

## **Patient information leaflet – Gabapentin or pregabalin for pain**

### **Why have I been given this leaflet?**

This leaflet helps you decide, with your healthcare worker, if you want to try taking gabapentin or pregabalin to help with your pain. It explains what these medicines do, how well they work, and what to expect if you take them. It is important to understand the possible benefits and the risks before starting treatment.

### **What are gabapentin and pregabalin used for?**

These medicines are used to treat 'nerve pain', also known as neuropathic pain. Nerve pain can feel different from other types of pain. It may feel like burning, shooting or stabbing pain, tingling or an electric shock. These medicines work by calming the nerves that send pain signals to the brain. This can reduce how strong the pain feels, but they do not cure the cause of the pain.

### **How well do gabapentin and pregabalin work?**

These medicines don't work for everyone. For every nine people who take these medicines, only one person will see an improvement. For most people, these medicines do not make a big difference to how they feel.

### **How could gabapentin or pregabalin help?**

If the medicine does help, you will usually notice an improvement in what you can do day-to-day, not just in pain levels. Before you start taking the medicine, you and your healthcare worker should agree on a few simple goals that you would like the medicine to help you achieve. For example:

- going for a short walk each day
- sleeping better at night so you can manage daily tasks more easily
- doing hobbies or interests more often.

These goals will help you and your healthcare worker decide whether the medicine is helping.

### **What happens if I decide to try gabapentin or pregabalin?**

You will usually start this medicine as a trial. This means you try it for a short time to see if it helps. You will start taking a low dose, which will be increased slowly. This is to reduce any unwanted effects (side effects). A trial can take a few months because it takes time to reach a stable dose.

## All Wales gabapentinoid resources for chronic pain

### What side effects might I get?

Like all medicines, gabapentin and pregabalin can cause side effects. Most side effects are mild and tend to go away after a few days.

Common side effects include: feeling sleepy, dizzy, or tired, headaches, dry mouth, feeling sick, changes in your bowels (diarrhoea or constipation), blurred vision, weight gain and feeling unsteady when walking.

You may also notice problems with your memory or concentration, or swelling in your legs, ankles or hands.

Talk to your healthcare worker if the side effects:

- last more than a few days
- are hard to manage
- make you feel unwell.

### What happens after the trial?

Your healthcare worker will ask you about your pain, any improvements in your daily activities and any side effects. They will look at whether the medicine has helped you reach the goals you agreed before starting treatment. This helps you decide together whether the medicine is worth continuing.

### What if the medicine doesn't work?

After the trial, if the medicine has not helped you reach your goals, or if the side effects are greater than any help the medicine is giving you, your healthcare worker will advise you to reduce the dose slowly and stop taking it. They will discuss other ways to help manage your pain.

### Can I become dependent on these medicines?

Anyone can become physically dependent on these medicines. This means that your body gets so used to it that you may feel unwell if the dose is reduced too quickly or stopped suddenly. If this happens you may experience withdrawal symptoms. These can include: headache, sweating, feeling sick, flu-like symptoms, trouble sleeping, or feeling very anxious.

If you start treatment, your healthcare worker should explain how long you might need to take these medicines and how to stop them safely.

## Can these medicines cause addiction?

Addiction is different from dependence. It means feeling a strong urge to take the medicine or finding it hard to control how you are taking it. You might feel that you need to continue taking the medicine even when it does not help your symptoms, and you may not realise this is happening at first.

Signs of addiction include:

- craving the medicine;
- feeling that you need to take more than prescribed, to take it more often or to take it in a different way, even if it is causing unwanted effects on your health;
- needing to take other medicines (for example, other painkillers) to keep getting the same effect;
- taking the medicine for reasons other than what it was prescribed for.

## What if I am also taking other pain medicines?

Taking gabapentin or pregabalin with other pain medicines such as codeine, tramadol or morphine, can increase the risk of harm. These combinations may lead to:

- feeling very sleepy or confused
- dizziness and falls
- breathing difficulties (such as breathing becoming slow or feeling unable to get enough air). In rare cases, this can be serious and life-threatening.

Your healthcare worker will consider these risks and may review your medicines.

## If I take gabapentin or pregabalin, when might it be stopped?

Your healthcare worker may need to reduce or stop the medicine if:

- it is not helping you, or
- they see signs of harm, dependence or misuse.

Misuse means taking a medicine in a way other than as prescribed, such as taking higher doses, taking it more frequently, or using it for reasons other than your medical condition.

## All Wales gabapentinoid resources for chronic pain

### **Can I drive while taking gabapentin or pregabalin?**

Gabapentin or pregabalin may make you feel sleepy or dizzy or may slow your thinking. If this happens, do not drive.

### **Can I drink alcohol while taking gabapentin or pregabalin?**

Alcohol can make you feel more sleepy or tired when taking these medicines. It is best to avoid alcohol when you first start taking the medicine. Once you are on a stable dose, you may be able to drink small amounts, but alcohol may still make you more sleepy than usual.

### **What else can help with my pain?**

Medicines are only one part of managing long-lasting (chronic) pain. Staying active, taking gentle exercise and having a healthy lifestyle can all help you with your pain. Some people find physiotherapy, pain management programmes, or talking therapies helpful. Your healthcare worker can suggest some options that might be suitable for you.

Visit the [AWTTC website](#) for useful links and resources.

### **Is there anything else I should tell my healthcare worker?**

Tell your healthcare worker if you are pregnant, breastfeeding, or planning a pregnancy. Also tell them if you are taking other medicines (including herbal remedies), or if you have ever had problems with alcohol, drugs, or addiction.