



PREGABALIN FACTSHEET FOR WORKERS

Pregabalin, originally an anti-epilepsy drug, is a commonly prescribed medicine used to treat neuropathic and musculoskeletal pain as well as generalised anxiety disorder. Sold under the brand name Lyrica®, it was introduced in 2005 and listed on the Pharmaceutical Benefits Scheme (PBS) in 2013. In the first year of listing there were almost 1.4 million pregabalin prescriptions written in Australia. By 2017/18 that number had grown to 3.75 million prescriptions.

Effects

In addition to pregabalin's painkilling characteristics, it also has similar adverse effects to benzodiazepines. When taken in higher doses or combined with other drugs such as alcohol, opioids, cannabis and benzodiazepines, the sedative or euphoric effects are increased.

Possible side effects include:

Sedation	Drunk effect
Euphoria	Relaxation and calm
Hallucinations	Lowered inhibitions
Fits/seizures	Blurred vision
Psychosis	Tremors
Swollen limbs	Depression or anxiety
Confusion and memory impairment	
Suicidal thoughts (in a small number of people)	

Overdose risk

Pregabalin has a direct effect on the central nervous system. Misuse or use in combination with other drugs can result in: drowsiness, sedation, respiratory depression and death.

Pregabalin has adverse effects on the Central Nervous System (CNS) when used in combination

with other CNS depressants. If more than one CNS depressant (e.g. alcohol even in small amounts, antidepressants, antihistamines, antipsychotics, barbiturates, hypnotics, opioid analgesics) is used in combination with pregabalin there is a risk of respiratory failure, coma or death.

Naloxone will not be effective in overdose of pregabalin alone, however it will reverse the effects of opioids if they have been used together. **You should encourage clients to always call for emergency help if someone overdoses – 000.**

If you don't already provide naloxone training, you can contact Directline on 1800 888 236 to find out how to get naloxone near your service.

Dependence

Tolerance and dependence can develop quickly if pregabalin is used regularly, whether prescribed or used off prescription. Encourage clients to speak to a doctor or an alcohol and other drug worker before they try to make changes to their drug use, so the health professional can help manage any withdrawal symptoms your clients might have.

Withdrawal

Pregabalin withdrawal symptoms are similar to those of withdrawal from alcohol or benzodiazepines. The severity of the symptoms can vary based on the length of time the medication was used, the dose, and whether the person was using other drugs.

Withdrawal symptoms include:

Severe cravings	Trouble sleeping
Feeling sick	Headaches
Seizures	diarrhoea
Sweating	Tremors
Depression	

There are services that can help manage drug use.
For further advice contact:

- DirectLine: 1800 888 236
- Counselling Online: www.counsellingonline.org.au.
- Local alcohol and other drug services.

Reducing the risks

If someone is going to use pregabalin outside of its prescribing recommendations, then the following points are important to consider:

Try to use only one drug at a time. Mixing benzodiazepines or alcohol with pregabalin and gabapentin can result in drowsiness, sedation, respiratory depression and death.

Start with a test dose and wait before taking more.

Wait until the effects are felt and don't take more for at least two hours.

Think about tolerance.

Tolerance to pregabalin can develop quickly meaning more of the drug is needed to get the same effect. Know the strength of the tablets you are taking.

Don't suddenly stop.

If pregabalin use is reduced or suddenly stopped, tolerance to the substance can decrease quickly. A change in tolerance can result in overdose or death. Sudden cessation of pregabalin can be dangerous and increase the risk of withdrawal symptoms. Withdrawal should be a slow tapered process under supervision from a doctor.

Sedative effects.

Always use in trusted company and in a safe environment. Don't drive or operate heavy machinery after use.

Avoid injecting tablets.

Injecting tablets will seriously damage your veins and is associated with collapsed veins, clotted veins, infected skin and poor circulation.

If injecting, use a filter.

If injecting tablets always use a filter to try eliminating particles damaging your veins. If a filter is not available, a corner of a swab or a part of a tampon is much better than a pre-made cigarette filter which can have harmful particles in it.

Gabapentin

Gabapentin is an older drug with the same basic mechanism of action as pregabalin. Gabapentinoid misuse seems to have increased rapidly in recent years and is a globally recognised problem. Gabapentinoid misuse is more common among patients with substance use disorder (SUD), particularly involving opioids. Patients undergoing SUD treatment use gabapentinoids to increase the effects of methadone or buprenorphine. Similar measures of caution to those above for pregabalin should also be applied to the use of gabapentin.