



*Happy Presidents' Day – The White House*

## PIC QUESTION OF THE WEEK: 2/16/09

Q: Is there any basis for considering gabapentin a possible drug of abuse?

A: Gabapentin (Neurontin, etc.) is an anticonvulsant structurally related to gamma-aminobutyric acid (GABA) and indicated for the treatment of postherpetic neuralgia and as an adjunct for partial seizures. It is chemically and structurally related to pregabalin (Lyrica), a Schedule V compound labeled for the treatment of fibromyalgia as well as diabetic and other forms of neuropathic pain. Gabapentin is not categorized as a scheduled substance; however, there is some question as to its potential for abuse. It has been used (*off-label*) for the management of a number of drug withdrawal syndromes including those related to the abuse of cocaine, alcohol, opioids, benzodiazepines, etc. Anticonvulsant medications enhance GABA activity and result in reduced cravings and the drug-seeking behavior associated with cocaine abuse. While these reports support the efficacy of gabapentin for reducing withdrawal symptoms from a variety of drugs of abuse, there is little information related to the actual misuse of this compound. One group of prison inmates with a history of intranasal cocaine dependence was reported to *snort* the powder from gabapentin capsules to experience a euphoric state similar to that provided by cocaine. While gabapentin was prescribed for labeled indications, the patients' behaviors resulted in abuse of the drug. There are a number of additional cases of gabapentin abuse and withdrawal. In each of the reports, patients had a prior history of some type of substance abuse and were receiving daily doses  $\geq 3,600$  mg. One patient was taking 7,200 mg per day – twice the maximum recommended dose! Patients suffering withdrawal from gabapentin have presented with symptoms of tremor, agitation, pallor, sweating, tachycardia, exophthalmia, and confusion. The effect of gabapentin on GABA transmission may also be a related mechanism for its occasional abuse. As mentioned earlier, each of the cases of the gabapentin abuse was reported in a patient being withdrawn from some other substance. Its abuse potential in those not being managed for drug withdrawal has not been established. Regardless, patients seeking excessive quantities of gabapentin should be evaluated and monitored for possible abuse of the drug.

### References:

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