

Pharmacologic Agents for Neuropathic Pain Classified by Evidence Level

Etiology of pain	Level A rating for efficacy	Level B rating for efficacy	Recommended first-line therapy	Recommended second- or third-line therapy
Diabetic neuropathy ¹	<ul style="list-style-type: none"> • Duloxetine • Gabapentin-morphine • Gabapentin • Oxycodone • Pregabalin • TCAs² • Tramadol alone or with acetaminophen • Venlafaxine ER 	<ul style="list-style-type: none"> • Dextromethorphan 	<ul style="list-style-type: none"> • Duloxetine • Gabapentin • Pregabalin • TCAs • Venlafaxine ER 	<ul style="list-style-type: none"> • Opioids • Tramadol³
Postherpetic neuralgia	<ul style="list-style-type: none"> • Capsaicin 8% patch • Gabapentin • Lidocaine topical • Opioids (morphine, oxycodone, methadone) • Pregabalin • TCAs² 	<ul style="list-style-type: none"> • Capsaicin cream 	<ul style="list-style-type: none"> • Gabapentin • Pregabalin • TCAs • Lidocaine topical⁴ 	<ul style="list-style-type: none"> • Capsaicin • Opioids
Central pain ⁵	<ul style="list-style-type: none"> • Cannabinoids (oromucosal and oral) (MS) • Pregabalin (SCI) 	<ul style="list-style-type: none"> • Lamotrigine (CPSP) • TCAs (SCI, CPSP) • Opioids 	<ul style="list-style-type: none"> • Gabapentin • Pregabalin • TCAs 	<ul style="list-style-type: none"> • Cannabinoids (MS) • Lamotrigine • Opioids • Tramadol (SCI)

CPSP=Central poststroke pain; ER=Extended release; MS=Multiple sclerosis; PHN=Postherpetic neuralgia; SCI=Spinal cord injury; TCAs=Tricyclic antidepressants.

¹ Only TCAs, tramadol and venlafaxine were studied in nondiabetic neuropathies.

² TCAs include amitriptyline, clomipramine, nortriptyline, desipramine and imipramine.

³ Tramadol is recommended first-line therapy in patients with acute exacerbations of pain, especially for the tramadol/acetaminophen combination.

⁴ Lidocaine is recommended first-line therapy mainly in elderly patients.

⁵ Cannabinoids and lamotrigine are proposed for refractory cases.

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