PGx Report - Pain Management

Type: Anti-inflammatory Agent, Analgesic, Antipyretic

Drug Class	Generic	Primary Mechanism Involved	Other Mechanisms Involved	Used As Directed	May Have Decreased Efficacy	May Have Increased Toxicity		
The Nonsteroidal Antiinflammatory Drugs (NSAIDs)								
Acetic acid derivatives	<u>Nabumetone</u>	CYP1A2	CYP2C19, CYP3A4					
Acetic acid derivatives	<u>Indomethacin</u>	CYP2C9	CYP2C19					
	<u>Meloxicam</u>	CYP2C9	CYP1A2, CYP3A4, CYP3A5					
Enolic acid (Oxicam)	<u>Piroxicam</u>	CYP2C9	CYP3A4, CYP3A5					
derivatives	<u>Tenoxicam</u>	CYP2C9						
	<u>Lornoxicam</u>	CYP2C9						
	<u>Etoricoxib</u>	CYP3A4	CYP3A5, CYP2C9, CYP2D6, CYP1A2	Ø				
Selective COX-2 inhibitors (Coxibs)	<u>Parecoxib</u>	CYP2C9	CYP3A4, CYP3A5	Ø				
(COXID3)	<u>Celecoxib</u>	CYP2C9	CYP2C19	Ø				
	<u>Ibuprofen</u>	CYP2C9	CYP2C19	Ø				
	<u>Flurbiprofen</u>	CYP2C9		Ø				
Donale also a sid destructions	Ketoprofen	CYP3A4	CYP2C9, CYP3A5	Ø				
Propionic acid derivatives	<u>Fenoprofen</u>	CYP2C9	UGT2B7	%				
	<u>Vicoprofen</u>	CYP2D6	CYP3A4					
	<u>Naproxen</u>	CYP2C9	CYP1A2	Ø				
Anthranilic acid derivatives (Fenamates)	Mefenamic acid	CYP2C9						

PGx Report - Pain Management

Type: Opioid

Drug Class	Generic	Primary Mechanism Involved	Other Mechanisms Involved	Used As Directed	May Have Decreased Efficacy	May Have Increased Toxicity		
Opium alkaloids	<u>Codeine</u>	CYP2D6	CYP3A4, CYP3A5, OPRM1					
Ethara of marchina	<u>Dihydrocodeine</u>	CYP3A4	CYP2D6, CYP3A5					
Ethers of morphine	<u>Ethylmorphine</u>	CYP2D6	CYP3A4, CYP3A5					
Semi-synthetic alkaloid	<u>Hydrocodone</u>	CYP2D6	CYP3A4, CYP3A5, OPRM1	Ø				
derivatives	<u>Oxycodone</u>	CYP3A4	CYP3A5, CYP2D6, ABCB1, COMT					
Synthetic opioids								
	<u>Alfentanyl</u>	CYP3A4	CYP3A5, ABCB1, OPRM1					
Anilidopiperidine derivatives	<u>Fentanyl</u>	CYP3A4	CYP3A5, ABCB1, OPRM1	Ø				
derivatives	<u>Sufentanil</u>	CYP3A4	CYP3A5, OPRM1	Ø				
Phenylpiperidine	<u>Meperidine</u>	CYP2B6	CYP3A4, CYP2C19, CYP3A5					
derivatives	<u>Ketobemidone</u>	CYP2C9	CYP3A4, CYP3A5					
	<u>Dextropropoxyphene</u>	CYP3A4	CYP3A5, Renal Excretion					
5.1	Levacetylmethadol	CYP3A4	CYP3A5	a				
Diphenylpropylamine derivatives	Loperamide	CYP3A4	CYP3A5	0				
	<u>Methadone</u>	CYP3A4	CYP2B6, CYP2D6, CYP3A5, ABCB1, COMT	0				
Oripavine derivatives	<u>Buprenorphine</u>	CYP3A4	CYP3A5	Ø				
Morphinan derivatives	Dextromethorphan	CYP2D6	CYP3A4, CYP3A5	Ø				
	Tramadol	CYP2D6	CYP3A4, CYP2B6, CYP3A5, OPRM1, SLC22A1, COMT	0				
Others	<u>Tapentadol</u>	CYP2C9	CYP2C19, CYP2D6	Ø				
	<u>Tilidine</u>	CYP3A4	CYP2C19, CYP3A5					
Anti-opioid	<u>Methylnaltrexone</u>	CYP2D6	CYP3A4, CYP3A5	0				

PGx Report - Pain Management

Type: Drugs Prescribed for the Treatment of Gout, Antirheumatic

Drug Class	Generic	Primary Mechanism Involved	Other Mechanisms Involved	Used As Directed	May Have Decreased Efficacy	May Have Increased Toxicity		
Drugs Prescribed for Gout								
Uricosurics	<u>Sulfinpyrazone</u>	CYP2C9	CYP3A4, CYP3A5					
Mitotic inhibitors	<u>Colchicine</u>	CYP3A4	CYP3A5					
	<u>Febuxostat</u>	CYP1A2	CYP2C9	Ø				
Xanthine oxidase inhibitors	<u>Allopurinol</u>	AOX1	Renal Excretion, HLA-B*5801	Ø				
IIIIIDICOIS	<u>Oxypurinol</u>	Renal Excretion		Ø				
Recombinant urate oxidase	Rasburicase		G6PD, CYB5R1, CYB5R2, CYB5R3, CYB5R4	0				
DMARDs	<u>Leflunomide</u>	CYP1A2		Ø				
Anti-inflammatory	<u>Tofacitinib</u>	CYP3A4	CYP2C19, CYP3A5	Ø				
	Abbreviations: D	MARDs. Disease-modifying antirhe	umatic drugs; RE, renal excretion (ur	nchanged drug).				

Additional SNPs of Importance for Pain Management

Gene	Marker	Genotype	Drug	Level of Evidence	Results
OPRM1	rs1799971	A/A	Naloxone	2B	Patients may have lower cortisol response
OPRM1	rs1799971	A/A	Morphine	2B	Pain patients may experience increased efficacy of opioids and may be less susceptible to opioid addiction, and may require a decreased dose of opioids
OPRM1	rs1799971	A/A	Alfentanil	2В	Pain patients may experience increased efficacy of opioids and may be less susceptible to opioid addiction, and may require a decreased dose of opioids
OPRM1	rs1799971	A/A	Fentanyl	2B	Pain patients may experience increased efficacy of opioids and may be less susceptible to opioid addiction, and may require a decreased dose of opioids
OPRM1	rs1799971	A/A	Tramadol	2B	Pain patients may experience increased efficacy of opioids and may be less susceptible to opioid addiction, and may require a decreased dose of opioids
OPRM1	rs1799971	A/A	Hydrocodone	3	Patients may have a decreased risk for experiencing side effects, including constipation, dry mouth or respiratory depression
COMT	rs4680	A/A	Paroxetine	3	Patients may require a lower dose