

SIDE EFFECTS OF ASPIRIN & SAFER ALTERNATIVES

Aspirin is an example of a non-steroidal anti-inflammatory drug (aka NSAID) that is often used in a preventive mode against future heart attacks. Research shows that aspirin therapy does work to some extent (especially in those who have already had a heart attack). However, there is a large risk of gastrointestinal bleeding and inflammation as a result; an unfortunate trade-off.

More specifically, the typical "preventive" recommended aspirin dose is 81 mg (the amount in a baby aspirin). Unfortunately, that is NOT the dose that has been shown to be effective in reducing the risk of heart attack (or death from one). To get this benefit, patients must take ~325mg/day which is NOT a low dose and definitely plenty to put you at more significant risk for gastrointestinal bleeding.

The opportunity is that there are plenty of other anti-inflammatory choices which do not have these dangerous risks!

- A major one is **good-quality fish oil**. <http://jpp.sagepub.com/content/early/2011/06/03/0897190011406983.abstract>. As a preventive, at least 1500mg of actual Omega-3s (EPA + DHA) daily on a full stomach is recommended - ideally in divided doses. If there is a family history of cardiovascular disease, it may be possible to get fish oil prescribed by your physician.
- Also **curcumin**. <http://www.ncbi.nlm.nih.gov/pubmed/19233493> As a preventive, 500mg of Meriva curcumin twice daily is recommended.

Here are some resources that offer a different perspective (some are more clinical than others):

- Clinical data shows that in those who have never had a heart attack or stroke that aspirin can reduce the likelihood of a first heart event by 10%, but they also increase the likelihood of gastric bleeding by 30%. Clearly the benefits outweigh the costs for this group of people.
<http://well.blogs.nytimes.com/2012/01/16/daily-aspirin-is-not-for-everyone-study-suggests/>
- Preventive use of aspirin in asymptomatic atherosclerosis 'cannot be supported'
<http://www.escardio.org/congresses/esc-2009/news/Pages/Preventive-aspirin-atherosclerosis.aspx>
- Study examines major bleeding risk with low-dose aspirin use in patients with and without diabetes
http://www.eurekalert.org/pub_releases/2012-06/jaa-j-sem053112.php
- This is a tongue-in-cheek write-up <http://hsionline.com/2012/01/31/big-problems/> or this one which highlights how the use of regular aspirin can increase the risk of atrial fibrillation
<http://hsionline.com/2012/01/11/medical-myth/>

Furthermore, due to its harsh effects on the intestinal lining, aspirin can lead to intestinal permeability which impairs nutrient absorption and sets the stage for the development of food sensitivities and further inflammation. Aspirin also depletes many nutrients including melatonin (which can cause insomnia, irritable bowels, fatigue), potassium, vitamin C, folic acid, sodium, and iron.