Dokumenttyp: journal article

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Titel des Beitrags: Efficacy and safety of pregabalin in treatment refractory patients with various neuropathic pain entities in clinical routine.

Abstract:
AIMS: Conventional approaches to the management of neuropathic pain (NeP) often yield unsatisfactory results. We aimed to investigate pregabalin, a gamma-aminobutyric acid (GABA)-analogue, in a wide range of pregabalin naive patients with treatment refractory NeP. METHODS: Investigator-initiated, 4-week, open, prospective multicentre study in tertiary care. Pregabalin was prescribed at physicians' discretion based on patients' individual responses and tolerability, with or without concomitant analgesics. Consecutive patients were requested to fill in questionnaires at baseline and after 14 and 28 days with numerical pain rating scales (0, none; 10, worst possible), sleep rating scales, parts of the Brief Pain Inventory, Pain Experience Scale, Short Questionnaire on Current Burden and the SF-12 health-related quality of life scale. RESULTS: In 55 patients, the mean pregabalin dose was 142 +/- 26 mg at day 1 and 348 +/- 161 mg at day 28. The mean pain score decreased from 6.5 +/- 1.7 to 5.5 +/- 1.9 at day 14 and to 4.9 +/- 1.8 at day 28 (-24.6%, p< 0.0001). Significant and rapid improvements were noted in the sleep interference score (p< 0.00001), Short Questionnaire on Current Burden (p< 0.01) and SF-12 (somatic score p< 0.001; psychological score p< 0.01). Pregabalin was well tolerated, and
only three patients (5%) discontinued treatment prematurely. CONCLUSIONS: Our findings suggest that pregabalin is an effective and well-tolerated drug in difficult-to-treat NeP patients under daily clinical practice conditions. A flexible dosing approach appears appropriate to ensure patient compliance and treatment success.

Zeitschriftentitel / Abkürzung:
Int J Clin Pract

Jahr:
2007

Band:
61

Heft / Issue:
12

Seiten:
1989-96

Sprache:
eng

Pubmed:

Print-ISSN:
1368-5031

TUM Einrichtung:
sthesiologie

Occurences:
· Einrichtungen > Fakultäten > Fakultät für Medizin > Kliniken und Institute > Klinik für Anästhesiologie > Klinik für Anästhesiologie (DHM) > 2007

entries: