

Gabapentin or Pregabalin with Opioids Plan-Based Audit Executive Summary December 11, 2025

Background

On November 15, 2023, the Texas Department of Insurance, Division of Workers' Compensation (DWC) announced an audit of the prescribing practices of health care providers when prescribing Gabapentin or Pregabalin in combination with opioids. A copy of the plan for the "Gabapentin or Pregabalin with Opioids Plan-Based Audit" can be found here: www.tdi.texas.gov/wc/hcprovider/documents/gabapentinaudit1123.pdf.

Purpose for Plan-Based Audit

- Promote the delivery of quality, cost-effective healthcare, which protects the safety of injured employees.
- Ensure that prescribing practitioners adhere to the Official Disability Guidelines (ODG) Drug Formulary and medically accepted standards of care for prescribing Gabapentin or Pregabalin in combination with opioids.
- Ensure that the prescribing of Gabapentin or Pregabalin in combination with opioids is accompanied by appropriate decision-making and recordkeeping in support of a treatment plan tailored to a specific injured employee.
- Support return-to-work outcomes, improve quality of life, and avoid unnecessary disability.

Overall Assessment

The Medical Advisor Recommendations

The initial selection resulted in 10 Subjects with five cases per Subject. Of the 10 Subjects for review:

- Three reviews were closed without further action.
- Seven reviews were closed with letters of education.

Summary of Audit Observations Related to Prescribing Practices

The audit did not identify any issues requiring referral to Enforcement. However, we noted opportunities for improvement in prescribing practices, particularly in aligning treatment decisions with ODG guidelines.

Recent evidence shows that Gabapentin and Pregabalin may provide limited benefit for many chronic pain conditions, and side effects are more prevalent than formerly recognized. ODG generally does not recommend long-term opioid use for chronic pain, and both CDC guidance and the prescribing information for Gabapentin and Pregabalin advise caution when these medications are used with opioids. Additionally, there is no compelling evidence demonstrating that Gabapentin and Pregabalin reduce opioid use or have an opioid-sparing effect.

Recommendations for Prescribers

1. Avoid Routine Co-Prescription: Limit gabapentinoid-opioid combinations, including tramadol, unless benefits are well-documented.
2. Start Low, Go Slow: Initiate at lowest effective doses (e.g., gabapentin 300 mg/day, pregabalin 75 mg/day) and adjust the doses cautiously.
3. Monitor Regularly: Reassess efficacy and AEs every four to six weeks; screen for misuse. A lack of clear and objective functional improvement (therapeutic benefit) does not establish medical necessity to continue treatment with any treatment.
4. Use EHR Alerts: Leverage electronic health record warnings for high-risk combinations.
5. Prioritize Non-Pharmacologic Options: Consider physical therapy or cognitive behavioral therapy, which are effective for chronic pain.
6. Attend CME Sessions: Participate in pain management and opioid stewardship training.

Evidence-Based Medicine Criteria

While ODG was the baseline for reviewing the selected cases, there was other evidence-based medicine that was indicated by either subjects, MQRP members, or the medical advisor. References to this evidence-based medicine can be found at:

- Moore RA, et al. Pregabalin for acute and chronic pain in adults. *Cochrane Database Syst Rev.* 2009;3:CD007076. DOI: 10.1002/14651858.CD007076.pub2
- Derry S, et al. Gabapentinoids for neuropathic pain: A systematic review and meta-analysis. *Pain.* 2023;164(4):e103-e114. DOI: 10.1097/j.pain.0000000000002810

- Gomes T, et al. Gabapentin, opioids, and the risk of opioid-related death: A population-based case-control study. PLoS Med. 2017;14(10):e1002396. DOI: 10.1371/journal.pmed.1002396
- FDA. FDA warns about serious breathing problems with gabapentin and pregabalin. FDA Drug Safety Communication. 2019. Available at: FDA warns about serious breathing problems with seizure and nerve pain medicines gabapentin (Neurontin, Gralise, Horizant) and pregabalin (Lyrica, Lyrica CR) | FDA
- Dowell D, et al. CDC clinical practice guideline for prescribing opioids for pain — United States, 2022. MMWR Recomm Rep. 2022;71(3):1-95. DOI: 10.15585/mmwr.rr7103a1