

Pharmacological management of refractory neuropathic pain in adults - GP Information Sheet

This document is intended to support GP prescribing for the following drugs (Lamotrigine, Topiramate and Oxcarbazepine) for treatment of neuropathic pain refractory to conventional anti-neuropathic agents. As recommended by NICE (www.nice.org.uk/guidance/CG173), they should only be initiated by a specialist. Importantly pharmacological therapy should not be considered a long term management strategy, and is only a small part of overall pain management

Initiation of medication is by Pain Specialist advice only. If commenced in Pain Clinic, a maximum 4 weeks supply of medication is dispensed from hospital with a plan to increase the dose gradually. Patients are therefore requested to contact their GP in good time for further prescriptions. Patients will be offered routine nurse telephone follow-up for medication review at 8-12 weeks or Pain Clinic follow-up at 3 months as appropriate.

On initiation, we advise patients that the dose continues to increase gradually (as outlined in the tables below) until there is effective pain relief or improvement in neuropathic symptoms, or until side-effects are experienced. Patients should report any side-effects (detailed below) to their GP or Pain Clinic.

The lowest effective dose should be used. If the medication is not effective or there are intolerable side-effects, the medication should be gradually weaned and discontinued, generally in the same manner as the initial dose escalation, but in reverse. A more rapid withdrawal may be appropriate depending on severity of adverse effects. Patients may then be referred back to Pain Clinic to consider non-pharmacological options for pain management (if not already discussed).

Lamotrigine regimen

	Morning	Evening
For 14 days take:		25mg
For 14 days take:	25mg	25mg
For 14 days take:	50mg	50mg
For 14 days take:	75mg	75mg
For 14 days take:	100mg	100mg
For 14 days take:	125mg	125mg
For 14 days take:	150mg	150mg
For 14 days take:	175mg	175mg
Thereafter take:	200mg	200mg

Oxcarbazepine regimen

	Morning	Midday	Afternoon	Evening
For 7 days take:				300mg
For 7 days take:	300mg			300mg
For 7 days take:	300mg	300mg		300mg
For 7 days take:	300mg	300mg	300mg	300mg
Thereafter take:	300mg	300mg	300mg	600mg

Topiramate regimen

	Morning	Evening
For 14 days take:		25mg
For 14 days take:	25mg	25mg
For 14 days take:	25mg	50mg
For 14 days take:	50mg	50mg
For 14 days take:	50mg	100mg
Thereafter take:	100mg	100mg

Contact details:

• Guy's and St. Thomas' INPUT pain clinic:

Tel: 0207 188 4714

Email: gst-tr.PainReferralsandAdmin@nhs.net

King's College Hospital:

Tel: 02032994839

Email: Kc-tr.painsec@nhs.net

• Lewisham and Greenwich Trust:

Tel: QE site: 0208 836 5594 UHL site: 0208 690 9127 NB: These medications are not recommended if pregnant, planning a pregnancy or breastfeeding. Women of childbearing age should take adequate contraceptive precautions. Higher doses of the OCP are required whilst taking Topiramate.

What are the possible side-effects?

Lamotrigine

Most often reported are nausea, vomiting, dizziness, ataxia, incoordination, somnolence, diplopia, blurred vision, diarrhoea, insomnia, pharyngitis and rhinitis. Lamotrigine can cause serious rashes requiring hospitalisation and discontinuation of treatment. The incidence of these rashes, which have included Stevens-Johnson syndrome, is approximately 0.3% (3 per 1000).

Oxcarbazepine

Most often reported are hyponatremia, nausea, vomiting, weakness, thirst, loss of appetite, confusion, hallucinations, myalgia, weakness, abdominal pain, dizziness, somnolence, diplopia, fatigue and rash. <u>A routine blood test for electrolyte profile and FBC should be performed monthly until the patient is on a stable dose of oxcarbazepine.</u>
Thereafter, the blood tests need to be repeated 6 monthly.

Topiramate

Most often reported are tiredness, paraesthesia, numbness, dizziness, difficulty with language, forgetfulness, nausea, diarrhoea, indigestion, dry mouth, weight loss, reduced appetite, drowsiness, difficulty with concentration or attention, insomnia, anxiety, mood swings, depression, changes in taste, vision disorders and kidney stones (with long-term use). Rarely, glaucoma, typically during the first month of starting Topiramate.