Analgesic impact of treatment with repeated capsaicin patches in localized neuropathic pain

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Background and aims

Localized neuropathic pain (LNP) is a common painful condition associated with an impairment of physical, emotional and social functioning as well as poor sleep quality. In addition, it is associated with an important morbidity and a complex pharmacological management, with multiple adverse effects and poor adherence. The aim of this study was to assess the evolution of pain and the changes in the number of patches used for analgesia in patients treated with capsaicin 8% patches in clinical practice.

Methods

An observational study was conducted on patients with moderate to severe LNP treated with capsaicin 8% patches applied on the skin. Their usual analgesic treatment was also maintained. The variables analysed were analgesic effectiveness, improvement in the neuropathic component of pain and changes in the number of patches used. Patient's degree of satisfaction was also evaluated. Data were also gathered on the safety and tolerability of the patches.

Results

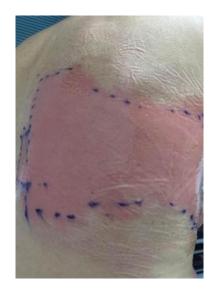
At baseline, forty patients (65% females) were included in the study. The mean age was 47±12.2 years, with an average pain evolution of 88±65 months. All received capsaicin 8% patch treatment in a variety of documented LNP diagnosis.

Neuropathic component of pain 10 9 ** 8 VAS scale (0-10) ** 6 5 0 Burning pain Hyperalgesia Allodynia Post treatment ■ Pre treatment

The main patch application sites were the lower and upper extremities. The mean baseline of continuous burning daily pain significantly improved from the beginning (VAS 6.3±1.7) to the end of the treatment (VAS 4.1±1.9), and a clear improvement in the neuropathic component of pain was observed (p<0.001). Furthermore, the mean duration of the analgesic effect improved from the beginning (1.7±1 months) to the end of the treatment (2.5±1.1 months). Significant differences (p<0.01) were also found in the number of patches used at the beginning (1.2±0.8) and at the end of the therapy (1±0.7). Application site pain was the most common drug-related adverse effect (erythema 82%, burning sensation 72%, stinging 15% and pruritus 7.5%), generally of mild intensity. The satisfaction index was good or adequate for 72% and poor or worse for 28%.







Conclusions

- Capsaicin 8% patch repeated treatment improved continuous pain, hyperalgesia and allodynia in a broad range of localized neuropathic pain etiologies.
- There is a progressive reduction in the number of patches used.
- Capsaicin 8% patch was well tolerated.
- Capsaicin 8% patch is a suitable treatment option for localized peripheral neuropathic pain in monotherapy or combined with other analgesics.

References

Rafael Galvez, Marie-Louise Navez, Graeme Moyle et al. Clin J Pain 2016. Mankowski C, Poole CD, Ernault E, Thomas R, Berni E, Currie CJ, et al. BMC Neurol 2017.

Maihöfner C, Heskamp ML. Curr Med Res Opin. 2013.



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