THE PREGABALIN PARADOX

Examining the risk of visual hallucinations persisting post-cessation

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INTRODUCTION

Pregabalin effects on visual function

BLURRED VISION & DIPLOPIA

VISUAL HALLUCINATIONS

Alternative research findings

EFFECTS REMIT POST-TREATMENT

THERAPEUTIC FOR ORGANIC VISUAL HALLUCINATIONS

e.g. Charles Bonnet Syndrome associated with acute vision loss

METHODS

Case details

Ward documents

Electronic records

Literature search

Pubmed

Google Scholar

CASE

64 year old Caucasian lady

Worsened visual acuity & blurred vision on pregabalin course

Eventual complex visual hallucinations - 'small children run'

This persisted following pregabalin cessation

Pregabalin escalation regime

Initial: <u>25mg twice a day</u>

Increased by 50mg daily

Week later: <u>150mg twice a day</u> Increased to 300mg daily

(divided doses)

Side effects at this stage

Ocular comorbidities

Keratoconus

Macular degeneration

Diabetic retinopathy

Psychiatric comorbidities

Social anxiety

Depression

No cognitive disorder

DISCUSSION

DOSE-DEPENDENT

Rapid dose increase - greater risk of visual hallucinations

HIGH-DOSE

600mg initial starting daily dose → visual hallucinations

LOW-DOSE

75mg daily reduces visual hallucinations in dementia

PREGABALIN

Different research findings - notably small sample sizes

An inconsistent relationship

PREDISPOSITION

Hypersensitive visual neuro-receptors increase risk

WITHDRAWAL

Post-cessation period - risk of psychosis (confounders)

VISUAL HALLUCINATION

CONCLUSION

Premorbid risk factors for progressive vision loss

Catalyst of vision loss

Acute loss of vision → visual hallucinations

Keratoconus

Macular degeneration

Diabetic retinopathy

PREGABALIN

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CHARLES BONNET SYNDROME

Pregabalin can contribute to visual loss, and visual hallucinations - but causative pathways remain unclear.

Arguably, rapid dose escalation speeds up rate of vision loss in progressive ocular disorders, increasing risk of visual hallucinations secondary to rapid decline in visual acuity, such as in Charles Bonnet Syndrome. Baseline visual function tests,

monitoring & cautious up-titration of pregabalin prescribing (if absolutely necessary) appears to be safer in these cases.