

The top-left portion of the slide features a complex, abstract graphic composed of several thin, black, overlapping lines that form various geometric shapes, including triangles and polygons, creating a sense of depth and movement.

SUPPLEMENTS AND CHRONIC PAIN – WHAT’S THE EVIDENCE?

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PROBLEMS THAT OCCUR

There is a lack of evidence for many of the supplements used

The internet is full of anecdotal evidence, but fewer scientific studies so this is based on reading around the subject to improve my knowledge and awareness.

Due to a lack of regulation, consider buying from reputable sources which have customer reviews, or even a money back guarantee

SUPPLEMENTS

Supplement	Properties	Outcome	Concerns
Turmeric	Anti-inflammatory	Lack of “good” scientific evidence Huge amount of anecdotal evidence Alternative sources suggest effective dose is around 200mg of turmeric combined with 15mg black pepper (piperine)	Side effects include: Nausea Stomach upsets Headache Rashes Yellow stools

Supplement	Properties	Outcome	Concerns
Chondroitin	Cartilage repair	Some evidence to suggest it might help with OA pain, especially in knees. Probably sufficient to improve QoL. Works with or without glucosamine. Suggested dose is 800mg – 1200mg in divided doses	Minimal side effects, but may interact with blood thinners
Gamma-linoleic acid (Evening Primrose Oil, Borage oil) – omega 6	Anti-inflammatory	Possibly improves pain. No agreement on optimal dose	Take less than 3000mg a day. Can interact with blood thinners and may cause GI side effects

Supplement	Properties	Outcome	Concerns
Omega 3 (fish oils, flaxseed, algae, hemp)	Anti-inflammatory	Little scientific evidence that it improves pain	Interact with blood thinners and immune suppressants
Vitamin D	Bone health (enables absorption of calcium and phosphate)	Little scientific evidence of reducing pain – however deficiency can cause bone pain Public health advice – everyone should take a 10microgram supplement, especially in the winter months	Do not take more than 100micrograms a day

Supplement	Properties	Outcome	Concerns
Willow Bark	Natural pain reliver, related to aspirin	Some evidence to support it's use in pain management (240mg dose)	Very similar to NSAID, tell your HCP May interfere with clotting
Devils Claw	Anti-inflammatory	Some evidence to support it's use. More trials needed	Interacts with many commonly taken medications, inc painkillers, stomach meds, blood thinners – tell your HCP

VITAMINS AND MINERALS

- ❖ Don't assume all doses to be safe
- ❖ Buy from a reputable source
- ❖ Be aware of “mega dosing”
- ❖ Avoid taking vitamins or minerals in isolation unless you've been advised to do so. A good general multivitamin and mineral supplement will rarely see you wrong
- ❖ Useful websites include: Food Standards Agency (www.food.gov.uk), and British Dietetic Association (www.bda.uk.com) who produce a series of leaflets called Food Facts on a range of topics

CONCLUSIONS

- ❖ Little scientific evidence to promote the use of many herbal remedies
- ❖ Buy from a reputable source – look for a THR mark (Traditional Herbal Remedy)
- ❖ Research the supplements using well known pages – such as the NHS, disease specific websites
- ❖ Ask a professional – local pharmacies/GP might be able to find out more information about possible interactions
- ❖ Always tell your HCP that you're taking a supplement. It's very common so don't be worried!

USEFUL WEBSITES

- ❖ www.nhs.uk/conditions/herbal-medicines
- ❖ www.bda.uk.com
- ❖ www.gov.uk/government/publications/list-of-banned-or-restricted-herbal-ingredients-for-medicinal-use/banned-and-restricted-herbal-ingredients
- ❖ <https://yellowcard.mhra.gov.uk> (for reporting adverse effects)