

Gabapentin to reduce pain in women aged between 18 and 50 years with chronic pelvic pain: the GaPP2 RCT

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Plain English summary

The GaPP2 RCT

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Plain English summary

What was the question?

Long-standing (chronic) pelvic pain affects over 1 million women in the UK, but there is a lack of proven treatments. If no underlying cause is found, the pain is much more difficult to treat. Gabapentin, which is used to treat other chronic pain conditions, is being increasingly prescribed. There is no evidence to show whether or not gabapentin is effective for chronic pelvic pain, so we conducted a clinical trial. We also wanted to understand whether or not we could see changes in the brains of women with chronic pelvic pain and whether or not these changes can predict response to gabapentin.

What did we do?

We involved 306 women with chronic pelvic pain, for which no cause had been found, and randomly assigned them to take gabapentin or placebo for 16 weeks. We collected information on pain, physical health and emotional well-being at the beginning and end of the study. Women scored their pain from 0 to 10 and sent this score by text message. We asked 45 participants to undergo a brain scan to look at brain activity before and during treatment.

What did we find?

Gabapentin did not reduce pain and did not improve any other aspects of the women's life compared with placebo. Side effects were more common with gabapentin than placebo. We identified areas of the brain that responded to gabapentin.

What does this mean?

Women with no obvious cause for their chronic pelvic pain should be made aware that gabapentin will not relieve their pain and may give them unpleasant side effects. More research is required to see if physiotherapy or talking therapies can help instead.

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This report

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