

Neuropathic pain

Across England and Wales £111.7 million is spent annually on amitriptyline, duloxetine, gabapentin and pregabalin. (NHSBSA October 2020 to December 2020).

QIPP projects in this area are aimed at reviewing prescribing in neuropathic pain to ensure: a cost-effective pathway has been followed; cost-effective preparations have been used; when pregabalin is used, it is prescribed generically in capsule form for all indications; patients are regularly reviewed for treatment effectiveness and deprescribing or changing treatment when appropriate.

Key recommendations

- Agree a local neuropathic pain treatment pathway through an appropriate group, e.g. the area prescribing committee, involving all key stakeholders. Attachment 1 is a template neuropathic pain treatment pathway which may be adapted locally and used for this purpose.
- Neuropathic pain treatment plans should be agreed with patients, taking into account their preferences, individual clinical circumstances, previous treatments tried, local treatment pathway choices, treatment reviews and when to stop treatment. A template patient information leaflet is available to support this which can be adapted locally if needed.
- Ensure patients understand where treatments are unlicensed and that informed consent is given. Attachment 4, a patient information leaflet can be used or adapted locally to support this.
- Consider the potential for misuse or illicit diversion before prescribing pregabalin, gabapentin or tramadol. Patients should be told about the risk of abuse and dependence. Attachment 4, a patient information leaflet highlights this and patients can be advised to read the medicine's patient information leaflet which includes this warning.
- When initiating treatment, titrate doses gradually and increase to the maximum tolerated dose before considering switching or stopping treatment if not effective.
- Review treatment eight weeks after initiation and discontinue if ineffective (withdrawal from treatment should be gradual and cross-tapered with new treatment).
- Assess the need for continued treatment at each review, including the possibility of gradually reducing the dose if sustained improvement is observed.
- Ensure that all pregabalin and gabapentin prescriptions are written generically and as capsules (rather than tablets) for all indications.
- Where nortriptyline tablet doses of 50mg or 75mg are needed, use multiples of 25mg tablets as the nortriptyline 50mg tablets are more costly.

Savings available

If 5% of patients with neuropathic pain were reviewed and a dose reduction attempted, or treatment discontinued if ineffective/not tolerated, then this could **save approximately £5.6 million annually across England and Wales.**

Across England and Wales £3.6 million is spent on the Lyrica® brand of pregabalin annually. (NHSBSA October 2020 to December 2020). Switching from Lyrica® to generic pregabalin could **save £3.3 million annually across England and Wales or £5,188 per 100,000 population.**




Across England and Wales £1.36 million was spent on nortriptyline 50mg tablets. (NHSBSA October 2020 to December 2020). Prescribing two 25mg tablets instead of one 50mg nortriptyline tablet could **save £1.25 million across England and Wales or £1,954 per 100,000 population.** (NHSBSA October 2020 to December 2020).

Table 1. 28 day cost comparisons for neuropathic pain treatments

Drug preparation	Dose range ¹	Cost per 28 days ²
Amitriptyline tablets	10mg – 75mg at night	£1.08 - £2.83 (Using 1x25mg tablet plus 1x50mg tablet for 75mg dose)
Duloxetine gastro-resistant capsules	60mg – 120mg daily	£2.36 - £4.72
Pregabalin capsules	150mg – 600mg daily (2 or 3 divided doses)	£2.23 - £4.32 (Twice daily dosing) £2.99 - £4.98 (Three times daily dosing)
Lyrica® (pregabalin) capsules	150mg – 600mg daily (2 or 3 divided doses)	£64.40 (Twice daily dosing) £96.60 (Three times daily dosing)
Gabapentin capsules	300mg – 1.2g three times daily	£2.90 - £15.41
Nortriptyline tablets (unlicensed use)	10mg – 75mg at night	£1.03 - £3.52 (Using 3x25mg tablets for 75mg dose) £1.03 - £40.35 (Using 1x25mg tablet plus 1 x 50mg tablets for 75mg dose)
Capsaicin 0.075% cream	Apply three to four times a day	£27.22 - £36.29 (Assume 1g used per application)
Tramadol immediate release capsules	50mg - 100mg every 4 to 6 hours up to a maximum of 400mg/24 hours – acute, short term use	£3.73 - £7.46 (Using 50mg capsules and a 200mg - 400mg daily dose)

References

1. Joint Formulary Committee. British National Formulary (online). London: BMJ Group and Pharmaceutical Press; February 2021.
<https://www.medicinescomplete.com/mc/bnf/current/>
2. NHS Business Services Authority. Drug Tariff February 2021.
<https://www.nhsbsa.nhs.uk/pharmacies-gp-practices-and-appliance-contractors/drug-tariff>

Additional resources available	 Bulletin	https://www.prescqipp.info/our-resources/bulletins/bulletin-216-neuropathic-pain/
	 Tools	
	 Data pack	https://data.prescqipp.info/views/B216_Neuropathicpain/FrontPage?:iid=1&isGuestRedirectFromVizportal=y&embed=y

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