



# Neurontin (gabapentin)

Generic name: Gabapentin

Available strengths: 100 mg, 300 mg, 400 mg,  
600 mg, 800 mg tablets;

100 mg, 300 mg, 400 mg capsules

Available in generic: Yes

Drug class: Anticonvulsant/mood stabilizer

## General Information

---

**Neurontin (gabapentin)** is better known for its use as an anticonvulsant—a medication for treating epilepsy. This may present some confusion for patients, as well as their families, when they are prescribed Neurontin without a history of seizures. Although Neurontin is approved by the U.S. Food and Drug Administration for the treatment of epilepsy and late-stage nerve pain from herpes zoster (*shingles*), this medicine has many uses other than its approved indications. The use of a medication for its approved indications is called its *labeled use*. In clinical practice, however, physicians often prescribe medications for *unlabeled* (“off-label”) uses when published clinical studies, case reports, or their own clinical experiences support the efficacy and safety of those treatments. The use of Neurontin for treatment of bipolar disorder, particularly in acute mania, is an example of its off-label use. Other conditions for which Neurontin is commonly used off-label include nerve pain (neuropathy and neuralgia) from complications of diabetes and other causes, migraine headaches, and fibromyalgia.

## Dosing Information

---

Neurontin is usually started at a dosage of 300 mg two or three times a day, and the dosage is increased by 300 mg every 3–4 days as clinically indicated. The usual maximum daily dosage for treatment of bipolar disorder is 1,800–2,400 mg. Because Neurontin is eliminated primarily by the kidneys, patients with significant renal impairment may require lower dosages.

## Common Side Effects

---

Neurontin is generally well tolerated and has very few adverse effects. The common side effects associated with Neurontin are sedation, dizziness, impaired coordination, difficulty with walking (**ataxia**), tiredness, jerky eye movements (**nystagmus**), double vision (**diplopia**), and tremor. Daytime sedation may be reduced by taking a larger proportion of the divided dosage at bedtime. The side effects are generally temporary and subside as tolerance to the medication develops.

## Adverse Reactions and Precautions

---

Neurontin is generally a well-tolerated medication and is infrequently discontinued because of adverse events. Sedation and dizziness are the most frequent side effects that may become troubling, especially for seniors and those taking other sedating medications. Seniors may be susceptible to falling from the effects of vertigo or dizziness. Sedation becomes hazardous when driving or operating machinery. For individuals who are sensitive to these side effects, increasing the dosage slowly or using lower dosages may be necessary.

## Use in Pregnancy and Breastfeeding: Pregnancy Category C

---

There are no adequately controlled studies of Neurontin in pregnant women to determine the medication's risk to the woman and fetus. Compared with lithium, Tegretol, and Depakote, Neurontin is safer for use in pregnancy. However, it is not recommended for use during pregnancy, especially during the first trimester. If Neurontin is required because stopping the medication may result in relapse and present a greater danger to the mother and unborn child, the patient may continue to take Neurontin, after giving informed consent to the physician, or an alternative medication or treatment may be used.

Nursing mothers should not take Neurontin, because it is excreted in breast milk and may be harmful to the baby when ingested. If stopping the drug is not an alternative, breastfeeding should not be started or should be discontinued.

## Possible Drug Interactions

---

Because Neurontin is not extensively metabolized in the liver like many of the other mood stabilizers, it exerts little influence on the hepatic enzymes. Therefore, Neurontin has very few drug interactions of any clinical importance. Patients, however, should be aware that when Neurontin is taken with other medications that have central nervous system side effects, it may make sedation, fatigue, dizziness, and ataxia worse.

Patients taking Neurontin should not consume alcohol because the combination may increase sedation and drowsiness. Moreover, the sedative effects of alcohol may act as a depressant, obscuring the therapeutic effects of Neurontin and complicating treatment.

## Overdose

---

Symptoms of acute overdose with Neurontin include somnolence, double vision, ataxia, slurred speech, lethargy, and diarrhea. In the reported cases of acute overdose, all patients recovered with supportive care.

Any suspected overdose should be treated as an emergency. The person should be taken to the emergency room for observation and treatment. The prescription bottle of medication (and any other medication suspected in the overdose) should be brought as well, because the information on the prescription label can be helpful to the treating physician in determining the number of pills ingested.

## Special Considerations

---

- If you miss a dose, take it as soon as possible, within 2–3 hours of the scheduled dose. If it is close to the next scheduled dose, skip the missed dose and continue on your regular dosing schedule. Do not take double doses.
- Take Neurontin immediately after meals or with food to decrease stomach upset.
- Sedation and dizziness are the most frequent side effects that may become troubling, especially for seniors and those taking other sedating medications. Seniors may be susceptible to falling from the effects of vertigo or dizziness. Sedation becomes hazardous when driving or operating machinery. For individuals who are sensitive to these side effects, increasing the dosage slowly or using lower dosages may be necessary.
- Store the medication in its originally labeled, light-resistant container, away from heat and moisture. Heat and moisture may precipitate breakdown of your medication, and the medication may lose its therapeutic effects.
- Keep your medication out of reach of children.

*If you have any questions about your medication, consult your physician or pharmacist.*

## Notes

---

---

---

---

---

---

---

---

**Copyright © 2009 American Psychiatric Publishing, Inc.** The purchaser of this book is licensed to distribute copies of these handouts in limited amounts. Please see copyright page for further information. The authors have worked to ensure that all information on this handout concerning drug dosages, schedules, routes of administration, and side effects is accurate as of the time of publication and consistent with standards set by the U.S. Food and Drug Administration and the general medical community and accepted psychiatric practice. This handout does not cover all possible uses, precautions, side effects, or interactions of the drug. For a complete listing of side effects, see the manufacturer's package insert, which can be obtained from your physician or pharmacist. As medical research and practice advance, therapeutic standards may change. For this reason, and because human and mechanical errors sometimes occur, we recommend that readers follow the advice of a physician who is directly involved in their care or the care of a member of their family.

From Chew RH, Hales RE, Yudofsky SC: *What Your Patients Need to Know About Psychiatric Medications*, Second Edition. Washington, DC, American Psychiatric Publishing, 2009