen

Dentists have a lot to consider when prescribing the most suitable analgesics for their patients' acute pain after a procedure. They want to relieve the patient of pain quickly and effectively, avoiding adverse events and opioids while providing a simple dosing schedule to improve patient compliance. Ibuprofen and acetaminophen are often prescribed independently or in combination as an alternative to opioids. For some patients, acetaminophen and ibuprofen used on their own do not always reduce the pain as much as desired, so they are often recommended in combination. Since both analgesics have different dosing schedules, it can confuse patients.

Combogesic[®] was recently launched in Canada, and it may be the solution that dentists have been waiting for all along. Combogesic[®] contains a fixed-dose of acetaminophen 325 mg and ibuprofen 97.5 mg, and although it is not a prescription drug, it is kept behind the counter and can be requested from the pharmacist. The most compliant way to take any drug is once a day, as infrequently as possible. The second most compliant way is to take it two times—once when the patient's eyes open and once when they close.

Combogesic[®]'s dosing schedule is simplified to 1 to 3 tablets² every 6 hours, making it easier for most patients to manage. The fixed-dose combination of acetaminophen and ibuprofen has been shown to provide superior¹, more profound and more rapid meaningful pain relief¹ when evaluated against comparable doses of acetaminophen or ibuprofen alone. Moreover, it achieved this without compromising tolerability. In a study led by Dr. Stephen Daniels, a trial of 408 adults between the ages of 18 and 60 who were experiencing moderate to severe pain after surgical removal of at least 2 impacted third molars were given either Combogesic[®], acetaminophen 975 mg, ibuprofen 292.5 mg or a placebo. Not only did the patients who received Combogesic[®] experience significantly less pain within the first 6 hours, but they also reported less pain throughout the 48-hour study period. The onset of pain relief was also shown to be significantly faster with Combogesic[®] compared to the individual

analgesics. After the first dose, patients reported

patients reported feeling significantly less pain intensity on the visually analog scale (VAS) for Combogesic®



compared to the individual analgesics or the placebo. There was also an approximate 50% reduction in the need for a rescue analgesic for patients taking Combogesic® compared to those taking a single analgesic. For example, 23.9% of patients on Combogesic® required supplementary pain relief with oxycodone, compared to 53.2% of the acetaminophen patients and 43.2% of the ibuprofen patients. There was no statistical difference in adverse events reported by the patients on Combogesic® compared to those taking acetaminophen, ibuprofen, or placebo.

Effective non-opioid analgesic options are of the utmost importance in a dental clinic. Faster and improved pain relief from a fixed-dose combination of acetaminophen and ibuprofen with a manageable dosing schedule and a wellestablished safety profile benefit the patient and reassure the dentist.

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 Daniels SE, et al. Analgesic efficacy of an acetaminophen/ibuprofen fixed-dose combination in moderate to severe postoperative dental pain: a randomized, double-blind, parallel group, placebo-controlled trial. Clin Ther. 2018;40(10):1765-76.
Three tablets may be taken at subsequent doses if pain or fever persists, on the advice of a physician.

References: