

# Pharmacy Update August 2018

# **Appropriate Use of Topical Pain Medications**

Topical pain medications are often used as adjuncts or alternatives to treat specific types of acute and chronic pain. While topical agents have the advantages of lower pill burden and lower risk of some systemic adverse events compared to oral analgesics, topical agents are not FDA-approved to treat all types of pain. Lidocaine patch and topical diclofenac formulations are often prescribed to treat types of pain for which they lack both evidence of efficacy and FDA approval.

Lidocaine patches are frequently prescribed inappropriately for back pain and surgical incision post-op pain. Diclofenac gel and solution are often inappropriately prescribed for generalized muscle pain and strains. To date, there is insufficient evidence to support the use of these drugs beyond their current labeled indications.<sup>2</sup> To ensure appropriate prescribing, please note the following FDA-approved indications for lidocaine patch 5% and diclofenac gel, patch, and solution:

FDA Indication <sup>3</sup>	Medication	MCAL	OC/OCC
Postherpetic Neuralgia	lidocaine patch 5% (Lidoderm)	PA§	PA§
Osteoarthritis Pain	diclofenac gel 1% (Voltaren)	Formulary with QL	Formulary
Acute Pain due to Minor Strains, Sprains, or Contusions	diclofenac patch 1.3% (Flector)	PA	NF
Osteoarthiritis of Knees	diclofenac 1.5% solution	PA	NF
	diclofenac 2% solution (Pennsaid)	PA	NF
Actinic Keratosis	diclofenac gel 3% (Solaraze)	PA	PA

MCAL: Medi-Cal, OC: OneCare, OCC: OneCare Connect, PA: Prior authorization, QL: Quantity limit, NF: Non-formulary

Other types of pain for which lidocaine patch and topical diclofenac are not indicated can be effectively treated with some oral medications. Treatment of neuropathic pain may include gabapentin, tricyclic antidepressants (TCAs), and serotonin and norepinephrine reuptake inhibitors (SNRIs), while treatment of nociceptive pain may involve nonsteroidal anti-inflammatory drugs (NSAIDs):<sup>4,5,6</sup>

## **Treatment Alternatives\*:**

### **Neuropathic Pain**

gabapentin\*: 300-1200mg TID
duloxetine\*: 60-120mg QD
venlafaxine: 150-225mg QD

#### **Nociceptive Pain**

naproxen<sup>¥</sup>: 250mg Q6-8H or 500mgQ12H

ibuprofen<sup>¥</sup>: 400mg Q4-6H
meloxicam<sup>¥</sup>: 7.5-15mg Q24H

#### References

- 1. Derry S, Moore RA, Gaskell H, et al. Topical NSAIDs for acute musculoskeletal pain in adults. Cochrane Database Syst Rev, 2015;(6):CD007402.
- 2. Haroutiunian S, Drennen D, et al. 2010. Topical NSAID therapy for musculoskeletal pain. Pain Medicine, 11:535-549.
- 3. DrugDex accessed June 2018.
- 4. Moulin DE, Clark AJ, Gilron I, et al. 2007. Pharmacological management of chronic neuropathic pain Consensus statement and guidelines from the Canadian Pain Society. Pain Res Manage, 12(1):13-21.
- 5. Dworkin RH, O'Connor AB, Backonja M, et al. 2007. Pharmacologic management of neuropathic pain: Evidence-based recommendations. *Pain*, 132(3):237-251
- 6. Drugs for Pain. 2013. Treatment guidelines from the Medical Letter. 11(128):31-42.

Medi-Cal Educational Bulletins are available through the CalOptima website at <a href="www.caloptima.org">www.caloptima.org</a>: Providers-Medi-Cal Pharmacy Resources

The CalOptima Approved Drug List is available on our website: <a href="www.caloptima.org">www.caloptima.org</a> and for PDA download at <a href="www.epocrates.com">www.epocrates.com</a>

<sup>§</sup> PA criteria for approval includes the medically-accepted indication of diabetic neuropathy

<sup>&</sup>lt;sup>≠</sup>Requires renal adjustment. <sup>¥</sup>Avoid use in chronic kidney disease

<sup>\*</sup>Note: This is an abbreviated formulary list. Please consult CalOptima's approved drug list available on Epocrates.