

Talking to your healthcare professional about minor strains, sprains, and bruises

Sometimes, no matter how careful you are, injuries such as minor strains, sprains, and bruises still happen. If you do get injured, it's important to know when to seek medical treatment to reduce the risk of long-term effects. If you have any concerns about the seriousness of the injury or how to care for the injury, you should contact a healthcare professional for advice. As a rule of thumb, always seek medical attention if you hear a popping sound when your joint is injured, if you're unable to bear weight on an injured joint, or if you have severe pain.^{7,8}

The goal of your healthcare professional visit is to come away with a clear treatment plan to help you feel better. This printable guide offers some tips for making the most of your time with your healthcare professional.

Telling your healthcare professional the basics^{7,8}

Be sure to share the following information with your healthcare professional. You can jot it down right here so you don't forget:

- Where I'm injured:
- How and when my injury occurred:
- How severe my pain is (on a scale of 1-10 in which 1 means no pain and 10 means the worst imaginable pain):
- Any previous injuries to the same location:
- How often I do the activity that led to my injury:
- My average activity level:
 - Very active
 - Moderately active
 - Mostly inactive
 - Inactive
- Medication(s) I'm taking (both prescription and over-the-counter):
- Other health conditions I'm being treated for:

Diagnostic tests

Your healthcare professional may run some tests to diagnose your injury. Ask whether you need an X-ray to rule out a broken bone, magnetic resonance imaging (or MRI) to help determine the degree of injury, or any other tests.^{7,8}

Important questions to ask

Once your healthcare professional has examined your injury and conducted tests, make sure you ask the following questions:

- **For sprains^{2,8}:**
 - Should I keep the injured area immobilized? Do I need a crutch? (for ankle or leg injuries) If so, for how long?
 - When should the swelling go down?
 - Should I apply ice to my sprain? If so, for how long? How often?
 - Should I use a heating pad or hot water bottle? If so, when should I start and for how long? How often?
 - Should I keep the sprain elevated? If so, how high? For how long?
 - Should I wear a bandage? If so, for how long?
 - When can I put weight on it? (for ankle or leg injuries)
 - When can I exercise normally?
 - Are there exercises I should do to help relieve the sprain? When should I begin these exercises? How often should I do the exercises?

- **For strains^{2,8}:**

- Should I keep the injured area immobilized? For how long?
- Should I apply ice? If so, for how long? How often?
- Should I use a heating pad or hot water bottle? If so, when should I start and for how long? How often?
- How long should the pain last?
- Should I try stretching my muscle?
- Are there exercises I should do to help relieve the strain? When should I begin these exercises? How often should I do the exercises?

- **For bruises^{4,9}:**

- How long should the discoloration last?
- Should I keep my bruise covered?
- Should I apply ice? If so, for how long? How often?
- Should I keep the sprain elevated? If so, how high? For how long?
- Should I use a heating pad or hot water bottle? If so, when should I start and for how long? How often?
- Can I still exercise?

- **General:**

- How will I know if the injury worsens?
- What can I do to help prevent future injuries to the area?
- When can I return to full activity or do the activity (sports, work) that caused the injury?

My treatment plan

Finally, your healthcare professional will recommend a treatment plan, which may include a prescription or over-the-counter medicine to help relieve your pain.^{2,8} For acute (short-term) pain due to minor strains, sprains, and bruises, your healthcare professional may prescribe FLECTOR[®] Patch (diclofenac epolamine topical patch) 1.3%, a topical treatment that delivers targeted pain relief right the site of acute pain.⁶ Be sure to ask your healthcare professional how FLECTOR[®] Patch works, how often you should apply it, and what side effects you may experience.

Before using FLECTOR[®] Patch, tell your healthcare professional about the following⁶:

- Any and all other health or medical problems you may have
- All other medications (prescription and nonprescription) you are taking. Do not take other medicines without your healthcare professional's approval
- If you are pregnant or planning to become pregnant. **NSAID medicines should not be used by pregnant women late in their pregnancy**
- If you are breast-feeding

Write down the treatment plan your healthcare professional recommends so you don't forget anything. Be sure to include instructions about medications, exercises, stretches, and any other treatments.

Preventing the next injury^{2,8}

Prevention is the key to maintaining a healthy body. Once your injury is under control, it's a good idea to talk to your healthcare professional about how you can prevent a future injury. Be sure to give your healthcare professional the following information:

- Your day-to-day activities
- Your exercise routine
- Previous serious injuries or surgeries
- Medical conditions or medications that might make you prone to accident or injury

Notes:

Indications

FLECTOR[®] Patch (diclofenac epolamine topical patch) 1.3% is used for the topical treatment of acute (short-term) pain due to minor strains, sprains, and contusions (bruises).

FLECTOR[®] Patch is a nonsteroidal anti-inflammatory drug (NSAID). Use FLECTOR[®] Patch exactly as your healthcare professional told you. Do not use more. Do not use for a longer time.

Important Safety Information

- **NSAIDs may increase the chance of a heart attack or stroke that can lead to death.** This chance increases
 - With longer use of NSAID medicines
 - In people who have heart disease
- **NSAID medicines should never be used right before or after a heart surgery called “coronary artery bypass graft” (CABG)**
- **NSAID medicines can cause ulcers and bleeding in the stomach and intestines at any time during treatment. These can happen without symptoms and may cause death.** The chance of a person getting an ulcer or bleeding increases with
 - Taking blood thinning medicines or medicines called steroids
 - Longer use
 - Smoking
 - Drinking alcohol
- **Older age**
 - Having poor health

Do not use FLECTOR[®] Patch if you know you are allergic to diclofenac or have had an asthma attack, hives, or other allergic reactions when taking aspirin or another NSAID medicine.

FLECTOR[®] Patch should not be applied to broken or damaged skin due to any cause, such as cuts, burns, infected wound, or rash with oozing fluid.

Before using FLECTOR[®] Patch, tell your healthcare professional about the following:

- Any and all other health or medical problems you may have
- All other medications (prescription and nonprescription) you are taking. Do not take other medicines without your healthcare professional’s approval
- If you are pregnant or planning to become pregnant. **NSAID medicines should not be used by pregnant women late in their pregnancy**
- If you are breast-feeding

Get emergency help right away if you have any of the following symptoms: shortness of breath or trouble breathing, chest pain, weakness in one part or side of your body, slurred speech, or swelling of the face or throat. Stop using FLECTOR[®] Patch and call your healthcare professional right away if you have any of the following symptoms: nausea, more tired or weaker than usual, itching, your skin or eyes look yellow, stomach pain, flu-like symptoms, vomit blood, bowel movement contains blood or is black and sticky like tar, unusual weight gain, skin rash or blisters with fever, or swelling of the arms, legs, hands, or feet.

The most common side effects seen with FLECTOR[®] Patch were skin reactions (including itching, inflamed skin, burning) at the site of treatment, stomach discomfort or intestine problems (including nausea, altered taste, upset stomach), and nervous disorders (including headache, tingling of the skin, sleepiness).

Avoid contact of FLECTOR[®] Patch with eyes, nose, or mouth, and wash hands after applying, handling, or removing FLECTOR[®] Patch. FLECTOR[®] Patch still contains medicine even after use. Keep all FLECTOR[®] Patches out of the reach of children and pets. If a child or pet puts FLECTOR[®] Patch in their mouth, seek medical help immediately. Children should not use FLECTOR[®] Patch.

Please read the full Prescribing Information, including boxed warning. Be sure to read the complete Medication Guide for NSAIDs.

References

- 1 Rusca A, Mautone G, Sun S, Magelli M, Johnson F. Comparison of plasma pharmacokinetics of FLECTOR[®] Patch (diclofenac epolamine topical patch) 1.3% and oral Voltaren[®] (diclofenac sodium enteric-coated tablets) in healthy volunteers. Presented at: 27th Annual Scientific Meeting of the American Pain Society (APS); August 10, 2009; Tampa, FL.
- 2 What are sprains and strains? Accessed April 16, 2009. What are sprains and strains? National Institute of Arthritis and Musculoskeletal and Skin Diseases Web site. http://www.niams.nih.gov/Health_Info/Sprains_Strains/sprains_and_strains_ff.asp Published March 2005. Updated June 2009. Accessed September 2, 2009.
- 3 Sprains and strains: what's the difference? American Academy of Orthopaedic Surgeons Web site. <http://orthoinfo.aaos.org/topic.cfm?topic=A00111>. Updated October 2007. Accessed September 2, 2009.
- 4 Birrer RB, O'Connor FG. *Sports Medicine for the Primary Care Physician*. 3rd ed. New York, NY: Informa Healthcare; 2004:371–374.
- 5 Rice: rest, ice, compression, elevation. University of Iowa Hospitals and Clinics Web site. <http://www.uihealthcare.com/topics/prepareemergencies/prep4922.html>. Updated October 2006. Accessed June 30, 2009.
- 6 Flector Patch [package insert]. Piscataway, NJ: Alpharma Pharmaceuticals LLC; 2009.
- 7 Mayo Clinic staff. Sprains and strains. Mayo Clinic Web site. <http://www.mayoclinic.com/health/sprains-and-strains/DS00343/DSECTION=when-to-see-medical-advice>. Published October 2007. Accessed September 1, 2009.
- 8 National Institute of Arthritis and Musculoskeletal and Skin Diseases. *Questions & Answers about Sprains and Strains*. Bethesda, MD: NIAMS/National Institutes of Health; 2004. NIH Publication No. 04–5328.
- 9 Bruise mark treatment. Medline Plus Web site. <http://www.nlm.nih.gov/medlineplus/ency/article/002039.htm>. Updated August 27, 2009. Accessed September 2, 2009.

Disclaimer

The content of this Web site is not and should not be construed as medical advice. The content contained herein only constitutes commentary and is for educational and information purposes only. Reading this Web site, or any other interaction on this site, does not create a relationship between you and the Web site or its registered owner. As with any medical issue that may confront you in a particular situation, you should always consult a qualified healthcare professional.