

Amitriptyline for CHRONIC PAIN or ITCHING

SCHEDULE	MORNING DOSE	AFTERNOON DOSE	EVENING DOSE	(PRESCRIPTION Circle 10 mg or 25 mg
Week 1	(none)	(none)	1 tablet	10 mg / 25mg tablets -if 1 tablet works, maintain at that dose; if symptoms persist, may increase by 1 tablet per week. Not to exceed 4 tablets per night without calling the clinic.
Week 2	None	(none)	1-2 tablets	
Week 3	None	None	1-3 tablets	
Week 4	None	None	1-4 tablets	
Week 5	None	None	1-4 tablets	
Week 6 and beyond	None	None	1-4 tablets	

DO YOUR BEST TO STICK WITH THIS SCHEDULE. IF YOU ARE UNABLE TO TOLERATE THIS MEDICATION, CALL YOUR HEALTHCARE PROVIDER.

Please tell your healthcare provider about all medications that you use or any new medications that you are put on. These include prescription, over-the-counter, and herbal supplements.

A gradual increase in your medication is important to prevent unpleasant side effects.

Never increase your dose sooner than every 7 days.

Do not exceed a dose of 150 mg by mouth nightly without discussing this with your provider.

SIDE EFFECTS

Please get emergency medical help if you are having difficulty breathing; swelling of face, lips, tongue, or throat. Please call if you experience new or worsening side effects while on this medication.

Most common side effects: dry mouth, dizziness, upset stomach, nightmares, constipation, diarrhea, blurred vision, decreased appetite, and decrease sex drive.

Do NOT drive or operate machinery until your dose is adjusted and you are comfortable with your dose.

These are general guidelines, call the office with any questions or concerns

Do NOT stop this medication unless you talk with your healthcare provider. You may have unpleasant side effects if you stop the medication suddenly.

LET your healthcare provider know if you are planning to get pregnant!

Amitriptyline for CHRONIC PAIN or ITCHING

SCHEDULE	MORNING DOSE	AFTERNOON DOSE	EVENING DOSE	(PRESCRIPTION Circle 10 mg or 25 mg
Week 1	(none)	(none)	1 tablet	10 mg / 25mg tablets -if 1 tablet works, maintain at that dose; if symptoms persist, may increase by 1 tablet per week. Not to exceed 4 tablets per night without calling the clinic.
Week 2	None	(none)	1-2 tablets	
Week 3	None	None	1-3 tablets	
Week 4	None	None	1-4 tablets	
Week 5	None	None	1-4 tablets	
Week 6 and beyond	None	None	1-4 tablets	

DO YOUR BEST TO STICK WITH THIS SCHEDULE. IF YOU ARE UNABLE TO TOLERATE THIS MEDICATION, CALL YOUR HEALTHCARE PROVIDER.

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A gradual increase in your medication is important to prevent unpleasant side effects.

Never increase your dose sooner than every 7 days.

Do not exceed a dose of 150 mg by mouth nightly without discussing this with your provider.

SIDE EFFECTS

Please get emergency medical help if you are having difficulty breathing; swelling of face, lips, tongue, or throat. Please call if you experience new or worsening side effects while on this medication.

Most common side effects: dry mouth, dizziness, upset stomach, nightmares, constipation, diarrhea, blurred vision, decreased appetite, and decrease sex drive.

Do NOT drive or operate machinery until your dose is adjusted and you are comfortable with your dose.

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Duloxetine hydrochloride for CHRONIC PAIN

WEEK	MORNING DOSE	EVENING DOSE
Week 1	20 or 30 mg	none
Week 2	20 or 30 mg	
Week 3	40 or 60 mg	
	Call Clinic	

DO YOUR BEST TO STICK WITH THIS SCHEDULE. IF YOU ARE UNABLE TO TOLERATE THIS MEDICATION, CALL YOUR HEALTHCARE PROVIDER.

Please tell your healthcare provider about all medications that you use or any new medications that you are put on. These include prescription, over-the-counter, and herbal supplements.

A gradual increase in your medication is important to prevent unpleasant side effects.

If you are depressed, talk with your health care provider about taking your dose twice daily (30 mg by mouth twice daily).

SIDE EFFECTS

Please get emergency medical help if you are having difficulty breathing; swelling of face, lips, tongue, or throat. Please call if you experience new or worsening side effects while on this medication.

Most common side effects: dry mouth, dizziness, upset stomach, difficulty sleeping, constipation, diarrhea, blurred vision, decreased appetite, and discomfort with urination.

Do NOT drive or operate machinery until your dose is adjusted and you are comfortable with your dose.

These are general guidelines, call the office with any questions or concerns

Do NOT stop this medication unless you talk with your healthcare provider. You may have unpleasant side effects if you stop the medication suddenly.

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GABAPENTIN (100 mg tabs) for CHRONIC PAIN OR ITCHING

SCHEDULE	MORNING DOSE	AFTERNOON DOSE	EVENING DOSE	(PRESCRIPTION)
Days 1-3	(none)	(none)	100 mg	100 mg tabs
Days 4-7	100 mg	(none)	100 mg	
Days 8-10	100 mg	100 mg	100 mg	
Days 11-14	100 mg	100 mg	200 mg	
Week 3	200 mg	100 mg	200 mg	
Week 4	200 mg	200 mg	200 mg	
Week 5	200 mg	200 mg	300 mg	100 mg tabs 300 mg tabs
Week 6	300 mg	200 mg	300 mg	
Week 7	300 mg	300 mg	300 mg	
Week 8	300 mg	300 mg	400 mg	100 mg tabs 300 mg tabs
Week 9	400 mg	300 mg	400 mg	
Week 10	400 mg	400 mg	400 mg	
Week 11	400 mg	400 mg	500 mg	
Week 12	500 mg	400 mg	500 mg	
Week 13	500 mg	500 mg	500 mg	

DO YOUR BEST TO STICK WITH THIS SCHEDULE. IF YOU ARE UNABLE TO TOLERATE THIS MEDICATION, CALL YOUR HEALTHCARE PROVIDER.

Please tell your healthcare provider about all medications that you use or any new medications that you are put on. These include prescription, over-the-counter, and herbal supplements.

A gradual increase in your medication is important to prevent unpleasant side effects.

SIDE EFFECTS

Please get emergency medical help if you are having difficulty breathing; swelling of face, lips, tongue, or throat. Please call if you experience new or worsening side effects while on this medication.

Most common side effects: dry mouth, dizziness, upset stomach, headache, constipation, diarrhea, blurred vision, weakness, and loss of balance.

Do NOT drive or operate machinery until your dose is adjusted and you are comfortable with your dose.

These are general guidelines, call the office with any questions or concerns

Do NOT stop this medication unless you talk with your healthcare provider. You may have unpleasant side effects if you stop the medication suddenly.

LET your healthcare provider know if you are planning to get pregnant!

GABAPENTIN for CHRONIC PAIN

SCHEDULE	MORNING DOSE	AFTERNOON DOSE	EVENING DOSE	(PRESCRIPTION)
Days 1-3	(none)	(none)	300 mg	300 mg tabs
Days 4-7	300 mg	(none)	300 mg	
Days 8-10	300 mg	300 mg	300 mg	
Days 11-14	300 mg	300 mg	600 mg	
Week 3	600 mg	300 mg	600 mg	
Week 4	600 mg	600 mg	600 mg	
Week 5	600 mg	600 mg	900 mg	300 mg tabs 600 mg tabs
Week 6	900 mg	600 mg	900 mg	
Week 7	900 mg	900 mg	900 mg	
Week 8	900 mg	900 mg	1200 mg	
Week 9	1200 mg	900 mg	1200 mg	
Week 10	1200 mg	1200 mg	1200 mg	600 mg tabs

DO YOUR BEST TO STICK WITH THIS SCHEDULE. IF YOU ARE UNABLE TO TOLERATE THIS MEDICATION, CALL YOUR HEALTHCARE PROVIDER.

Please tell your healthcare provider about all medications that you use or any new medications that you are put on. These include prescription, over-the-counter, and herbal supplements.

A gradual increase in your medication is important to prevent unpleasant side effects.

SIDE EFFECTS

Please get emergency medical help if you are having difficulty breathing; swelling of face, lips, tongue, or throat. Please call if you experience new or worsening side effects while on this medication.

Most common side effects: dry mouth, dizziness, upset stomach, headache, constipation, diarrhea, blurred vision, weakness, and loss of balance.

Do NOT drive or operate machinery until your dose is adjusted and you are comfortable with your dose.

These are general guidelines, call the office with any questions or concerns

Do NOT stop this medication unless you talk with your healthcare provider. You may have unpleasant side effects if you stop the medication suddenly.

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PREGABALIN for CHRONIC PAIN

This medication can be taken in a twice daily regimen or a regimen that is three times per day.

Twice daily regimen

SCHEDULE	MORNING DOSE	EVENING DOSE	(PRESCRIPTION)
Week 1	(none)	50 mg	50 mg tabs, #150 Call GYN nurse for medication management
Week 2	50 mg	50 mg	
Week 3	50 mg	100 mg	
Week 4	100 mg	100 mg	
Week 5	100 mg	150 mg	
Week 6	150 mg	150 mg	
Week 7	150mg	200 mg	
Week 8	200mg	200 mg	
Week 9	200mg	250 mg	
Week 10	250mg	250 mg	
Week 11	250mg	300mg	
Week 12	300mg	300 mg	

Three times per day regimen

SCHEDULE	MORNING DOSE	AFTERNOON DOSE	EVENING DOSE	(PRESCRIPTION)
Week 1	(none)	(none)	50 mg	50 mg tabs #150
Week 2	50 mg	(none)	50 mg	
Week 3	50 mg	50	50mg	
Week 4	50 mg	50	100 mg	Call GYN Nurse for medication management
Week 5	100 mg	50	100mg	
Week 6	100mg	100	100 mg	
Week 7	100 mg	100mg	150 mg	
Week 8	150 mg	100 mg	150 mg	
Week 9	150 mg	150 mg	150 mg	
Week 10	150mg	150 mg	200 mg	
Week 11	200 mg	150 mg	200 mg	
Week 12	200 mg	200 mg	200 mg	

- A gradual increase in your medication is important to control and/or prevent adverse side effects: most commonly sedation, nausea, and mental confusion.
- If you are having trouble (bothersome side effects) on a given dose level, you should continue the current dose until you no longer have bothersome side-effects. Increase your dose to the next level only when you are comfortable with your current dose.

- Once you have reached a total of **300mg per day** for an entire week, call the office and let us know how you are doing.
 - We will continue to increase your dose until your pain is improved or until you cannot tolerate a further increase in dose, **YOU MAY NOT NEED TO REACH THE MAXIMUM ALLOWABLE DOSE**
 - The maximum dose allowed is 600 mg per day, not more than 200 mg in a single dose
 - Once you reach a stable dose, we will phone in a 30-day supply

SIDE EFFECTS

- Pregabalin may cause peripheral edema, increased appetite, constipation, dizziness, headache, incoordination, somnolence, tremor, blurred vision, and mood changes.
- Do NOT drive or operate machinery until your dose is adjusted and you are comfortable with your dose
- Do NOT discontinue pregabalin unless you talk with your physician. You must slowly taper off pregabalin to avoid withdrawal.
- Please notify your healthcare provider of all medications that you are using, so that we can check for potential drug interactions.
- These are general guidelines, call the office with any questions or concerns

- **LET your healthcare provider know if you are planning to get pregnant!**

Severe Itch Scratch Itch Cycle Tips

1. Night time deep sleep with amitriptyline 25 mg by mouth nightly, 2 hours before bedtime (check for medication interactions, do not use in elderly; only one drink of alcohol per night); if needed can increase by 10 to 25 mg increments weekly, not to exceed 150 mg by mouth nightly. Another option is to use hydroxyzine 25 to 50 mg nightly. Can also use gabapentin starting at 300 mg with gradual increase. Start at 300 mg daily by mouth for 3 days then 300 mg by mouth twice daily for 3 days, then 300 mg by mouth three times a day. It can be increased gradually by 300 mg weekly, not to exceed 1200 mg by mouth three times a day.
2. Prednisone 40 mg by mouth every morning for 5 days, then 20 mg by mouth every morning for 10 days. If those fail, consider a longer oral steroid taper. May require triamcinolone 1 mg/kg up to 80 mg intramuscular using a 1.5-inch needle in buttock (gluteus muscle); repeat in 1 to 2 months if necessary, up to 3 times. There are rarely any problems with depression or emotional instability. It does take 48 hours to start working and it can cause irregular periods with spotting for the next month. The injection must be given into the muscle. Use steroids with caution in diabetics.
3. Cefadroxil 500 mg by mouth twice daily for 10 days (to treat secondary inflammation).
4. Do a yeast culture, identify species. If positive, and patient on amitriptyline, use topical antifungals rather than amitriptyline.
5. Cotton gloves at night.
6. Nightgown without underwear versus cotton pajama pants c string.
7. Tap water soaks in tepid water- after bath apply petrolatum.
8. For daytime itching can use a SSRI such as citalopram 20-40 mg by mouth every morning (don't use with amitriptyline).

After 4 or 5 days, when the skin is not so raw, topical steroids can be used. Start clobetasol propionate ointment 0.05% nightly (d i s p e n s e 30 grams). Then decrease to triamcinolone acetonide ointment 0.1% nightly to twice daily. If she is still itchy, can change to tacrolimus 0.03% or 0.1% alternating days with topical steroid.

Topiramate (DO NOT USE IF HX OF KIDNEY STONES)

SCHEDULE	MORNING DOSE		EVENING DOSE	(PRESCRIPTION)
Week 1	(none)		25 mg	Gradual increase not to exceed 200mg twice per day.
Week 2	25 mg		25 mg	
Week 3	25mg		50mg	
Week 4	50mg		50mg	
Week 5	50mg		75mg	
Week 6 and beyond	75mg		75mg* call our office if you need to go higher than this dose	

DO YOUR BEST TO STICK WITH THIS SCHEDULE. IF YOU ARE UNABLE TO TOLERATE THIS MEDICATION, CALL YOUR HEALTHCARE PROVIDER.

Stay at the dose where your pain is controlled. You do not need to go to maximum dose if your pain is under control.

Please tell your healthcare provider about all medications that you use or any new medications that you are put on. These include prescription, over-the-counter, and herbal supplements.

A gradual increase in your medication is important to prevent unpleasant side effects.

Never increase your dose sooner than every 7 days.

SIDE EFFECTS

Please get emergency medical help if you are having difficulty breathing; swelling of face, lips, tongue, or throat. Please call if you experience new or worsening side effects while on this medication.

Most common side effects: dizziness, upset stomach, nightmares, diarrhea, blurred vision, decreased appetite, weight loss, altered taste, and feeling nervous.

Do NOT drive or operate machinery until your dose is adjusted and you are comfortable with your dose.

These are general guidelines, call the office with any questions or concerns

Do NOT stop this medication unless you talk with your healthcare provider. You may have unpleasant side effects if you stop the medication suddenly.

LET your healthcare provider know if you are planning to get pregnant!