

Medication

N.B. Interestingly, this chronicle is detailing the medical side of what I was going through during the first term of my BA (Hons) degree. Although this chronicle does not explicitly detail my life as student, in parts it mentions my assignments. I had three assignments due in around the same time, this chronicle was written following the completion of my final one. I remember avoiding my personal tutor as she was the only person in my department who knew about my spinal problems at the time, and I did not want her to be concerned about my increasing pain levels. I know now, that she would have supported my stubbornness regardless of her own beliefs, even if she did suggest sounder advice, but at the time I didn't want anything to hinder my time at uni, thus I told nobody until all my assignments had been submitted (on time).

This chronicle is quite complex so if I lose you please contact me for clarification. I am going to start from the beginning. When I finally gave in to taking medication I was given a drug cocktail in A&E which is in the chronicle titled 'Diagnosis' - that is separate to this so I'm not going to detail that. I was discharged with Cocodamol 30/500mg.

As well as Cocodamol or as an alternative I was also taking Ibuprofen which is an NSAID. When the Ibuprofen stopped working sometime between mid-late June I was prescribed Naproxen 500mg. Initially this was to help with the Costochondritis but was also found to help my cervical spine so I stayed on it.

For the first month I was unaware I wasn't supposed to take it with the Ibuprofen so effectively for the entire month I was overdosing on NSAIDs. I was relatively pain free so I won't complain but I was also severely drowsy – I, in no way advocate ever doing it - it was a complete mistake and I stopped taking the Ibuprofen as soon as I was aware I wasn't supposed to.

I had been on Cocodamol 30/500mg (when needed) and Naproxen 500mg bi-daily until around October. When November's flare-up arrived I noted taking Naproxen was becoming problematic as I was getting abdominal cramps. By the end of November this ended up as a burning sensation in addition to the cramping so I went to see my GP eventually.

Before I told my GP about the Naproxen though I had seen her about the Cocodamol not being effective - and as a result I was prescribed the Amitriptyline. I was told of its nerve-blocking properties and that it would work on a different pathway of pain - everything but the fact it was an anti-depressant. As such when I read the leaflet not only was I distraught the time had come so soon to start long-term pain relief, I was now also livid I had been prescribed the one thing I really didn't want to take. I was not happy in the slightest and thus, despite the pain, they sat on my desk for 3 weeks before I did take them.

In the meantime I had consulted several health professionals who in the end managed to assure me collectively that they were not addictive and as an anti-depressant were actually pretty rubbish and therefore rarely used as such. I started them upon return from NYC early November, by the end of the month the block had built up enough for it to be effective however as it built up it was making me increasingly drowsy to the point I was sleeping near 12 hours a day so I stopped them last week so that I could complete my assignments.

I will add that whilst I was taking them, my mood was all over the place and now that I am off them despite everything else going on right now, my thoughts are in a much better place.

Seriously no idea how they are classed as an anti-depressant, they seemed to have the reverse effect on me.

Anyway, so when I eventually went to see my GP about the Naproxen (a mix of an unfortunate evening at my god-father's house and a deal with a good friend), she prescribed me Omeprazole to counteract the cramping/burning of the Naproxen. I think I took it 2-3 times before I stopped taking both on account I was aware of the ongoing damage.

It could be argued I've known deep down for weeks that I had damaged something abdominally but being that I live a state of denial and stupidity I didn't want to see any medical professional until I had my Uni assignments out of the way - as such I had to wait until this week to do so.

In my own defense, when I told my GP about other symptoms alongside the cramping she was bent on testing me from diabetes for the billionth time - I knew it wasn't that but I couldn't be bothered arguing as I didn't want to hear the truth either.

As a result, in the 2 weeks she was hoping it was diabetes, I went from bad to worse and then worse still and took myself to the walk-in center. Once I reached the point where I couldn't get the headache and abdominal pain to shift and I was vomiting several times a day - I finally sought out medical help (I had completed my group assignment by then, otherwise I probably still would not have gone).

In short, they did a urinalysis from which they prescribed me antibiotics and told me to return in 3 days if they didn't work (I knew they weren't going to work), I did however take them and went to see my GP yesterday - she is now on the right track and testing my kidney function – a blood sample was sent as well as another sample for urinalysis and she booked an urgent scan.

All medication has been stopped except the Cocodamol and I have been prescribed another antibiotic. Pain levels will probably continue to increase as the other drugs continue to filter out of my system but at this point in time I would rather any kidney damage has the best possibility of being reversed then aggravating whatever is going on any further.

Bottom line is if you are going to take NSAIDs for any amount of time make sure you take something else alongside it to prevent any damage and don't take them any longer than necessary. The less medication you can be on the better.