

# Retrospective evaluation of side effects and influencing factors for the transdermal application of capsaicin (Qutenza®)

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## Introduction

- Capsaicin is a natural alkaloid, acting on TRPA-1 and TRPV-1 receptors. The 8% transdermal patch contains 640mcg/cm<sup>2</sup> of capsaicin, and is used to treat neuropathic pain in adults. Different side effects for treatment have been reported.

## Methods

- Retrospective evaluation of side effects and possible influencing factors for all patients treated with transdermal capsaicin 8% patch (Qutenza®) from 2011 to 2015 in our hospital. Values presented as mean (SD) or % (p-value) for correlation.

## Results

- **General:**
  - 269 treatments in 159 subjects.
  - On average 1.03 (0.87) patches were used (spread 0.13-4.00, 1 patch = 280cm<sup>2</sup> = 179mg capsaicin).
- **Reported side effects:**
  - pain on application (average rise in NRS during treatment 1.03 (2.50), due to which 3 treatments had to be stopped),
  - erythema (n = 188)\*<sup>1</sup>,
  - superficial blistering (n = 2),
  - rise in blood pressure (average rise during treatment 2.75 (5.98)).
- **The pre-treatment use of transdermal lidocaine** had no relationship with NRS (correlation 8.2%, p = 0.192), the use of per- or post-treatment coldpacks had (correlation 32.6%, p = 0.000).

- \*1: example of erythema in a patient with post herpetic pain.



## Conclusion

- The use of transdermal capsaicin 8% patch has mild to moderate, all transient, side effects. These were comparable to earlier reports and the manufacturers' statements<sup>1,2,3</sup>. Pain can be suppressed better with coldpacks than pre-treatment with cutaneous lidocaine, although a causal relationship cannot be determined in this (retrospective) evaluation. This relationship was however indicated by available (scarce) further research<sup>1,2,3</sup>, and in our daily experience.

<sup>1</sup> Knolle et al. Pain. 2013;154(12):2729-36.  
<sup>2</sup> Kern et al. Pain Pract. 2014;14(2):E42-50.  
<sup>3</sup> Jensen et al. Eur J Pain. 2014;18(9):1240-7.