

Medication in chronic pain

The benefit from taking medication should always be more than any side effects you may have. Only you

- know how bad your pain is
- are able to say if your medicine is helping
- know what side effects you are having

It may take a few weeks or several trials of different medications to find the best combination for you and your pain. It may help to keep a diary of your pain and other symptoms. Side effects often become less once you have been on a medicine for a few days.

Please read the patient information sheet given with each medication. It gives more information about the medicine and any side effects.

You can discuss your pain medication with your doctor, pharmacist or pain specialist. They can give you –

- Advice on which pain medicines may help.
- Help you find the best way to take your medicines.
- Advise you on increasing your dose safely if your pain is worse and on taking less medication safely when your pain is more settled.

If your medicine is not helping or if the risks outweigh the benefits, it may be sensible to reduce and stop taking it. Please talk to your doctor, pharmacist or pain specialist first. Some pain medicines should not be stopped suddenly.

Do not share or take other peoples medication. Always advise your doctor, pharmacist or pain specialist about any other medication or products you are taking for chronic pain. This includes anything bought from the pharmacy, herbal supplements or other medicines that are not prescribed for you.

Understanding how your medications work may help you to get the best pain relief from it with the least side-effects.

FIFE PAIN MEDICINES PATIENT SAFETY PROGRAMME



Gabapentin Reduction

Patient Information Leaflet

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NHS Fife SMS text service number **07805800005** is available for people who have a hearing or speech impairment.

To find out more about accessible formats contact:
fife-UHB.EqualityandHumanRights@nhs.net
or phone **01592 729130**

Gabapentinoids includes the medications gabapentin and pregabalin

This leaflet applies to gabapentinoid use in chronic pain only

What are gabapentinoids?

Gabapentinoids are medicines which can help to manage neuropathic (nerve) pain, caused by sensitive, damaged or malfunctioning nerves. They are only recommended for neuropathic type pain.

Medication alone will not cure the pain. It cannot be predicted which patients will benefit from gabapentinoids or who may experience side effects. You should understand the possible benefits and risks of treatment. The goal of treatment is to reduce pain to improve function and quality of life.

Why reduce?

A trial reduction of gabapentinoid should be considered every 6–12 months, when prescribed for chronic pain.

A review and trial reduction can be useful to check:

- Whether nerve pain is still a problem
- Whether you are still getting benefit If it is causing any side effects

How to reduce gabapentinoids

The dose should be reduced gradually to minimise withdrawal effects and check if there is any change in your pain.

Often the dose can be reduced in reverse order to how it was increased for example;

- Gabapentin could be reduced by 300mg per week
- Pregabalin could be reduced by 75mg per week

Please follow your reduction plan. You may need a prescription for different strengths of medication.

- Do not try to reduce at stressful times or during a flare up.
- Do not make more than one medication change at the same time.

What are withdrawal symptoms?

Withdrawal symptoms may occur if you stop taking gabapentinoids suddenly.

The most common withdrawal effects are;

- Anxiety
- Difficulty sleeping
- Nausea
- Pain
- Sweating

These can occur within a day and last up to seven days. If you do get withdrawal effects then do not reduce further. Maintain the dosage that you have reduced to and wait for the withdrawal effects to stop before reducing further. You may need to reduce more slowly or by smaller amounts to manage these effects.

If withdrawal effects continue to persist then speak to your doctor, pharmacist or pain specialist.

What if my pain increases?

If your pain increases then do not reduce further. Maintain the dosage that you have reduced to.

Any increase in pain should settle within a few weeks. If it does not then speak to your doctor, pharmacist or pain specialist.

The dose may be increased slowly, to the lowest dose that controls your pain. This can be done in reverse of how it was reduced. This may be less but should not be more than your original dose.

Suggested gabapentin dose reduction plan for chronic pain

Current total daily dosage (2700mg)	Morning 900mg (3x300mg)	Afternoon 900mg (3x300mg)	Bedtime 900mg (3x300mg)
Reduce by 300mg			
(Total daily dose - 2400mg)	900mg (3x300mg)	600mg (2x300mg)	900mg (3x300mg)
Reduce by 300mg			
(Total daily dose - 2100mg)	600mg (2x300mg)	600mg (2x300mg)	900mg (3x300mg)
Reduce by 300mg			
(Total daily dose - 1800mg)	600mg (2x300mg)	600mg (2x300mg)	600mg (2x300mg)
Reduce by 300mg			
(Total daily dose - 1500mg)	600mg (2x300mg)	300mg (1x300mg)	600mg (2x300mg)
Reduce by 300mg			
(Total daily dose - 1200mg)	300mg (1x300mg)	300mg (1x300mg)	600mg (2x300mg)
Reduce by 300mg			
(Total daily dose - 900mg)	300mg (1x300mg)	300mg (1x300mg)	300mg (1x300mg)
Reduce by 300mg			
(Total daily dose - 600mg)	300mg (1x300mg)	Nil	300mg (1x300mg)
Reduce by 300mg			
(Total daily dose - 300mg)	Nil	Nil	300mg (1x300mg)
Reduce by 300mg			
(Total daily dose - 0mg)	Nil	Nil	Nil

Suggested time period for each stage is seven days.

If you do experience withdrawal effects or your pain increases then seek advice from your doctor, pharmacist or pain specialist.

Suggested pregabalin dose reduction plan for chronic pain

Current total daily dosage (600mg)	Morning 300mg (1x300mg)	Evening 300mg (1x300mg)
Reduce by 75mg		
(Total daily dose - 525mg)	225mg (1x150mg + 1x75mg)	300mg (1x300mg)
Reduce by 75mg		
(Total daily dose - 450mg)	225mg (1x150mg + 1x75mg)	225mg (1x150mg + 1x75mg)
Reduce by 75mg		
(Total daily dose - 375mg)	150mg (1x150mg)	225mg (1x150mg + 1x75mg)
Reduce by 75mg		
(Total daily dose - 300mg)	150mg (1x150mg)	150mg (1x150mg)
Reduce by 75mg		
(Total daily dose - 225mg)	75mg (1x75mg)	150mg (1x150mg)
Reduce by 75mg		
(Total daily dose - 150mg)	75mg (1x75mg)	75mg (1x75mg)
Reduce by 75mg		
(Total daily dose - 75mg)	0mg (Nil)	75mg (1x75mg)
Reduce by 75mg		
(Total daily dose - 0mg)	0mg (Nil)	0mg (Nil)

Suggested time period for each stage is seven days.

If you do experience withdrawal effects or your pain increases then seek advice from your doctor, pharmacist or pain specialist.

Your plan for gabapentinoid dose reduction for chronic pain

This can be completed by your doctor, pharmacist or pain specialist.

Medication			
Current total daily dosage	Morning	Afternoon	Bedtime
Reduce by ____ mg every week(s)			
Total daily dose (____ mg)			
Reduce by ____ mg every week(s)			
Total daily dose (____ mg)			
Reduce by ____ mg every week(s)			
Total daily dose (____ mg)			
Reduce by ____ mg every week(s)			
Total daily dose (____ mg)			
Reduce by ____ mg every week(s)			
Total daily dose (____ mg)			
Reduce by ____ mg every week(s)			
Total daily dose (____ mg)			

Additional notes: