



## Letter to the Editor

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### Pregabalin safety assessment among patients with uraemic pruritus

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Dear Editor,

Pregabalin (Lyrica®) use for a variety of neuropathic conditions has increased extensively,<sup>1</sup> particularly in dermatological complications such as chronic pruritus and uraemic pruritus (UP). Pregabalin has brought major relief and helped to improve quality of life and overall well-being of patients.<sup>2</sup> Among end-stage renal disease patients (ESRD), pregabalin should be used with caution while treating UP.<sup>1</sup> For a patient with ESRD, the recommended dose ranges from 25–75mg per day.<sup>3</sup> In addition, it is essential that the patient should not have cardiac complications such as a history of or concurrent angioedema, heart failure or atrioventricular (AV) block. Moreover, there are many other medical conditions that should be addressed in advance to ensure the safety of a patient who is supposed to take pregabalin (Table 1). Where cardiac complications are absent, the presence of two minor complications in which pregabalin should be used with caution may lead to a major adverse event, which may outweigh pregabalin’s benefits, keeping in view the patient’s safety.

Unfortunately, until now there has been no rating scale to assist in assessing patient safety before starting pregabalin. Based on manufacturer guides<sup>1</sup>, a rating tool has been devised to assist the practitioner with the safety evaluation before starting pregabalin. A marking scheme is adopted, if the patient has a contraindication, i.e., a cardiac complication or other parameter that can be life threatening (for instance, a platelet count less than  $150 \times 10^3/\mu\text{L}$ ), one mark will be given. However, if the patient has any complication which indicates caution or requires monitoring if pregabalin is given to the patient, a 0.5 score will be given for each such complications. Any patient achieving a score of one or more should not be considered for the use of pregabalin as an outpatient or thorough/frequent assessment should be done to prevent

the chances of life-threatening situation. If the score is less than one, a concurrent assessment should be done to ensure the ongoing safe use of pregabalin. It might be possible that the benefits of pregabalin among ESRD patients outweigh the risks. Nevertheless, assessment in advance will not only reduce the chance of adverse events, but also ensure the long-term use of pregabalin to treat UP among ESRD patients.

**Table 1: Patient safety assessment before starting pregabalin**

Critical complications	Current complication or history	Yes	No
<b>Oedema</b>	Current angioedema*	1	0
	History of angioedema*	1	0
	<b>Cardiac complications</b>		
	Heart failure*	1	0
	History of AV Block	0.5	0
<b>Coagulation Profile</b>			
	Platelets count less than $<150 \times 10^3/\mu\text{L}$ *	1	0
<b>Miscellaneous</b>			
	Obese or over weight	0.5	0
	High creatinine kinase	0.5	0
	History of arthralgia/ Joint swelling	0.5	0
	Patient on ACE Inhibitors	0.5	0
	Blurred vision	0.5	0
<b>Total Score</b>			

Note:

\*Critical parameters if noticed Pregabalin® should not be started and patient should be excluded from the study

\*\* If the patient’s initial assessment **score is 1 or more**, he/she should not be given pregabalin, or should be monitored closely to provide on time support in the case of an adverse event.

Sincerely,

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