



spotlight on health

Soothing Pain Through Doctor-Patient Discussions

(NAPSA)—It's easy for anyone who has ever been injured from a fall, playing sports or working around the house to say that pain "hurts." But, effectively describing how pain hurts is often more difficult. The individual experience with pain often leaves those in need of relief searching for the right words to explain how they feel.

"Patients may find it difficult and frustrating to effectively describe their pain experience when speaking with their doctor," said Zorba Paster, MD, Clinical Professor, Department of Family Medicine and Practice, University of Wisconsin-Madison. "The solution may lie in providing patients with the tools that help them categorize and organize what they are feeling in more tangible ways."

A new survey of patients with acute (short-term) pain commissioned by Ortho-McNeil Pharmaceutical, Inc., shows 64 percent of respondents felt that a tool such as a scale to rate pain would help them describe their symptoms more effectively to their doctors.

New tools to help facilitate these conversations including a pain scale and daily diary are being provided by Ortho-McNeil, maker of ULTRACET™ (37.5mg tramadol hydrochloride/325mg acetaminophen tablet). These tools allow patients to characterize and quantify their pain through a series of questions, making it easier for patients to describe and rate their pain.

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Patients can also use the scale to assess the effectiveness of any pain control medication they have been taking, including ULTRACET, which combines tramadol, a leading prescription pain reliever, and acetaminophen, the most commonly recommended nonprescription pain treatment.

The pain management survey revealed other key findings including:

- Approximately one in four Americans who have experienced acute pain feel their healthcare providers prescribe medications too quickly without asking many questions

- Approximately one in four Americans who have experienced acute pain expressed the need for improved depth of discussion with their healthcare providers about treatment options

- Approximately one in six Americans who have experienced acute pain expressed concerns regarding the depth of discussion about symptoms with their healthcare providers

You can find out more about ULTRACET and the pain scale and daily diary by visiting www.ULTRACET.com/understanding/doctor.html.

About ULTRACET

ULTRACET™ combines tramadol, a leading prescription pain reliever, with acetaminophen, the most commonly recommended nonprescription pain treatment. Single-dose dental pain studies demonstrated that the ULTRACET™ combination of tramadol and acetaminophen provides faster onset, longer duration and better pain relief over either medication alone.

ULTRACET™ is indicated for the short-term (five days or less) management of acute pain.

ULTRACET™ is a centrally acting analgesic that controls pain via different mechanisms of action than non-steroidal anti-inflammatory drugs (NSAIDs), the most commonly used pain medications. ULTRACET™ is not an NSAID, and is not associated with potentially life-threatening gastrointestinal ulcers or bleeding that can occur with NSAIDs and the newer COX-2 NSAIDs. In addition, ULTRACET™ does not compromise the efficacy of certain antihypertensive agents, while NSAIDs and COX-2 NSAIDs may. ULTRACET™ can also be prescribed in sulfa-sensitive patients. The most frequently reported side effects with ULTRACET™ were constipation, somnolence (sleepiness) and increased sweating.

ULTRACET™ should not be used concomitantly with alcohol. The use of ULTRACET™ in patients with liver disease is not recommended.

Cases of abuse and dependence on tramadol have been reported. Tramadol should not be used in opioid-dependent patients. Since tramadol can reinstitute physical dependence, ULTRACET™ is not recommended for patients with a tendency to drug or alcohol abuse, a history of drug or alcohol dependence or a history of chronic opioid use.

Patients with a history of severe, life-threatening allergic (anaphylactoid) reactions to codeine and other opioids may be at increased risk and therefore should not receive ULTRACET™.

Seizures have been reported in patients receiving tramadol. The risk of seizures is increased with doses of tramadol above the recommended range. Tramadol increases the seizure risk in patients taking certain medications (e.g., tricyclic antidepressants, selective serotonin reuptake inhibitors, opioids) and may enhance the seizure risk in patients taking MAO inhibitors, neuroleptics, or other drugs that reduce the seizure threshold or in patients with epilepsy, those with a history of seizures, or in patients with a recognized risk for seizure (such as head trauma, metabolic disorders, alcohol and drug withdrawal, CNS infections).

For more information on warnings, precautions, and additional adverse reactions that may occur, regardless of drug relationship, please see the full U.S. Prescribing Information available upon request or at www.ultracet.com or www.ortho-mcneil.com.

ULTRACET™ has been marketed in the United States by Ortho-McNeil since October 2001. Ortho-McNeil, a Johnson & Johnson company, is based in Raritan, NJ. The company markets pharmaceutical products in several therapeutic categories including infectious diseases, women's health, central nervous system and urology.