

combination of factors: an increasing awareness by physicians of abuse potential and the problem of deaths associated with propoxyphene, the placing of propoxyphene in Schedule IV of the Controlled Substances Act in 1977, and growing competition from certain newer drugs such as the non-steroid anti-inflammatory agents used for arthritis.

SAFETY OF PROPOXYPHENE

Propoxyphene is structurally related to the narcotic analgesic methadone. Although its general pharmacologic properties are those of the narcotics as a group, it does not compare with them in analgesic potency. Compared with other prescription analgesics, the adverse reactions (side effects) associated with propoxyphene are mild and infrequent.

The drug abuse potential of propoxyphene was recognized as early as the late 1950's but was not a major public concern until the late 1960's and early 1970's. Chronic propoxyphene use sometimes results in physical and psychological dependence of a type similar in nature but not degree to that produced by morphine. Intravenous "street" use by drug addicts was popular in the late 1960's but waned, particularly because of its ability to cause vascular and other tissue destruction, and because of formulation changes in the product. This pattern of abuse resulted in overdose deaths that resembled those seen with heroin and methadone (for example, respiratory depression and pulmonary edema). As a