

## Gabapentin

### What is gabapentin?

Gabapentin is a drug that is used to treat neuropathic pain. This is pain that comes from nerves that have been damaged and as a result transmit abnormal or painful signals to the brain.

### How does it work?

Gabapentin works by stabilizing the nerves and making them less excitable. It essentially 'calms the nerves down'. Gabapentin is also used to treat epilepsy and is therefore called an anti-convulsant drug.

### Will it work?

You don't know until you have tried it. It has been shown to help in about one out of three patients in the drug trials that have been carried out.

### When should I take it?

A dose of gabapentin lasts for eight hours, which means that you must take it three times per day. You don't have to take it on a full stomach, but it is best to take most medicines this way.

### What dose should I take?

The dosage will vary from patient to patient. It is necessary to find a dosage that suits you. That is a dosage that reduces your pain but doesn't cause you excessive side effects. Gabapentin is initially prescribed at a low dosage and increased in steps. I would suggest the following dosage:

300mg at night for the first week  
300mg morning and evening next week  
300mg morning and evening for the rest of the month

This can be further increased in similar steps at the same intervals over the next month up to a dosage of 600mg three times per day.

You should stop at the dosage at which you are getting side effects. The trick would be to find the dose that best balances the benefit of the drug against the side effects.

### Do I need to take it regularly?

Yes. Gabapentin must be taken regularly. If you don't take it regularly then it won't work as it is intended.

### What are the side effects?

1. Drowsiness. You might feel tired and sleepy when you start taking the medication, but this should reduce with time.
2. Unsteadiness on your feet. Some elderly patients might experience this.
3. Muddled thinking and forgetfulness. Some patients describe 'being spaced out' by the drug, but this is dependent on the dose that you take.

**How long should I try it for?**

I would suggest a trial period of three months. This time would allow you to increase the dose to the level that suits you and gives you the most benefit. If it hasn't helped after three months then you should then wean down and stop the medication. If it has helped, then you should continue take it for the long-term.

**What do you mean by long-term?**

By long-term I mean for at least six months, if not up to a year. If you wish to stop taking the medication, then I would suggest reducing down the dosage over one week before stopping it. If you feel that the medication did help after all, then go back onto the dosage that you were previously taking for another six months. This weaning process could be repeated at six monthly intervals.

**Will it interfere with my other medications?**

Pregabalin does not interfere with most medications that patients might be taking. It can be used in patients who are on tablets for blood pressure or sugar diabetes, and it can be used with anti-depressant medication. You can take it if you are on warfarin or other blood thinning agents, but you must inform the doctor who is looking after your anti-coagulation.

**Will I get addicted to it?**

No. There is no risk that you will get addicted to gabapentin. Patients who take it for epilepsy would take it on a regular daily basis for a lifetime.

**Can I have a drink with it?**

There is no dangerous interaction with gabapentin and alcohol. You can have a drink but be cautious and remember that the medication will exaggerate the effect of the alcohol.

**What do I do if I can't cope with the side effects?**

Do not stop taking gabapentin abruptly. It is best to reduce down the dosage and wean yourself of the medication over a period of a week. Gabapentin doesn't work for everyone, and the last thing I would want as a doctor is make the treatment worse than the pain problem.