



ADULT MEDICATION GUIDELINE

PREGABALIN

Scope (Staff):	All WNHS Staff
Scope (Area):	Obstetrics and Gynaecology

This document should be read in conjunction with the [Disclaimer](#).

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Medication Class

Antiepileptics (Gabapentinoids)

Presentation

Capsule: 25mg, 75mg, 150mg, 300mg

Storage

Store at room temperature, below 25°C

Dose

Neuropathic pain

Oral: Initially 75 mg at night for 3 to 7 days, then 150 mg daily in 1 or 2 doses.

If required, increase after 7 days to 150 mg twice daily, and to a maximum of 300 mg twice daily after at least another 7 days.

Uneven splitting of the daily dose (larger night-time dose) may reduce daytime sedation.

Epilepsy (specifically - focal [partial] seizures)

Oral: Initially 75mg twice daily

If required, increase after 7 days to 150 mg twice daily, to a maximum of 300 mg twice daily after a further 7 days

Dose adjustment with renal impairment:

Dose adjustment is required in patients with renal impairment.

Administration**Oral**

Capsules may be swallowed without regard to food.

Capsules may be opened, and contents dispersed in water or thickened fluid for patients who have difficulties swallowing.

Monitoring

Monitor for adverse effects. Efficacy in pain management (extra information from [NPS Medicinewise – neuropathic pain](#)), efficacy in managing seizures.

Pregnancy

1st Trimester: Consider alternative

2nd Trimester: Consider alternative

3rd Trimester: Consider alternative

The decision to treat should be made on an individual basis by considering the risks and benefits to both mother and fetus. Consider an alternative treatment during pregnancy if possible.

Several small studies have found an increased risk of congenital malformations after first trimester exposure to pregabalin, but various limitations include small sample size, maternal conditions and concomitant medicines were identified may be contributed to these findings

For more information, please contact [KEMH Obstetric Medicines Information Service](#).

Breastfeeding

Consider alternative.

Women who choose to breastfeed their healthy full-term infant while taking pregabalin should observe the infant for adverse effects such as irritability, poor feeding and excessive drowsiness.

For more information, please contact [KEMH Obstetric Medicines Information Service](#).

Comments

Adverse effects are frequent, and there are risks of misuse, dependence and withdrawal symptoms; use the lowest effective dose for the shortest time possible and prescribe limited quantities

Do not stop taking this medicine abruptly

Treatments of pregabalin along with opioids or other CNS depressants may increase the risk of CNS and respiratory depression. Ideally, combinations should be avoided. However, if required, monitor closely and take note that lower doses may be required.

Gabapentinoids are increasingly misused for their euphoric and sedative effects, even by patients without a history of substance misuse

Related Policies, Procedures & Guidelines

WNHS Clinical Practice Guidelines:

[Pre-operative medication management](#)

[Palliative care](#)

[Gynaecology \(Non-oncological\)](#)

WNHS Pharmaceutical and Medicines Management Guidelines:

Prescribing Procedure

Medication Administration Guidelines









High Risk Medicines Policy

References

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Therapeutic Guidelines. Pregabalin use for psychiatric disorders during pregnancy. In: eTG complete [Internet]. West Melbourne (Victoria): Therapeutic Guidelines; 2021 [cited 2023 Feb 10]. Available from: <https://tgldcdp-tg-org-au.kelibresources.health.wa.gov.au/etgAccess>

The Royal Women's Hospital. Pregabalin. In: Pregnancy and Breastfeeding Medicines Guide [Internet]. Parkville (Victoria): The Royal Women's Hospital; 2023 [cited 2023 Feb 15]. Available from: <https://thewomenspbmg.org.au/>

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