

# RUN!



September 2009



A newsletter for Runners!

Runners' Edge Half-Marathoners in Ottawa this May!

## Summer is a wrap. Fall is just around the corner!

Welcome to RUN! ... our new and improved newsletter.

The goal of RUN! is to bring you all that Runners Edge has to offer in an easy to read format.

So, read it online or print it off. The choice is yours. But read it!

Why, you ask?

Because I promise that in every issue of RUN! you will find at least one tidbit of information that will help you on your journey to be the best runner you can be!

Which is actually the REAL goal of RUN!

As an added bonus each issue of RUN! will feature information columns from our experts.

### FALL CLINICS

Our Fall Beginner and Intermediate Clinics begin on Tuesday, September 8th.

Details about all of our running clinics, including the complete training programs and weekly run schedules are now available on our website.

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## THE PILL PROBLEM

**The right drug can relieve pain and discomfort—or put you in a world of hurt.**

By Christie Aschwanden  
May 2009 issue of Runner's World

After winning a 24-hour track run in record time, Stephanie Ehret should have been celebrating. Instead, she was in a Phoenix emergency room, vomiting up a strange substance, which a doctor informed her was part of her digestive-tract lining. Feverish and nauseous, Ehret could barely move. "I'd never felt so bad," she says. "I was pretty sure I was dying."

A few hours later, doctors diagnosed the problem—rhabdomyolysis, a potentially fatal precursor to kidney failure. Though [dehydration](#) and overexertion contributed to Ehret's condition, doctors told her that the 12 ibuprofen [pills](#) she'd taken during the 24-hour race had pushed her kidneys into the danger zone.

When used properly, over-the-counter pain medications can be a godsend. Acetaminophen (Tylenol) can tame many pains. And non-steroidal anti-inflammatory drugs (NSAIDs) like ibuprofen, aspirin, and naproxen can reduce pain and swelling in the first few days following an acute injury like an [ankle sprain](#). The trouble comes, doctors say, when people, like Ehret, misuse these drugs. "A couple of ibuprofens really helped, so I figured more was better," Ehret says. Indeed, many runners treat anti-inflammatory drugs like "vitamin I," says pharmacologist Joe Graedon, coauthor of The People's Pharmacy book series. "They think, I'm putting my body through a lot, so I'll just dose up on ibuprofen, without appreciating how potentially dangerous this drug can be."

### Runners Beware

Runners may think that as long as they don't go overboard like Ehret, they'll be safe. But experts say the

benefits of popping even one pill before a 10-K don't outweigh the risks. NSAIDs inhibit prostaglandins, hormones that help normalize blood flow to the kidneys. Mix an NSAID with physical exertion and dehydration, and you can overwhelm your kidneys.

What's more, NSAIDs can bump up your blood pressure, and when you add this to the natural rise that occurs when you exercise, "suddenly you have two things increasing your blood pressure," Graedon says. If you already have high blood pressure, "you could have a mini stroke or a heart attack," he says. NSAIDs also block an enzyme called cyclooxygenase (COX) that normally protects the heart, and this might explain why many NSAIDs, including ibuprofen, may raise the risk of heart attack.

Some forms of COX also protect the stomach lining from digestive acids, so when an NSAID blocks this enzyme, you may experience nausea, diarrhea, intestinal bleeding, and cramps. When used during a marathon or ultra, NSAIDs also seem to boost the risk of hyponatremia, an electrolyte imbalance that can cause the brain to swell. "It's something you can die of during a race," says Martin Hoffman, M. D., director of research at the Western States Endurance Run.

Many runners believe that NSAIDs increase their pain tolerance, but studies contradict this notion. In 2005, David Nieman, Dr. P. H., director of the human performance lab at Appalachian State University in Boone, North Carolina, examined ibuprofen use at Western States. About 70 percent of the racers said they took it to help them manage the discomfort of racing. But when he measured pain and muscle soreness in these pill poppers, he found no reduction compared with nonusers. Worse, ibuprofen takers had more inflammation. "There's no good reason to use ibuprofen during a race," Nieman says. "There are too many potential negatives." Any pain and inflammation that turns up while running is not something you should medicate but a signal that it's time to

The question has been asked, "Do I, or should I, take pills for pain relief while running?"

Well, I have done some research and thank you Runners' World and Christine Aschwanden for this great article.

I personally do not take pills. I subscribe to Sport Massage and Chiropractic treatments on a regular basis.

Depending upon your budget, time, and beliefs, regular use of your Registered Massage Therapist and Doctor of Chiropractic can be the best form of medicine.

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reevaluate your training regimen, he says.

For relief during or after exercise, Hoffman recommends acetaminophen since it works via a different mechanism than NSAIDs, and the drug doesn't have the side effects associated with aspirin or ibuprofen. "It's a relatively safe drug, and it doesn't present problems with the kidney or gut," he says.

But watch the dosage. While it's safe at recommended doses, acetaminophen can be toxic to the liver, especially when mixed with [alcohol](#). "You can hit the tipping point pretty fast with acetaminophen," says Graedon. Acetaminophen overdose is the most common cause of acute liver failure in the United States, in part because the drug is found in many over-the-counter cold and allergy medicines, so it's easy to overdose if you take one of these drugs with Tylenol.

And limit the number of days you take meds. "Studies show that NSAIDs can impair the healing process for soft-tissue injuries, so you should never use them long-term for injuries," says Hoffman.

Since her ordeal, Ehret shares her experience with other racers. If she sees them downing vitamin I, she tells them about her ER visit. "That's usually enough to change their habits," she says.