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Gabapentin reduces neurovisceral pain of porphyria.

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Abstract

PURPOSE: Gabapentin is well known for pain control. Here, we report that gabapentin is a good adjunct for visceral pain in a porphyria patient.

CASE REPORT: A young female was admitted due to acute abdomen. On admission, she was noted to have hyponatremia, tachycardia, and hypertension. Then, she had episodes of seizure and confusion. Gabapentin was prescribed for the control of seizure and pain before the diagnosis of acute intermittent porphyria was confirmed. Seizure did not occur after gabapentin. Pain severity also significantly reduced with visual analogue scale from 10 to 4. The severity of pain rebounded after gabapentin was withdrawn. When the diagnosis was proved, the neurovisceral pain further decreased with combination of morphine and gabapentin and subsided after treatment with hematin.

CONCLUSION: Our report indicates that gabapentin can be considered in porphyria patients, especially when patients had seizures or acute abdomen, when morphine is not available or contraindicated, when abdomen pain transforms as chronic pattern, and when neuropathic pain occurs in extremities.

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