LETTER TO THE EDITOR

Use of non-steroidal anti-inflammatory drugs for sprains in the accident and emergency department

Sir

Soft tissue injury is a common condition for the accident and emergency (A&E) department. Morbidity from these injuries can be decreased by the correct management of pain. Recently, there have been many trials suggesting the superiority of non-steroidal anti-inflammatory drugs (NSAIDs) over simple analgesics. However, some authors have demonstrated that there is no such advantage. To investigate how doctors in A&E departments currently use NSAIDs we asked 100 Casualty SHOs from 30 A&E departments how they would manage a patient with an acutely sprained ankle.

To our surprise, the commonest drug prescribed was paracetamol (43%). NSAIDs were the second commonest group of drugs used by only 17% of the respondents. The results are presented in Table 1.

Currently, there are many drug trials demonstrating the effectiveness of NSAIDs in the treatment of soft tissue injuries (Edwards *et al.*, 1984; Soave *et al.*, 1983; Bodiwala, 1982). Despite this, only a small proportion of our respondents (17%) would use NSAIDs for treatment of acute soft tissue injuries.

Such treatment is supported by two recent papers. In the first study, 166 patients were included, 48 of which had a sprained ankle (Yates *et al.*, 1984). In the second trial, over 1000 patients were included, 261 with sprains (Gara *et al.*, 1982). In neither of these trials were NSAIDs found to be superior to paracetamol.

Our questionnaire does not differentiate the severity of injury and hence the pain. Therefore, it is impossible to know whether prescribing would differ with various degrees of pain. However, one can conclude that the majority of A&E doctors use simple and cheap analgesics as first treatment for soft tissue injuries.

M. REICHL
Accident and Emergency Department
The Leicester Royal Infirmary
Leicester, England

Table 1 Answers to the question: 'Which analgesic would you prescribe to a 20-year-old female with an acutely sprained ankle?'

Paracetamol	43%
NSAID	17%
Dihydrocodeine	13%
N ₂ O	10%
Asprin	8%
Others	9%

REFERENCES

- Bodiwala G. G. (1982) Naproxoen, sodium and ibuprofen in the treatment of acute soft tissue injuries. *British Journal of Clinical Practice* **36**, 370–5.
- Edwards V., Wilson A. A. & Harwood H. F. (1984) A Multicentre comparison of Piroxicam and Indomethacin in acute soft tissue sports injuries. *Journal of Internal Medicine* **12**, 46–50.
- Gara C. de, Hedges A. & Taylor M. (1982) Assessment of analgesic drugs in soft tissue injuries presenting to an accident and emergency department—a comparison of antrafenine, paracetamol and placebo. *Post-graduate Medical Journal* **58**, 489–92.
- Soave G., Laverzzari M., Fevvati G. & Sacchetti G. (1983) Indoprofen and Pentaazocine in post-traumatic pain: a double blind parallel group comparative trial. *Journal of Internal Medicine* **11**, 354–8.
- Yates D. W., Laing G. S., Peters K. & Kumar K. (1984) Mild analgesics and the accident and emergency department—cost and safety more important than potency? *Archives of Emergency Medicine* **1**, 197–203.

Erratum

In the Letter to the Editor on 'Rectus sheath haematoma' by S. U. Rahman in *Archives of Emergency Medicine* Vol. 3, No. 4 (December 1986), an error was made on p. 256. Mr Rahman is Consultant Surgeon at Burnley General Hospital, not Blackburn as published.