

THEN & NOW: CASE STUDY

Your patients' pain relief needs may change over time

THEN: 10 YEARS AGO

Diane:
A 55-Year-Old
Woman With Early
Osteoarthritis



NOW

Diane:
A 65-Year-Old Woman
With OA And Recent Left
Knee Replacement



REASON FOR VISIT:

Complaining of finger and hand pain that has persisted for 4 weeks

VITAL STATISTICS:

Gender: female
Age: 55 years
BMI: 30 kg/m²
BP: 110/65 mm Hg

Body temperature: 98.3°F
Pulse: 75 bpm
VAS pain score: 7

REASON FOR VISIT:

Experiencing pain in right knee after returning from a vacation 1 week ago

VITAL STATISTICS:

Gender: female
Age: 65 years
BMI: 30 kg/m²
BP: 141/88 mm Hg

Body temperature: 98.2°F
Pulse: 85 bpm
VAS pain score: 7

OTHER CONSIDERATIONS:

The history and physical exam are consistent with pain caused by osteoarthritis of the right knee. Diane also had a peptic ulcer 2 years ago that was effectively treated with triple antibiotic therapy.

Q: What OTC analgesic would you have recommended?

A: No contraindications or particularly relevant warnings or clinical history; therefore any OTC analgesic: NSAIDs (ibuprofen, naproxen sodium) or TYLENOL® (acetaminophen) could be considered.

Q: Given Diane's age, high blood pressure, OA, and history of peptic ulcer disease, would you change your recommendation for an OTC analgesic that you gave her 10 years ago?

See answer on back ►

THEN & NOW: CASE STUDY ANSWER

DIANE THEN:

10 years ago, you recommended an NSAID for Diane's finger and hand pain



DIANE NOW:

A:

Diane is now over 60 and has had a stomach ulcer, both of which may increase the chance of stomach bleeding if taking an NSAID. She also has high blood pressure and ongoing OA. **TYLENOL® 8 HR Arthritis Pain** may be a good choice. **TYLENOL®** won't cause GI irritation the way naproxen sodium or even ibuprofen can, and won't increase blood pressure the way NSAIDs sometimes can.¹⁻⁶

Dosage



Use product only as directed.

TYLENOL® Regular Strength Tablet

Active ingredient: acetaminophen
325 mg (in each tablet)

DOSE AND FREQUENCY*

2 tablets every 4 to 6 hours
while symptoms last

MAXIMUM LABELED DOSE

Not to exceed 10 tablets in 24 hours, unless directed by a doctor
Total labeled daily dose: 3250 mg



Use product only as directed.



Use product only as directed.

TYLENOL® Extra Strength Caplet and Rapid Release Gels

Active ingredient: acetaminophen
500 mg (in each caplet)

DOSE AND FREQUENCY*

2 caplets every 6 hours
while symptoms last

MAXIMUM LABELED DOSE

Not to exceed 6 caplets in 24 hours, unless directed by a doctor
Total labeled daily dose: 3000 mg



Use product only as directed.

TYLENOL® 8 HR Arthritis Pain Caplet

Active ingredient: acetaminophen
650 mg (in each caplet)[†]

DOSE AND FREQUENCY*

2 bi-layer caplets every 8 hours
with water

MAXIMUM LABELED DOSE

Not to exceed 6 bi-layer caplets in 24 hours
Total labeled daily dose: 3900 mg

IMPORTANT INSTRUCTIONS for Proper Use

- Read and follow the label on all TYLENOL® products.
- Do **NOT** use with any other product containing acetaminophen.

Professional discretionary dosing

If pain or fever persists at the total labeled daily dose, healthcare professionals may exercise their discretion and **recommend up to 4000 mg/day.**[‡]

*Consult TYLENOL® Regular Strength tablet packaging for dosing children under 12 years.

†Extended release.

‡The efficacy and safety of TYLENOL® at 4000 mg/day are well established.

Visit [TylenolProfessional.com](https://www.tylenolprofessional.com) for access to helpful patient and practice resources

REFERENCES: **1.** Hoftiezer JW, O'Laughlin JC, Ivey KJ. Effects of 24 hours of aspirin, Bufferin, paracetamol and placebo on normal human gastroduodenal mucosa. *Gut*. 1982;23(8):692-697. **2.** Blot WJ, McLaughlin JK. Over the counter non-steroidal anti-inflammatory drugs and risk of gastrointestinal bleeding. *J Epidemiol Biostat*. 2000;5(2):137-142. **3.** US National Library of Medicine. Naproxen. <https://www.nlm.nih.gov/medlineplus/druginfo/meds/a681029.html>. Revised July 15, 2016. Accessed May 12, 2017. **4.** Frech EJ, Go MF. Treatment and chemoprevention of NSAID-associated gastrointestinal complications. *Ther Clin Risk Manag*. 2009;5(1):65-73. **5.** Elliott WJ. Drug interactions and drugs that affect blood pressure. *J Clin Hypertens*. 2006;8(10):731-737. **6.** Radack KL, Deck CC, Bloomfield SS. Ibuprofen interferes with the efficacy of antihypertensive drugs. *Ann Intern Med*. 1987;107:628-635.