

Analgesic Therapy Flow Chart for Neuropathic Pain recommended by York Pain Management clinic (not including trigeminal neuralgia)

This should be used in conjunction with the following NICE guideline:

<http://www.nice.org.uk/guidance/cg173>

see <http://www.yorkandscarboroughformulary.nhs.uk/> or CCG websites for formulations of choice

Offer a choice of:

- Amitriptyline: max. 75mg (or 20mg if on concurrent serotonin releasing medication) to be taken 12 hrs before desired waking.
- Gabapentin: max. 1200mg tds
- Duloxetine: max. 60mg bd
- Pregabalin: max. 300mg bd

- Up-titrate each medication gradually over several weeks starting at lowest available dose.
- Only commence one medication at a time.
- Increase each medication gradually up to maximum unless side effects prevent this

If ineffective at maximum dose, wean and stop.

If only partially effective, keep at most effective dose and add in another.

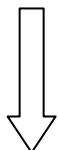
Step 1



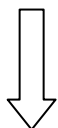
Step 2



Step 3



Step 4



Step 5

- If first choice not tolerated or ineffective then offer one of remaining 3 and consider switching again if second and third line also not effective or tolerated.
- If partial efficacy, consider using a combination of the above.

Is pain localised?

Yes

No

Consider **capsaicin cream** (effective in 15%)

Tramadol for short term rescue therapy only

Still no satisfactory benefit?

Refer to specialist pain clinic

**Tapentadol may be considered
(for initiation by pain specialist only)**

Tapentadol continue prescription; maximum dose 450 mg per day