



EVALUATING PREGABALIN IN TERMINAL CANCER PATIENTS WITH CHRONIC NEUROPATHIC PAIN AND DEPRESSION: AN OBSERVATIONAL CASE SERIES

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ABSTRACT

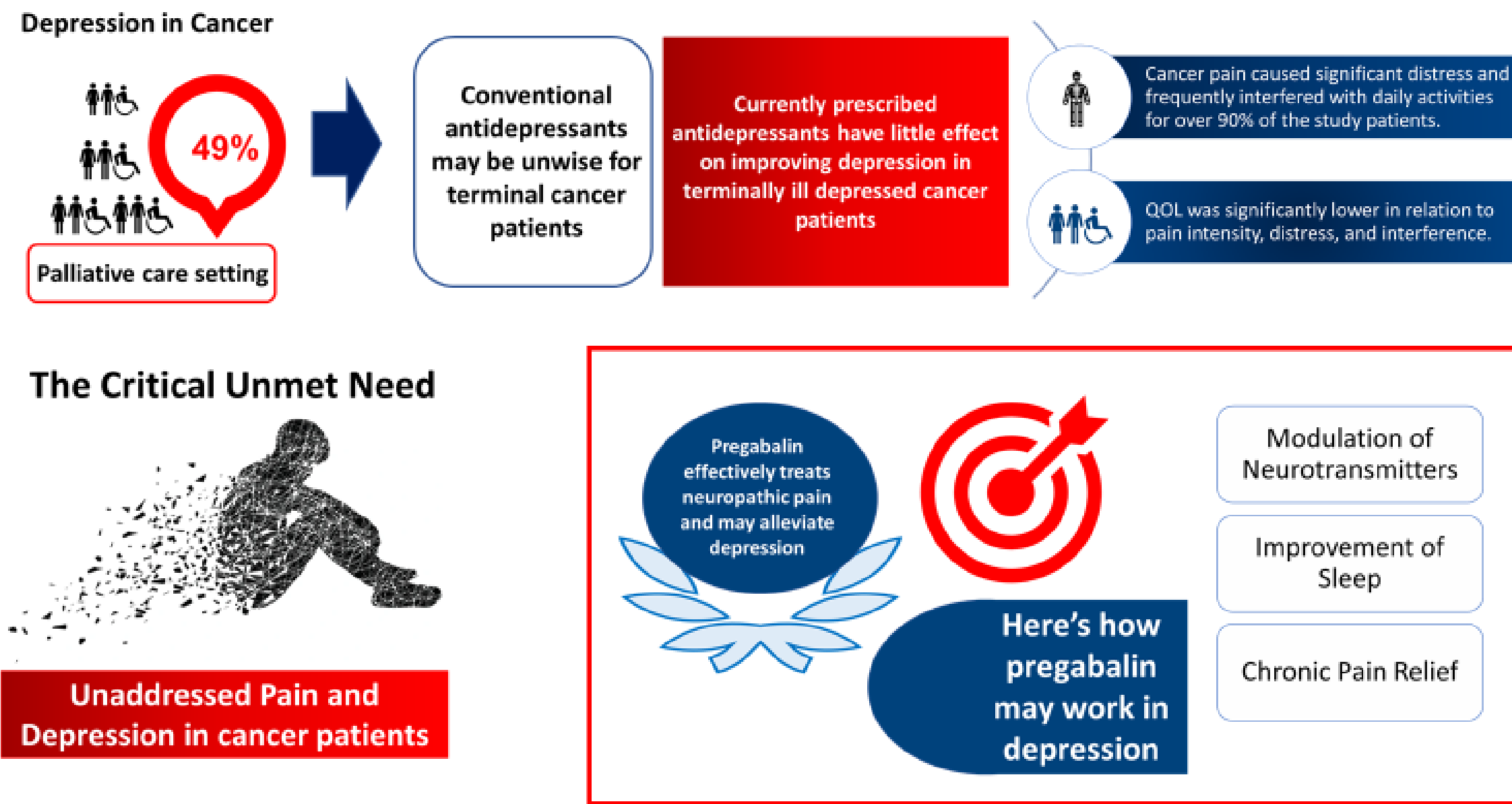
Introduction: Chronic neuropathic pain and depression are common and debilitating conditions in terminal cancer patients, significantly impacting their quality of life. Pregabalin, an anticonvulsant medication, is used for neuropathic pain and may also influence depressive symptoms. This study evaluates the efficacy and safety of pregabalin on pain intensity, depression severity, and side effects in terminal cancer patients with chronic neuropathic pain and depression.

Methods: This observational case series included 10 terminal cancer patients experiencing chronic neuropathic pain and depression. Pregabalin was administered at a starting dose of 150 mg twice daily, with adjustments based on patient tolerance and pain response up to 300 mg twice daily. Pain intensity and depression severity were assessed using the Brief Pain Inventory (BPI) and the Hamilton Depression Rating Scale (HDRS) at baseline, 4 weeks, and 8 weeks. Side effects were monitored using a self-reported side effect questionnaire.

Results: Pregabalin led to a significant reduction in pain intensity and depression severity. The mean BPI score decreased from 7.8 (SD = 1.2) at baseline to 5.2 (SD = 1.4) at 4 weeks and 4.1 (SD = 1.5) at 8 weeks, representing reductions of 33.3% and 47.4%, respectively. The mean HDRS score decreased from 18.5 (SD = 4.0) at baseline to 13.2 (SD = 4.1) at 4 weeks and 9.8 (SD = 3.6) at 8 weeks, showing reductions of 28.4% and 47.0%, respectively. Side effects included dizziness (50%), drowsiness (40%), weight gain (30%), and dry mouth (20%). No severe adverse effects were reported. All patients completed the study, with 30% requiring dose adjustments.

Conclusion: Pregabalin significantly alleviates both chronic neuropathic pain and depression in terminal cancer patients with a manageable safety profile. These findings support the use of pregabalin in this patient population, though further research with larger samples and controlled designs is warranted.

1. INTRODUCTION



3. RESULTS

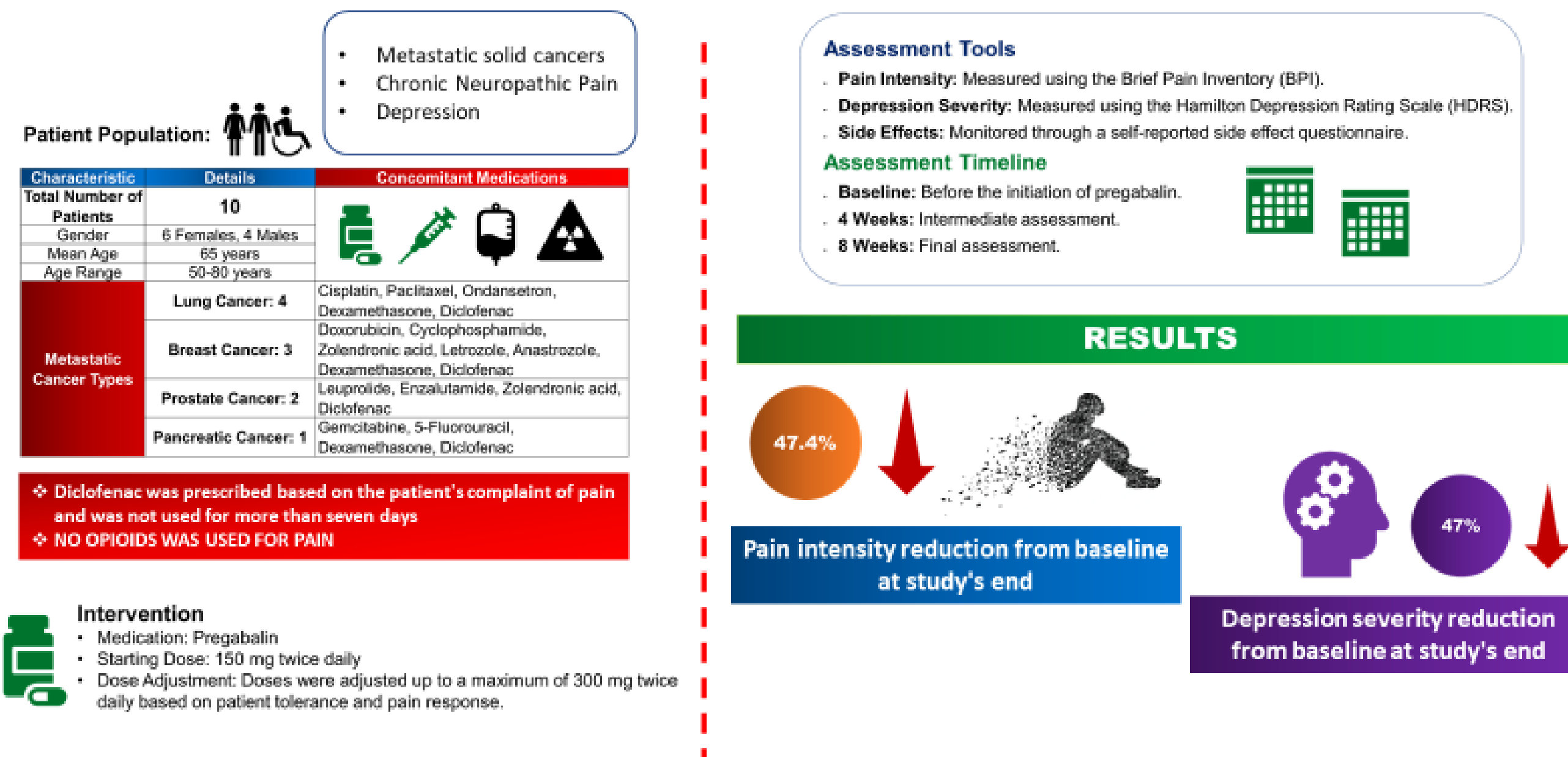
- Pregabalin led to a significant reduction in pain intensity and depression severity.
- The mean BPI score decreased from 7.8 (SD = 1.2) at baseline to 5.2 (SD = 1.4) at 4 weeks and 4.1 (SD = 1.5) at 8 weeks, representing reductions of 33.3% and 47.4%, respectively.
- The mean HDRS score decreased from 18.5 (SD = 4.0) at baseline to 13.2 (SD = 4.1) at 4 weeks and 9.8 (SD = 3.6) at 8 weeks, showing reductions of 28.4% and 47.0%, respectively.
- Side effects included dizziness (50%), drowsiness (40%), weight gain (30%), and dry mouth (20%). No severe adverse effects were reported. All patients completed the study, with 30% requiring dose adjustments.

4. DISCUSSION

- Our findings suggest pregabalin may enhance palliative care for terminal cancer patients by alleviating neuropathic pain and depressive symptoms.
- This dual benefit could improve overall quality of life and support a more holistic treatment approach.
- However, limitations such as small sample size and lack of controls highlight the need for larger, rigorous studies to confirm efficacy and safety.

2. METHODS AND MATERIALS

- This observational case series included 10 terminal cancer patients experiencing chronic neuropathic pain and depression.
- Pregabalin was administered at a starting dose of 150 mg twice daily, with adjustments based on patient tolerance and pain response up to 300 mg twice daily.
- Pain intensity and depression severity were assessed using the Brief Pain Inventory (BPI) and the Hamilton Depression Rating Scale (HDRS) at baseline, 4 weeks, and 8 weeks.
- Side effects were monitored using a self-reported side effect questionnaire



5. CONCLUSIONS

- Pregabalin effectively reduces pain and depression in terminal cancer patients
- Findings support pregabalin's efficacy for neuropathic pain and depression
- Results are promising, but further research is needed for confirmation

6. REFERENCES

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