



You May Be at Risk

You are taking one of the following medications for pain:

Gabapentin (Neurontin®)

Pregabalin (Lyrica®)

QUIZ: TRUE OR FALSE

Gabapentin and pregabalin

1. This medication will reduce pain for everyone who takes it. True False
2. This medication is safe and effective, especially at higher doses. True False
3. New side effects can appear, even after taking this medication for several years at the same dose. True False
4. It can be dangerous to use this medication with opioid medications (narcotics). True False



ANSWERS

1. FALSE

A lot of people who take gabapentin or pregabalin do not see a reduction of their pain with these medications. To make sure the medication is working, your pain levels should be re-evaluated on a regular basis.

2. FALSE

Increasing the dose of gabapentin or pregabalin doesn't always improve pain control, yet it will increase your risk of side effects. Side effects are frequent and can include feeling sleepy, dizzy, and losing your balance.

3. TRUE

New side effects may develop after years of taking the same dose of medication. This could be due to age-related changes in your body such as decreased kidney function, or to new diseases or new medications.

4. TRUE

Gabapentin and pregabalin should not be used with opioid medication (narcotics) due to the risk of serious breathing problems, which can lead to death.

Important things to know about gabapentin (Neurontin®) and pregabalin (Lyrica ®)



As your body ages, you become more sensitive to the side effects of these medications for various reasons, including changes in your kidney function and more sensitivity of your brain to sedative medications.



Pregabalin and gabapentin can cause falls, fractures, memory problems and confusion. Even if you are not experiencing these symptoms, speak to your doctor, nurse or pharmacist to decide if there are better options to treat your pain.



Taking gabapentin or pregabalin with alcohol or other sedative medications such as sleeping pills or opioids (narcotics) increases the risk of severe sedation, breathing problems and can even cause death.



If gabapentin and pregabalin are not reducing your pain or are causing you side effects, the best way to stop the medication is to reduce the dose gradually with the help of your doctor, pharmacist or nurse (*see page 8 and 9 for more information on how to reduce the dose*).

Please consult your doctor, nurse or pharmacist before stopping any medication

Are you experiencing side effects?

- | | Yes | No |
|--|-----------------------|-----------------------|
| 1. Do you feel more tired than usual, dizzy, or off balance? | <input type="radio"/> | <input type="radio"/> |
| 2. Do you have problems with attention or memory? | <input type="radio"/> | <input type="radio"/> |
| 3. Are you experiencing leg swelling or weight gain? | <input type="radio"/> | <input type="radio"/> |

If you answered YES to any of these questions, speak to your doctor, nurse or pharmacist to see if the medication could be causing these symptoms.

Ask yourself yes or no:

- | | Yes | No | I don't know |
|--|-----------------------|-----------------------|-----------------------|
| 1. Have you recently talked with your doctor, nurse or pharmacist about the best treatment options for your nerve pain or chronic lower back pain? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 2. Do you have a plan to review your pain levels and pain medication(s) at least once a year? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 3. Are you on the lowest possible dose of this medication? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

If you answered NO or I DON'T KNOW to any of these questions, bring this brochure to your next appointment with your doctor, pharmacist or nurse to review if your pain is well managed and your medication dose is as effective as possible.

Other ways to deal with pain

Depending on your reason for taking gabapentin or pregabalin, there are alternative ways to deal with pain with less treatment side effects. Here are some examples:

- Talk to a therapist about a **self-management program for pain**. A self-management program can help you take control of how you deal with pain.
- Speak to a therapist about **cognitive behavioral therapies or mindfulness based interventions for pain**. These therapies change the way you think about pain so that your body and mind react better when you experience pain.
- Depending on your diagnosis, **physiotherapy or massage therapy** might help the pain you are experiencing. Some physical activities such as **yoga, tai chi, pilates** and other structured exercise programs also have benefits for dealing with pain.
- Ask your doctor if a **specialist pain clinic** could better help you deal with pain. Specialist pain clinics provide a range of treatments and services for people with chronic pain, tailored to your individual needs.

Lifestyle changes can also help to improve your overall health, such as:

- Regular physical exercise.
- Quitting smoking.
- Healthy eating.
- Reducing excessive alcohol or other harmful drugs.





Mr. Reid's story

He had been taking gabapentin, a medication just like yours.

"I'm 73 years old and have suffered from chronic lower back pain for several years from an old sports injury. Three years ago, my doctor prescribed gabapentin (Neurontin©) to help relieve my chronic pain. I wasn't sure the gabapentin was working to relieve my lower back pain but I didn't notice side effects either. So I continued renewing it at the pharmacy and taking gabapentin three times a day.

During the past year, I started noticing my legs would swell up, particularly in the evening. I also had "dizzy spells" during the day. One morning, I got out of bed and started walking down the stairs to make coffee. I was a bit dizzy and I missed a step. Luckily, I caught myself on the bannister at the last minute. Even though I was not hurt, it scared me quite a bit.

At my next doctor's appointment, I mentioned this scary episode. I also complained about my leg swelling. My doctor asked me a few questions about how I had been feeling over the last few months and told me that the gabapentin could have been causing these side effects. I wasn't sure if it was still helping me control my back pain, so we agreed that we would try to gradually reduce the medication over a few weeks and see how it went. The doctor also prescribed physiotherapy to help with my lower back pain.

After reducing my medication over a few weeks and starting physiotherapy, my lower back pain has actually improved! I feel stronger and surer on my feet and my leg swelling is practically gone. It feels like a fog had been lifted from my thinking.

I wish I had asked my doctor before, rather than having taken this medication for so long. I realize now that asking my doctor the right questions and being aware of changes in my body has helped me improve my health."

Gradually reducing your dose

Is it time to reduce the dose or stop your medication?

Take this brochure to your doctor, pharmacist or nurse to begin a discussion about gabapentin or pregabalin.

How do I gradually reduce the dose of pregabalin or gabapentin?

Everyone is different. To reduce your dose, you will need a tapering program designed just for you. The tapering program example on page 9 can help you have this discussion.

Some people who reduce their dose of gabapentin or pregabalin may feel symptoms (for example, insomnia, nausea, anxiety or headaches). Slowly reducing the dose over time can help reduce these symptoms, this is called tapering. If you have been on very high doses or have been taking the medication for a long time, your doctor, pharmacist or nurse may consider a slower tapering program.

If I reduce my dose of medication, will my pain get worse?

Not necessarily. Higher doses of gabapentin or pregabalin do not always improve pain and are likely to cause side effects.





















































































A tapering program example can be found on page 9. For more examples of tapering programs to talk about with your health care provider, visit: <https://www.hey.nhs.uk/wp/wp-content/uploads/2016/03/pregabalin.pdf>

**DO NOT STOP OR CHANGE THE DOSE OF YOUR MEDICATION
WITHOUT SPEAKING WITH YOUR DOCTOR,
PHARMACIST OR NURSE**

Tapering program

Here is an example of a tapering schedule for someone taking pregabalin. Speak to your doctor, nurse and pharmacist to develop a tapering plan that's right for you.

TAPERING PROGRAM EXAMPLE* (PREGABALIN)

WEEK	TIME	MO	TUE	WE	TH	FR	SA	SU
1	Morning							
	Night							
2	Morning							
	Night							
3	Morning							
	Night							
4	Morning							
	Night							
5	Morning							
	Night							
6	Morning							
	Night							

What the symbols mean:



Full dose



Three quarters of a dose



Half a dose



One quarter of a dose



No dose

* Do not cut your capsules. Not all dosing fractions may be available for your medication or your starting dose.



5 questions to ask your health care provider

1. Do I need to continue my medication?
 2. How do I reduce my dose?
 3. Is there a safer alternative treatment?
 4. What symptoms should I look for when I reduce or stop my medication?
 5. With whom do I follow up and when?
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Questions I want to ask my health care provider about my medication

Use this space to write down questions you may want to ask:

This brochure can be found online at:

www.deprescribingnetwork.ca/useful-resources