ABOUT YOUR MEDICINE

Pregabalin

Lyrica, Lyrica CR, a nerve-calming medicine used for pain, seizures, and anxiety

Pregabalin quiets over-firing nerves, which can ease burning nerve pain, widespread body pain, and constant anxiety.

WHAT IT TREATS	HOW YOU TAKE IT	WHEN IT WORKS	HABIT FORMING
Nerve pain, anxiety, seizures	2 or 3 times a day	1 to 2 weeks	Some risk, never stop fast

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

WHAT THIS MEDICINE DOES

- **Pregabalin** turns down nerve cells that are firing too easily, which calms burning pain, seizures, and constant worry.
- It is approved for nerve pain from diabetes or shingles, for fibromyalgia, and for certain seizures.
- In mental health it is often used for constant, physical anxiety, which is an accepted off-label use in the United States.
- It is not a benzodiazepine and it is not an antidepressant. It works on a completely different nerve pathway.

HOW TO TAKE IT

- Take it at evenly spaced times, usually two or three times a day. Setting phone alarms is the easiest way to stay even.
- It can be taken with or without food. Taking it with a snack helps if it leaves your stomach unsettled.
- The long-acting form is taken once daily after an evening meal, and must be swallowed whole rather than split.
- If you miss a dose, take it when you remember unless the next one is close. Then skip it and never double up.
- Your prescriber starts low and raises it over a week or two. That slow start is what keeps the dizziness manageable.

WHAT TO EXPECT

- Many people feel a difference within **1 to 2 weeks**, and the full benefit usually shows by around **4 weeks**.
- Working looks like a lower background hum of pain or worry, not a total absence of it. Partial relief still counts.
- The sleepy, unsteady feeling of the first week usually fades even though the benefit stays. Give it time before judging.
- If it is not helping at a full amount after a fair trial, tell your prescriber rather than quietly stopping it.
- It is a controlled medicine in the United States, so refills may need a fresh prescription. Plan ahead of a weekend.

COMMON SIDE EFFECTS

- Dizziness and sleepiness are the most common effects, worst in the first week. Take the largest dose at bedtime if allowed.
- Blurry or doubled vision can happen early and usually settles. Do not drive until your sight feels normal again.
- Swelling in the hands, ankles, or feet is common. Put your feet up, cut back on salt, and tell your prescriber.
- Weight gain is common over months. Regular meals, walking, and watching for creeping portions all help.
- Dry mouth and constipation happen often. Sip water, add fiber and fruit, and keep moving each day.
- Trouble concentrating or finding words can occur. It often improves as your body adjusts or with a smaller amount.

CALL YOUR PRESCRIBER OR GET HELP RIGHT AWAY IF

- Call **911** for trouble breathing, or for swelling of the face, lips, or throat.
- Call **911** for a seizure that is new to you, or one that will not stop.
- Call **988** if thoughts of ending your life show up. It is free and confidential.
- Call your prescriber for muscle pain with fever, or for a rash that spreads.

WHAT TO AVOID

- Alcohol adds heavily to the sleepiness and unsteadiness, and the two together raise the risk of a serious fall.
- Combining this with opioids or sleep medicines can slow your breathing dangerously. Tell your prescriber what you take.
- Do not drive or use machines until you know how it affects your alertness, balance, and eyesight.
- Tell your prescriber about kidney problems, since your kidneys clear this and the amount often needs to be lower.
- If you are pregnant or planning to be, discuss it. There is a registry, and the plan should be made with you.

STOPPING IT SAFELY

- **Never stop suddenly.** Stopping fast can cause anxiety, sweating, trouble sleeping, nausea, and even seizures.
- Your prescriber will lower it over **at least a week**, often longer if you have been on it for a while.
- If you have run out or missed several days, call rather than restarting at your old amount on your own.
- Needing to come off slowly is a property of the medicine, not a personal failing or a sign of anything about you.

QUESTIONS TO ASK

- Do my kidneys change the right amount of this medicine for me?
- How slowly would we lower this if I want to come off it?
- Is this safe alongside my pain medicine or my sleep medicine?
- How long should I try this before we decide it is not working?

Where this information comes from

MedlinePlus. (2023). *Pregabalin*. National Library of Medicine. https://medlineplus.gov/druginfo/meds/a605045.html

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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.