

Drug dosing guide (adapted from NICE CG 96)

- Start at a low dose as indicated in the table
- Titrate upwards to an effective dose or the persons maximum tolerated dose (but no higher than the maximum dose in the table)

Drug	Start dose	Target dose	Maximum dose
Amitriptyline (£)	10mg ON	50mg ON	75mg ON
Nortriptyline (££)	10mg ON	50mg ON	75mg ON
Duloxetine (£££)	60mg / day ^a	60mg / day	120mg / day
Gabapentin (££)	See patient chart for titration regime	Titrate until patient reports good clinical benefit (doses of 900mg and above – divide into 3 doses)	2.4 g (divided into three doses)
Pregabalin (££££)	150mg / day ^a (divided into two doses) (See patient chart for titration regime)	Titrate until patient reports good clinical benefit	600mg / day (divided into two doses)
Tramadol (££)	50-100mg (not more often than every 4 hours)		400mg /day

^a A lower starting dose may be appropriate in some people
(£) – denotes relative costs of treatments

Additional notes:

- **Amitriptyline** - Start at 10mg. increase by 10mg weekly until minimum of 50mg per day.
- **Nortriptyline** - is a good drug if drowsiness is considered to be a problem to that patient
- Same dosing for Amitriptyline
- **Duloxetine** - Start at 60mg/day, but only use if both Amitriptyline and Nortriptyline have had no effect, or are contra-indicated.

Please note: Pregabalin has a “flat” pricing structure for all strengths (i.e. all strengths cost the same) – i.e. 3 x 25 mg strength costs three times the price of 1 x 75mg – therefore patients should be prescribed the lowest number of tablets to achieve the required dose once the patient is on a stable dose.