



Scientific FAQ Sheet

For HCP Engagement – Neuropathic Pain Management

Top 5 Clinical FAQs About Neurava™

Concise, evidence-based answers to common HCP queries

Q1: What is the mechanism of action?

Pregabalin binds to $\alpha 2\text{-}\delta$ subunit of voltage-gated calcium channels, reducing excitatory neurotransmitter release.

Q2: How soon does it work?

Pain relief can begin as early as **Week 1**; benefits improve over 8–12 weeks.

Q3: What about sedation?

Drowsiness is usually mild. Titration reduces risk. The SR formulation supports smoother tolerance.

Q4: How to dose Neurava™?

Start with **75 mg OD**, increase to **150 mg OD** if needed. Can be taken with or without food.

Q5: Can elderly patients use it?



Yes, but monitor renal function. SR version improves adherence in older adults.

Supporting Clinical Insights

Backed by science. Designed for daily practice

Titration Guide

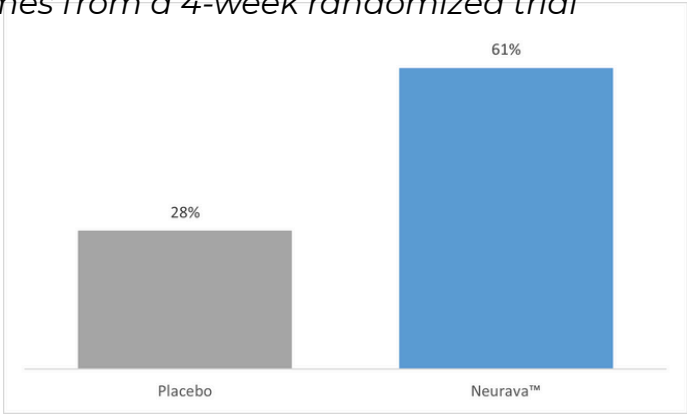
Recommended dosing and schedule for Neurava™

Week	Dose	Notes
Week 1	75 mg OD 	Start low to assess tolerance
Week 2+	150 mg OD 	Titrate if needed for pain control

Neurava™ SR formulation ensures stable plasma levels and once-daily convenience

Clinical Efficacy Snapshot




Pain reduction outcomes from a 4-week randomized trial



% of patients achieving ≥30% reduction in pain scores at Week 4 (N=325, RCT XYZ)

Key Takeaways for Clinical Practice

3-point summary of Neurava™ benefits

-  Efficacy
- Sustained pain relief with titration
-  Tolerability
- SR formulation reduces peak effects
-  Compliance
- Once-daily dosing improves adherence