

Prescribing for neuropathic pain

Learn how treatment guidance from the latest edition of Palliative Care Formulary can support health professionals to manage cancer-related neuropathic pain.

Independent, specialist information, grounded in clinical practice





Available through





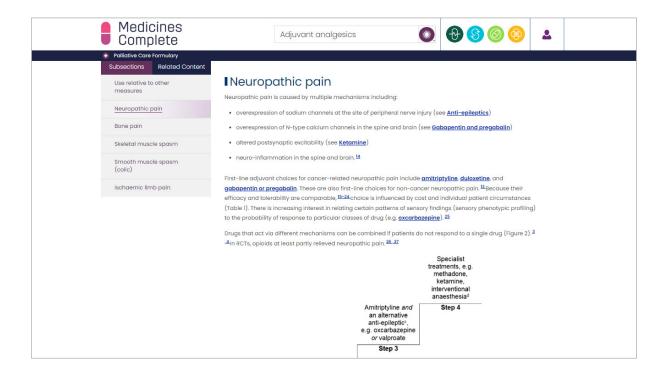
Prescribing for neuropathic pain

Using essential knowledge at the point of care



Peter is a 52-year-old man with metastatic melanoma who presented to his palliative care clinical nurse specialist with severe pain in his left pelvis and leg. The pain did not respond to additional doses of oral morphine solution taken in addition to his fentanyl transdermal patch.

The nurse suspected both bone and neuropathic pain components might be contributing to the poor opioid-response and used the Palliative Care Formulary (PCF) Adjuvant analgesics monograph to identify appropriate alternative approaches.



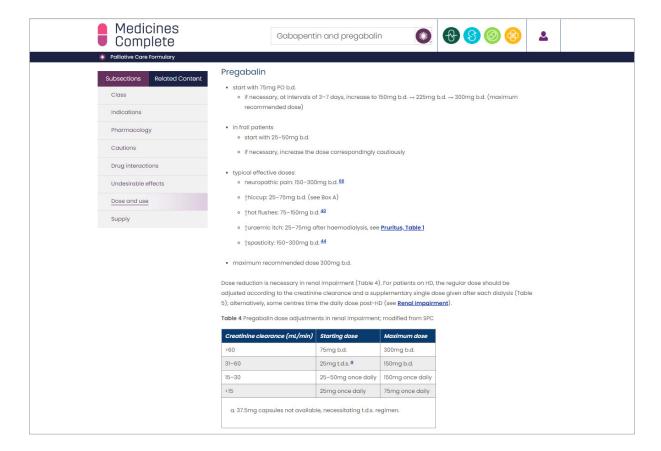


PCF Adjuvant analgesics monograph provides information on drugs that are used for circumstance specific pain that is, or is likely to be, unresponsive to standard treatments.





Following discussion of the treatment options with the palliative care multidisciplinary team and with Peter, pregabalin was prescribed. The nurse consulted the PCF Gabapentin and pregabalin monograph to find the correct starting and typical effective dose of pregabalin for neuropathic pain and decided to start Peter on a dose of pregabalin 25mg PO b.d. because of his frailty, and to titrate up gradually as needed.





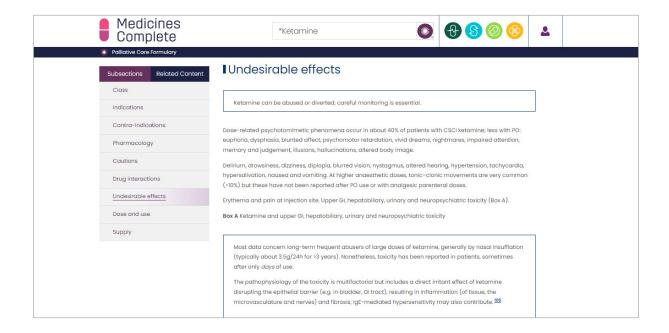
PCF Gabapentin and pregabalin monograph provides comprehensive information on the use of gabapentinoids for neuropathic pain including dosing guidance.

Peter's pain responded well to the pregabalin. However, two months later, Peter's condition severely deteriorated. He developed hyperactive delirium and his neuropathic pain returned causing severe distress. He was no longer able to manage oral medication.

The palliative care team considered prescribing ketamine subcutaneously but noted from the PCF Ketamine monograph that this might exacerbate his delirium.



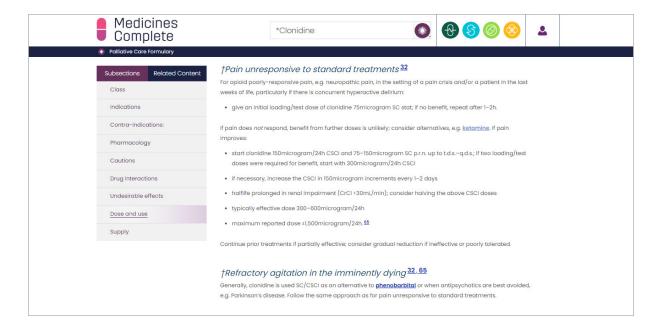






PCF Ketamine monograph provides comprehensive information on the specialist use of ketamine in palliative care for pain unresponsive to standard treatments including toxicity risks.

The team discussed the use of clonidine as a useful alternative parenteral option for treating Peter's neuropathic pain and noted from the PCF Clonidine monograph that it may have the added benefit of helping his concurrent hyperactive delirium.







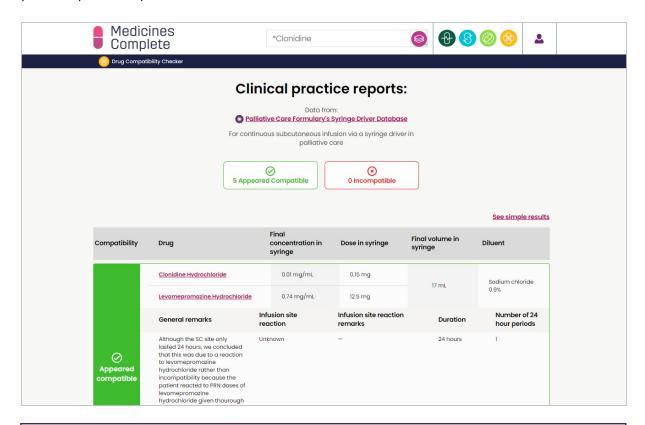


PCF Clonidine monograph provides comprehensive information on the specialist use of clonidine in palliative care for pain unresponsive to standard treatments including use by continuous subcutaneous infusions (CSCI).

Peter was started on clonidine 150microgram/24h by CSCI and prescribed 75microgram SC q8h p.r.n. His pain responded well, and his delirium improved. However, he did report feeling nauseated.

The nurse asked the ward pharmacist whether any anti-emetics could be mixed with clonidine in the same syringe for CSCI. Consulting PCF's Syringe Driver Database through Drug Compatibility Checker, the pharmacist was able to find clinical practice compatibility reports for combinations of clonidine and levomepromazine diluted with sodium chloride 0.9% and combined in a syringe for CSCI over 24h.

Peter's nausea responded well to the addition of levomepromazine to the syringe driver and he died peacefully a few days later.







PCF's Syringe Driver Database on Drug Compatibility Checker through MedicinesComplete contains clinical practice reports on the combination of up to 6 drugs in a syringe for CSCI.





Palliative Care Formulary

Palliative Care Formulary (PCF) provides unrivalled and expert drug information for health professionals when caring for adult patients facing progressive life-limiting diseases.



Drug Compatibility Checker

Drug Compatibility Checker through MedicinesComplete supports confident decision making at the point of care. This unique tool combines published data from ASHP Injectable Drug Information with clinical practice reports from Palliative Care Formulary's Syringe Driver Database.

Access this essential knowledge today

MedicinesComplete makes it easy for health professionals to access essential medicines information at the point of care. Providing trusted evidence-based knowledge for confident decision-making and effective patient care.



Find out more today

For information and to contact our team

go to PharmaceuticalPress.com

Available through



Disclaimer

MedicinesComplete is aimed at health professionals and assumes a level of professional training to interpret the information on this site. Information on the selection and clinical use of medicines is designed for prescribers, pharmacists and other health professionals and is not suitable for patients or the general public. All information should be interpreted in light of professional knowledge and supplemented as necessary with specialist publications, and all users are responsible for ensuring appropriate use or reliance on such information. Although RPS make reasonable efforts to update the information on MedicinesComplete, RPS make no representations, warranties or guarantees, whether express or implied, that the content is accurate, complete, or up to date. So far as permitted by law, RPS will not accept liability for damages, in any form, arising from or in relation to MedicinesComplete, or for a temporary inability to access this site. For more information please see our Website Terms and Conditions.

© The Royal Pharmaceutical Society, 2023. Copying of MedicinesComplete content without permission is not permitted.