

The Telegraph

Ibuprofen and aspirin linked to irregular heart rhythm

Commonly used painkillers including ibuprofen increase the risk of developing an irregular heart rhythm by up to 40 per cent, according to a new study.



People who had recently begun using non-steroidal anti-inflammatory drugs were found to have a 40 per cent higher chance of flutter. Photo: Paul Grover

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The anti-inflammatories, which are widely available in supermarkets and pharmacies, have been previously linked to a higher chance of heart attacks and strokes.

But a new study has shown for the first time a connection between the drugs and atrial fibrillation, also known as irregular heart rhythm or flutter.

The condition is more common than heart failure and stroke, and is linked to a higher long-term risk of developing both.

Experts examined the records of 32,602 patients with flutter between 1999 and 2009 and compared each to ten randomly selected control patients.

People who had recently begun using non-steroidal anti-inflammatory drugs (NSAIDs), which include ibuprofen and aspirin, were found to have a 40 per cent higher chance of flutter, equivalent to about four extra cases per year per 1000 people.

[Painkillers like ibuprofen 'increase second heart attack risk' \(http://www.telegraph.co.uk/health/healthnews/8502726/Painkillers-like-ibuprofen-increase-second-heart-attack-risk.html\)](http://www.telegraph.co.uk/health/healthnews/8502726/Painkillers-like-ibuprofen-increase-second-heart-attack-risk.html)

[Ibuprofen link to heart attack \(http://www.telegraph.co.uk/health/healthnews/3319809/Ibuprofen-link-to-heart-attack-risk.html\)](http://www.telegraph.co.uk/health/healthnews/3319809/Ibuprofen-link-to-heart-attack-risk.html)

Newer forms of the drugs known as selective COX-2 inhibitors, were associated with a 70 per cent higher risk in new users, or seven more cases per 1000 people each year.

Older people were found to be most at risk from the drugs, and patients with chronic kidney disease or rheumatoid arthritis were particularly vulnerable when starting cox-2 inhibitors.

The threat was lower in patients who had been using the drugs for longer than two months because people who were susceptible were likely to experience symptoms early on, researchers said.

The research, published today in the British Medical Journal (<http://www.bmj.com/cgi/doi/10.1136/bmj.d3450>), was carried out using Danish medical records at Aarhus University Hospital in Denmark.

The researchers claimed the study "adds evidence that atrial fibrillation or flutter needs to be added to the cardiovascular risks under consideration when prescribing NSAIDs."

Prof Henrik Toft Sørensen, who led the study, said heart disease patients should not stop taking the drugs but should discuss the potential risks with their doctor.

He said: "The absolute risk is still low. It increases your risk from a very low level to a higher – but still low – level."

The team hopes to do further trials to establish which patients are most likely to experience the dangerous side effects from the drugs, he added.

In an editorial accompanying the study (<http://www.bmj.com/cgi/doi/10.1136/bmj.d2495>) Professor Jerry Gurwitz of Massachusetts Medical School in the US said doctors should be cautious when prescribing NSAIDS to older patients with a history of hypertension or heart failure.

He said the research had "important clinical and public health implications" because of the high use of the drugs and the increasing threat of flutter with advancing age.

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