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**Efficacy of pregabalin in the treatment of generalized anxiety disorder: double-blind, placebo-controlled comparison of BID versus TID dosing.**Pohl RB¹, Feltner DE, Fieve RR, Pande AC.**Author information****Abstract**

Pregabalin is a new anxiolytic that acts as a presynaptic inhibitor of the release of excessive levels of excitatory neurotransmitters by **selectively binding to the alpha2-delta subunit of voltage-gated calcium channels**. The current study evaluated the **anxiolytic efficacy of BID versus TID dosing of pregabalin in patients with generalized anxiety disorder**. Outpatients with Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition generalized anxiety disorder and having baseline Hamilton Anxiety (HAM-A) total scores ≥ 20 were randomized to 6 weeks of double-blind treatment with pregabalin **200 mg/d (BID; N = 78)**, **400 mg/d (BID; N = 89)**, or **450 mg/d (TID; N = 88)** or placebo (N = 86). Mean improvement in HAM-A total score at last observation carried forward end point was significantly greater on pregabalin 200 (P = 0.006), 400 (P = 0.001), and 450 mg/d (P = 0.005) compared with placebo. Pairwise comparisons of BID versus TID dosing found no difference in HAM-A change score at end point. **All 3 pregabalin dosage groups showed significantly greater efficacy** versus placebo at end point on the HAM-A psychic and somatic anxiety factor scores. Improvement on both factors was rapid: significance versus placebo was achieved as early as the first assessment at week 1, with $\geq 30\%$ reduction in HAM-A severity and equal or greater improvement for every subsequent visit in $\geq 38\%$ of patients in all 3 pregabalin dosage groups (P ≤ 0.001). Pregabalin was well tolerated, and despite the fixed-dose study design, **discontinuations caused by adverse events ranged from 9% to 13%--comparable with that observed with placebo (8%)**. This study demonstrates that pregabalin is an effective treatment of generalized anxiety disorder, with **BID dosing showing similar efficacy and comparable tolerability with TID dosing**.

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