Article:
Jordan, RI, Mulvey, MR orcid.org/0000-0002-6357-3848 and Bennett, MI orcid.org/0000-0002-8369-8349 (2018) A critical appraisal of gabapentinoids for pain in cancer patients. Current opinion in supportive and palliative care, 12 (2). pp. 108-117. ISSN 1751-4258

https://doi.org/10.1097/SPC.0000000000000337

Table 1: Pharmacokinetics and prescribing information for gabapentinoids (original table with data taken from manufacturer's Summary of Product Characteristics [14])

	Gabapentin	Pregabalin
Bioavailability (%)	Dose-dependent[a]	≥90
T_{max} (h)[b]	2-3	1-2.5
$t_{1/2}$ (h)[c]	5-7	6.3[d]
Plasma protein binding	Nil	Nil
Excretion	Renal (unchanged)	Renal (unchanged)
Adverse effects[e]	Nervous system disorders[f], viral infection, fatigue and fever	Nervous system disorders[f]
Preparations	Capsules, tablets, oral solution	Capsules, oral solution
Frequency of dosing	OD-TDS	BD-TDS

[a] Increasing doses of gabapentin leads to saturation of amino acid transporters and reduced bioavailability. A 300 mg capsule of gabapentin has an absolute bioavailability of 60%.

[b] T_{max} is the time taken to reach maximum steady state plasma concentration.

[c] $t_{1/2}$ is the elimination half-life.

[d] Mean data

[e] Very common ≥1/10

[f] Very common nervous system disorders include somnolence, dizziness, ataxia (gabapentin) and headache (pregabalin). There is a risk of seizures on discontinuation in patients with epilepsy.