

## Commonly used drugs for Syringomyelia (SM)

*You very often have to tweak medication for SM dogs, initially to find what suits them, and later to keep up with changes in their condition.*

### Gabapentin

Also known as Neurontin, stays in the system for approximately 8 hours, should be withdrawn gradually under the guidance of your neurologist/vet.

Gabapentin is not primarily a pain **killer** (in the way that we take an aspirin to zap an existing pain), it is a pain **preventive**, which maintains a level of pain control in the body. If SM symptoms are mild, twice a day may be enough to prevent pain surfacing, even if the amount of Gabapentin in the body drops for a few hours. When pain increases, blanket coverage becomes necessary. The same system is used in hospices to control pain in humans - the level of pain drugs is kept constant so that actual pain never surfaces, rather than allowing pain to develop and then dealing with it.

Gabapentin works through the system (metabolises) in an average of 8.5 hours and it is important to keep up the level of medication in the body - it needs blanket coverage, so to speak. This is why most SM dogs are on Gabapentin x3 daily. Some dogs metabolise Gabapentin more quickly and will be on x4 a day.

You will learn to recognise signs of discomfort in your own dog and in consultation with your vet adjust time and level of dosage accordingly. Basically, it's working out how long it takes for your particular dog to metabolise.

Gabapentin raw is extremely irritating to the gut lining, if you have to split the capsules you will need to obtain empty gelatine capsules to divide into two.

### Lyrica / Pregabalin

A potent form of Gabapentin and is used in the treatment of neuropathic pain, it is the first drug to be approved in the treatment of Fibromyalgia.

Pregabalin is easily absorbed making for more predictable dosing. It has been suggested that Pregabalin can begin reducing pain as quickly as one day after it has been started in much lower doses and quicker than Gabapentin.

Pregabalin is expensive, the patent for expires in October 2013, and that would be the earliest that a generic version will become available.

## Trocoxil

Troxocil is a once per month drug, it **stops the lows on a daily basis** and keeps the pain relief at a consistent level. It blocks pain (an enzyme), so in layman's language "it shut's the gate". This normally used with Gabapentin or neuropathic drugs.

## Cimetidine / Zitac / Tagamet

Normally used with a neuropathic pain Inhibitor as above.

Cimetidine/Zitac reduces the amount of cerebral-spinal fluid circulating round the brain. With CM/SM the fluid circulates slowly and builds up in the ventricles and - as syringes - in the spinal cord, causing pain. But it takes more than a few days for Zitac to have any noticeable effect and it is definitely not a pain reliever - except indirectly in the long-term by reducing build-up and pressure. There is slight evidence that over several months the use of a CSF reducer such as Zitac can prevent a syrx getting worse, but researchers don't now seem to think that this really works. The initial prescribed drugs is an experimental starting point.

The majority find it either isn't enough right away or need to up the dosage over time or try an additional pain killer eg. Metacam, Previcox etc. SM individual dogs can have very different experiences with different drugs and it often is a lot of work to find the right 'cocktail'.