Article:
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Table 3 – Detailed summary of treatment-related pain studies.

First author (year)	Pain type	Intervention arm with total daily dose of drugs	Control arm with total daily dose of drugs	Duration of treatment	Number of patients recruited and completed follow-up	Primary outcome measure	Main result(s)
Rao (2007)	CIPN: 'average' daily pain NRS ≥4/10 or ENS≥1/3, current receiving or completed chemotherapy	Gabapentin 300mg/day, titrated to max 2700mg/day +/- NSAIDs for 6 weeks TWO WEEK WASHOUT Placebo for 6 weeks	Placebo for 6 weeks TWO WEEK WASHOUT Gabapentin 300mg/day, titrated to max 2700mg/day +/- NSAIDs for 6 weeks	6 weeks	Recruited: Gabapentin/Placebo – 57; Placebo/Gabapentin – 58 Completed follow-up: Gabapentin/placebo – 32; Placebo/gabapentin - 36	Average pain NRS (0-10) and ENS (0-3)	No significant differences in NRS and ENS for average pain between groups at any stage of study.
Kataoka (2016)	RIM: Head and neck cancer treated with radiotherapy or chemo-radiotherapy, planned total dose of radiotherapy ≥60 Gy, concurrent chemotherapy with cisplatin	Gabapentin 300mg/day, titrated to max 900mg/day, plus standard pain control (paracetamol, short- and long-acting opioids in 3 steps)	Standard pain control (as per intervention protocol)	4 weeks	Recruited: Gabapentin – 11; Control – 11 Completed follow-up: Gabapentin – 9; Control - 11	Average maximum pain VAS (0-100)	Median maximum VAS score greater in gabapentin group (74/100) compared with standard pain control (47/100) but not statistically significant (p=0.552).
de Andrade (2017)	Pain-free, chemotherapy-naïve colorectal cancer patients receiving at least 1 cycle of modified FLOX + oxaliplatin chemotherapy	Pregabalin 3 days before and after chemotherapy infusions (weeks 1-3-5 every 8 weeks), starting dose 150mg/day, titrated to 600mg/day	Placebo 3 days before and after chemotherapy (as per intervention protocol)	6 months post-chemotherapy	Recruited: Pregabalin – 101; Placebo – 98 Completed follow-up: Pregabalin – 78; Placebo - 65	Average pain VAS (0-10)	No significant difference between pain scores at 6 month – 1.03/10 vs. 0.85/10.
Shinde (2016)	Patients scheduled to receive paclitaxel (adjuvant post-operative or neo-adjuvant) for breast cancer	Pregabalin 150mg/day during 12 weeks of chemotherapy	Placebo during 12 weeks of chemotherapy	1 week after chemotherapy for primary outcome (6 months after chemotherapy for secondary outcomes)	Recruited: Pregabalin – 23; Placebo – 23 Completed follow-up: Pregabalin – 19; Placebo - 22	Worst acute pain score over first cycle of treatment	No significant difference between maximum worst pain score following initiation of chemotherapy – 2.6 vs. 3.2 (p=0.56)

Legend: CI = confidence interval, CIPN = Chemotherapy Induced Peripheral Neuropathy, ENS = Eastern Cooperative Oncology Group neuropathy scale, NRS = Numerical Rating Scale, RIM = Radiation-induced mucositis, VAS = Visual Analogue Scale