

	mg/day		
Carbamazepine	<p><6 years old: 2.5-5 mg/kg PO bid initially Increase 20 mg/kg/24 h, divide bid every week prn Maximum: 100 mg bid</p> <p>6-12 years old: 5 mg/kg PO bid initially Increase 10 mg/kg/24 h; divide bid every week prn to usual Maximum: 100 mg/dose bid</p> <p>>12 years old: 200 mg PO bid initially Increase 200 mg/24 h, divide bid every week prn to maximum: 1.6-2.4 g/24 h</p>	<p>Sharp, lancinating neuropathic pain</p> <p>Peripheral neuropathies</p> <p>Phantom limb pain</p>	<p>Similar analgesic effect to amitriptyline</p> <p>Monitor blood levels for toxicity only</p> <p>Side effects include decreased blood counts, ataxia, gastrointestinal irritation</p>
Anxiolytics			
Lorazepam	0.03-0.1 mg/kg q 4-6 h PO or IV Maximum: 2 mg/dose	<p>Muscle spasm</p> <p>Anxiety</p>	<p>May increase sedation in combination with opioids</p> <p>Can cause depression with prolonged use</p>
Diazepam	0.1-0.3 mg/kg q 4-6 h PO or IV Maximum: 10 mg/dose		
Corticosteroids			
Dexamethasone	<p>Dose dependent on clinical situation; higher bolus doses in cord compression, then lower daily dose</p> <p>Try to wean to NSAIDs if pain allows</p> <p>Cerebral edema: 1-2 mg/kg load, then 1-1.5 mg/kg/day divided q 6 h</p> <p>Maximum: 4 mg/dose</p> <p>Antiinflammatory: 0.08-0.3 mg/kg/day divided q 6-12 h</p>	<p>Pain from increased intracranial pressure</p> <p>Bony metastasis</p> <p>Spinal or nerve compression</p>	<p>Side effects include edema, gastrointestinal irritation, increased weight, acne</p> <p>Use gastro protectants such as H₂-blockers (ranitidine) or proton pump inhibitors, such as omeprazole for long-term administration of steroids or NSAIDs in end-stage cancer with bony pain</p>
Others			
Clonidine	2-4 mcg/kg PO q 4-6 h May also use a 100 mcg transdermal	<p>Neuropathic pain</p> <p>Lancinating, sharp,</p>	<p>α_2-adenoreceptor agonist modulates ascending pain sensations</p> <p>Routes of administration: oral, transdermal, and spinal</p>