**Gabapentin and Polio Survivors**
(Brand names=Neurontin, Horizant, and Gralise)
A Q&A with Primary Care Physician
By Dr. Marny Eulberg, MD

**Question:**
I started gabapentin for help with my “polio” leg jerking and sleeping at night. I take one at bedtime (low dose 100 mg.) and two if I have been very active throughout the day. It has definitely seemed to help with me for sleep, but I feel as though I’m definitely getting weaker.

**Answer:**
This is a good question and I’m not aware of any scientific research addressing this question. Gabapentin (and it’s cousin—pregabalin —brand name=Lyrica) do their work at the site of neurons—peripherally and at the brain level. So they might “mask” symptoms that could be a warning about overdoing since they don’t really fix the problem causing the symptoms.

I’m sorry to hear that your leg has become weaker but there is no way to know if that would have happened (or how much weakness might have happened) if you had been aware of the symptoms and been able to curtail your activities. The natural history of PPS is increasing weakness over time so it is difficult to say how much weakness would have occurred just as a result of a year going by.

Also getting poor sleep from symptoms is not very good for muscle recovery overnight— so I think this might be another of those “chicken or egg” kind of questions.

That being said – I’d like to talk more about this medication.

Originally, Gabapentin was developed as a medicine to treat seizures, particularly “partial” seizures but it was also found to be helpful for neuropathic pain (as a result of shingles or peripheral neuropathy and sometimes nerve pain from a “pinched nerve”), and possibly also for some menopausal symptoms. It also has been used for acute pain after certain surgeries, “restless legs” symptoms, and essential tremor.

How does gabapentin work? Gabapentin treats seizures by decreasing abnormal excitement in the brain. Gabapentin relieves the pain of post herpetic neuralgia (PHN) by changing the way the body senses pain. It is not known exactly how gabapentin works to treat restless legs syndrome.

- **Side Effects.** Drowsiness, dizziness, loss of coordination, tiredness, blurred/double vision, unusual eye movements, or shaking (tremor) may occur. Other possible side effects include swelling in hands or feet (this is more likely with Lyrica—a cousin of gabapentin) or changes in mood or anxiety.
- **Interaction with other medications or supplements.** Any medicine, including alcohol, that can on its own cause drowsiness or brain fogginess may increase the nervous system side effects of gabapentin.
- **Antacids (containing aluminum or magnesium) may interfere with the absorption of this medication. Therefore, if you are also taking an antacid, it is best to take gabapentin at least two hours after taking the antacid.**
- **Use of Gabapentin in a person who has had polio.** There are anecdotal reports about the use of gabapentin for post-polio pain, but no controlled, double blind research supporting the use of gabapentin for symptoms of PPS. Although polio survivors may be prescribed gabapentin for other co-existing conditions such as post herpetic neuralgia or diabetic neuropathy.

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Gabapentin, in some instances, has decreased pain in polio survivors but may have also possibly led to increased weakness (because the person now was able to “overdo” and without pain as an indicator that they should stop or cut down on activities).

Please see the side effects listed above. The ones that may be of particular concern to polio survivors are the dizziness, loss of coordination and vision difficulties, especially as this relates to increased fall risk.

A family medicine physician, Dr. Eulberg, is a polio survivor herself. She is located in Wheat Ridge, CO.

Do you have a question for Dr. Eulberg? Email us at: info@papolionetwork.org

Additional articles and videos with Dr. Eulberg are on the “Living with Post-Polio Syndrome” page of our website.