

- Combination therapy with intrathecal ziconotide and morphine at low doses and with careful titration has been shown to rapidly control opioid-refractory cancer pain; however, the efficacy and safety of intrathecal ziconotide specifically for the treatment of neuropathic cancer pain is not yet known.
- Case reports of eight patients treated with ziconotide intrathecal infusion combined with intrathecal morphine plus bupivacaine for chronic, uncontrolled cancer pain resulted in a reduction of pain intensity in all patients as soon as three to five days after the start of intrathecal ziconotide.
- On the basis of our clinical experience we recommend adding ziconotide to intrathecal opioid-based therapy in cancer patients with neuropathic pain inadequately controlled by intrathecal morphine alone.
- Although ziconotide can be used as a first-line intrathecal treatment option, on the basis of our clinical experience, we recommend adding ziconotide to intrathecal opioid-based therapy in cancer patients with neuropathic pain inadequately controlled by intrathecal morphine alone.

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