



EPILEPSY & Medication

Carbamazepine (TEGRETOL®)

Used for:

- Simple partial and complex partial (psychomotor, temporal lobe) seizures.
- Tonic-clonic (grand mal) seizures.
- Not effective in controlling absence, myoclonic, or atonic seizures.

Precautions:

- Tell your doctor about your medical conditions, especially if you have any liver, heart or kidney disease, blood disorders, bone marrow depression or allergies.
- Make sure your doctor knows if you are someone with a mixed seizure disorder that includes atypical absence seizures.
- If you experience symptoms such as fever, sore throat, rash, ulcers in the mouth, easy bruising, or reddish purple spots on the surface of the skin, you should report them immediately to your doctor.
- Do not drive or operate dangerous machinery until you are sure that carbamazepine does not affect your alertness.

Possible side effects:

Depending on the individual, side effects may occur at varying degrees or not at all, including:

- Double vision
- Headaches
- Dizziness
- Fatigue
- Drowsiness
- Loss of coordination, and unsteadiness
- Nausea/vomiting
- Tremor
- Worsening of certain seizures (especially myoclonic)
- Sodium deficiency in the blood (SIADH)
- Chronic-leukopenia (decreased white blood cell count)
- Cognitive impairment
- Behavioural changes such as agitation or confusion
- Movement disorders (rare)
- Cardiac conduction disturbances (rare)

Allergic Reactions/Idiosyncratic

- Skin rash (if you notice a rash seek immediate medical help)
- Liver/blood toxicity, pancreatitis, and lupus rare.



Tips For Using Carbamazepine (Tegretol®):

- Avoid alcohol.
- Take carbamazepine with food to avoid stomach upset.
- Watch for signs of blood, skin, heart or liver reaction (see Precautions).
- After several weeks or months, your doctor may need to adjust dose to maintain your seizure control.

Drug Interactions:

- Alcohol tolerance may be reduced by carbamazepine.
- Oral contraceptives and cyclosporin may be less effective when used with carbamazepine.
- Oral anticoagulants like Warfarin, tricyclic antidepressants, clozapine, haloperidol (Haldol®), theophylline, doxycycline, ethosuximide, lamotrigine and other antiepileptic drugs are affected.
- Erythromycin (and other macrolide antibiotics), cimetidine (Tagamet®), lithium, propoxyphene (Darvon®), terfenadine, isoniazid, fluoxetine or calcium channel blockers may increase the effect and possible toxicity of carbamazepine.
- Phenobarbital, phenytoin or primidone may reduce the levels of carbamazepine.
- Monoamine oxidase (MAO) inhibitors should not be used with carbamazepine.

Inform your doctor of any other medicines (prescription and nonprescription) or substances you are taking.

Daily Dosage:

Adults - 600-1200 mg/day

Children - 10-30 mg/kg/day

Regimen - Generally taken in three divided doses, or two for controlled release formulation.

Initial daily dose low, with a gradual increase. Dose may have to be adjusted after several weeks or a few months to maintain seizure control.

Forms:

Tablets – 200 mg

Chewtabs – 100 and 200 mg

Controlled-Release Tablets – 200 and 400 mg

Suspension – 20 mg/ml

Missed Dose:

Try to take each dose at the scheduled time. If you miss a dose, take it as soon as possible. However, if the time is close to the next dose, do not take the missed dose and return to your regular dosing schedule. Do not “double-up” the dose to catch up. If you skip a whole day, inform your doctor.

Storage:

Store at room temperature (15 to 30C), protect from light, heat, moisture and keep out of reach of children.

In Pregnancy:

Women who are considering pregnancy should first consult their doctor. Anti-epileptic drugs do slightly increase the risk of fetal abnormalities. Using carbamazepine in conjunction with other anti-epileptic medications increases the risk of fetal abnormalities. Taking folic acid before and during pregnancy and Vitamin K1 during last weeks of pregnancy is suggested. Breastfeeding mothers should use caution as carbamazepine passes into breastmilk.

Warning:

Abrupt withdrawal of any anti-epileptic medication may trigger status epilepticus, a potentially fatal condition of continued seizures without recovery. When there is a need for reduction, discontinuation or substitution of the medication, this should be done gradually and under the physician's care.

Never discontinue anti-epileptic medications or make changes in activities unless specifically advised to do so by an attending physician.

This material has been reviewed by the Ontario Drug Information and Research Centre and is offered to provide general information to the public. Its is not intended to be taken as medical advice. Epilepsy Toronto and its advisors accept no liability. Consult you physician and/or neurologist with any questions you may have.