

Prescribing Bulletin

Prescriber Alert

Gabapentin and Pregabalin

June 2013



Potential for misuse/abuse/diversion of Gabapentin and Pregabalin

Situation

- It has previously been suggested that Gabapentin and Pregabalin might have the potential for being abused or diverted within the community.
- Recently more evidence has come to light which would seem to suggest this is certainly the case.



Background

- Lothian Substance Misuse Service has recently performed a survey suggesting there is misuse among their service users.
- These drugs are often taken along with methadone in order to potentiate its effect, or, on their own to become intoxicated.
- These drugs have also been implicated in drug-related deaths.
- We have also been made aware that these drugs are being abused as an emerging trend in Ayrshire where they are being ground down and snorted.
- Doctors working within the Prison Service have raised concerns about these drugs.

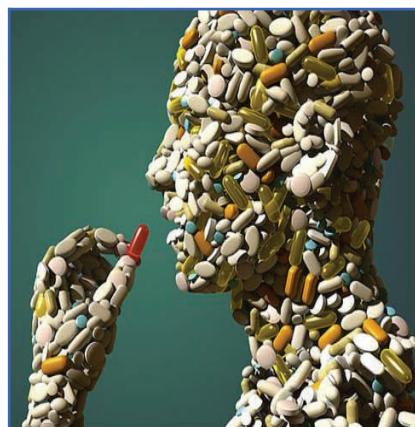
Assessment

- The street value of these drugs may be as high as £1 per 300mg gabapentin or 600 mg pregabalin capsules. This adds to the attraction of the drugs for certain individuals.
- The amount of gabapentin/pregabalin being prescribed has increased significantly in recent years linked in part to the expansion of licensed indications.

- There are positive benefits from these drugs for many patients in the treatment of neuropathic pain. The Chronic Pain Service is aware that this has meant an increase in primary care prescribing linked to their advice.
- With the formulary inclusion, GPs have found these to be useful additions for certain patients managed solely in primary care.
- Pregabalin is also licensed for the treatment of fibromyalgia and anxiety disorders and has been prescribed by various specialists for these indications.

Recommendation

- For both drugs it is very important that clinicians are aware of the potential for abuse and diversion when prescribing them.
- Prescribers should always exercise caution in prescribing these drugs, especially if patients appear to be familiar with certain diagnostic terms and 'labels'.
- Use of the short form 'McGill Pain Questionnaire' ([click here](#)) is recommended to distinguish neuropathic pain from nociceptive pain. This is more discriminatory than 'S-LANSS' and there is less risk of 'user manipulation'.



Please send your contributions or suggestions for future Prescribing Bulletin articles to the Medicines Management Team via Jackie.Szoneberg@borders.scot.nhs.uk.