ABOUT YOUR MEDICINE

Gabapentin

Neurontin, Gralise, Horizant (gabapentin enacarbil), a nerve-calming medicine

Gabapentin turns down overactive nerve signals, which can ease nerve pain, calm restless legs, and help some seizures.

WHAT IT TREATS	HOW YOU TAKE IT	WHEN IT WORKS	HABIT FORMING
Nerve pain, seizures, anxiety	Usually 3 times a day	Days to 2 weeks	Low, but your body adapts

This medicine carries **no special FDA safety warning** of that kind.

WHAT THIS MEDICINE DOES

- **Gabapentin** quiets overactive nerve signals. It is used for nerve pain, some seizures, and restless legs at night.
- In mental health care it is sometimes added for anxiety or sleep. That is called off-label, meaning outside the printed label.
- It is not an opioid and it is not an anti-inflammatory. It works on the nerves themselves, not on swelling or injury.
- It will not fix what caused the pain. It turns the volume down so you can sleep, move, and get through your day.

HOW TO TAKE IT

- Most people take **gabapentin** three times a day, spread out evenly. Even spacing matters more than the exact clock time.
- You can take it with or without food. A snack alongside it helps if it upsets your stomach or makes you feel woozy.
- Swallow capsules whole. Only split a tablet if your pharmacist tells you that your specific tablet is made to be split.
- If you miss a dose, take it when you remember unless the next one is close. Never take two at once to catch up.
- Antacids block it. If you use one, leave at least **2 hours** between the antacid and your **gabapentin**.

WHAT TO EXPECT

- Your prescriber starts low and builds up over days or weeks. That slow climb is what keeps the sleepiness manageable.
- Nerve pain often eases within **1 to 2 weeks** of reaching a steady amount, and can keep improving for another month.
- The first few days are usually the foggiest. For most people that heavy feeling lifts a lot once the body settles in.
- Working looks like better sleep and fewer sharp, burning, or electric jolts, not pain that disappears completely.

COMMON SIDE EFFECTS

- Sleepiness and a slowed-down, foggy feeling are the most common effects. They are strongest right after an increase.
- Dizziness and unsteadiness happen often. Stand up slowly and use a rail on stairs until you know how it affects you.
- Swelling in the ankles or feet can show up. Put your feet up when you sit, and speak up if your shoes get tight.
- A bigger appetite and some weight gain are common over months. Regular meals and daily movement help more than strict dieting.
- Blurry or double vision can happen early on. It usually settles, but do not drive at all while your vision is off.
- Dry mouth and mild nausea are common. Sip water, try sugar-free gum, and take it with a little food if your stomach objects.

CALL YOUR PRESCRIBER OR GET HELP RIGHT AWAY IF

- Slow or shallow breathing, or being very hard to wake: call **911**. This risk is highest with opioids or alcohol.
- A spreading rash, blisters, peeling skin, or swelling of the face, lips, or tongue: call **911**.
- New or worse thoughts of hurting yourself: call your prescriber today, or call or text **988** if you might act.
- Fever with swollen glands, or yellowing of your eyes or skin: call your prescriber the same day.

WHAT TO AVOID

- Taking **gabapentin** with opioid pain medicine can slow your breathing dangerously. Your prescriber must know about both.
- Alcohol multiplies the sleepiness and unsteadiness, especially while your amount is going up. Skipping it is the safer bet.
- Do not drive until you know how it affects you, and not right after an increase. Grogginess can carry into the next morning.
- Your kidneys clear this medicine, so the right amount depends on your kidney numbers. Your prescriber needs current lab work.
- If you are pregnant, nursing, or planning a pregnancy, tell your prescriber so you can weigh the choices together.

STOPPING IT SAFELY

- Do not stop suddenly. Your body adapts to it, and a quick stop can bring anxiety, sweating, sleeplessness, or nausea.
- If you take **gabapentin** for seizures, stopping fast can set off a seizure. Any change has to come from your prescriber.
- A taper over at least a week, and often longer, is normal. Your prescriber will map out the steps with you.
- If it is not helping, or the side effects are not worth it, say so. There are other options and stopping can be planned.

QUESTIONS TO ASK

- When were my kidney numbers last checked, and how often do they need rechecking?
- Am I taking anything else that could slow my breathing alongside this?
- How long should I give this before we decide whether it is working?
- What should I do if the daytime sleepiness does not improve?

Where this information comes from

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NOTE

Sources are listed in APA 7th edition style. This handout is general information about a medicine, not medical advice, and it does not replace the instructions from your own prescriber or pharmacist. Never start, change, or stop a medicine on your own. If you think you are having a serious reaction, call your prescriber; if you cannot breathe, cannot stay awake, or are thinking of harming yourself, call 911 or 988 right away.