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By Chris Tighe at 2:06 pm, Oct 14, 2014

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Carbamazepine

Generic Name: carbamazepine (oral) (kar ba MAZ e peen)
Brand Names: *Carbatrol, Epitol, Equetro, TEGretol, TEGretol XR*

- Overview
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What is carbamazepine?

Carbamazepine is an anticonvulsant. It works by decreasing nerve impulses that cause seizures and pain.

Carbamazepine is used to treat seizures and nerve pain such as trigeminal neuralgia and diabetic neuropathy. It is also used to treat bipolar disorder.

Carbamazepine may also be used for purposes not listed in this medication guide.

Important information

You should not take carbamazepine if you have a history of bone marrow suppression, if you are also taking nefazodone, or if you are allergic to an antidepressant such as amitriptyline (Elavil, Vanatrip, Limbitrol), desipramine (Norpramin), imipramine (Tofranil), or nortriptyline (Pamelor).

This medication may cause severe or life-threatening skin rash. Your doctor may recommend a blood test before you start the medication to determine your risk.

Do not start or stop taking carbamazepine during pregnancy without your doctor's advice. Carbamazepine may cause harm to an unborn

Slideshow: View Frightful (But Dead Serious) Drug Side Effects



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Positive evidence of risk
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Drug Class

Dibenzazepine anticonvulsants

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Trigeminal Neuralgia

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baby, but having a seizure during pregnancy could harm both the mother and the baby. Tell your doctor right away if you become pregnant while taking carbamazepine for seizures.

TELL YOUR DOCTOR ABOUT ALL OTHER MEDICINES YOU USE. Some drugs can raise or lower your blood levels of carbamazepine, which may cause side effects or make carbamazepine less effective. Carbamazepine can also affect blood levels of certain other drugs, making them less effective or increasing side effects.

Before taking this medicine

Do not use carbamazepine if you also take nefazodone, or if you have used an MAO inhibitor such as furazolidone (Furoxone), isocarboxazid (Marplan), phenelzine (Nardil), rasagiline (Azilect), selegiline (Eldepryl, Emsam, Zelapar), or tranylcypromine (Parnate) in the last 14 days.

You should not take carbamazepine if you have a history of bone marrow suppression, or if you are allergic to carbamazepine or to an antidepressant such as amitriptyline (Elavil, Vanatrip, Limbitrol), desipramine (Norpramin), doxepin (Sinequan, Silenor), imipramine (Tofranil), or nortriptyline (Pamelor).

Carbamazepine may cause severe or life-threatening skin rash, and especially in people of Asian ancestry. Your doctor may recommend a blood test before you start the medication to determine your risk.

To make sure carbamazepine is safe for you, tell your doctor if you have any of these conditions:

- heart disease, high blood pressure, high cholesterol or triglycerides;
- liver or kidney disease;
- glaucoma;
- a thyroid disorder;
- lupus;
- porphyria; or
- a history of mental illness, psychosis, or suicidal thoughts or actions.

You may have thoughts about suicide while taking carbamazepine. Tell your doctor if you have symptoms of depression or suicidal thoughts. Your family or other caregivers should also be alert to changes in your mood or symptoms.

FDA pregnancy category D. Do not start or stop taking carbamazepine during pregnancy without your doctor's advice. Carbamazepine may cause harm to an unborn baby, but having a seizure during pregnancy could harm both mother and baby. Tell your doctor right away if you become pregnant while taking carbamazepine for seizures.

See also: [Pregnancy and breastfeeding warnings](#) (in more detail)

Carbamazepine can make birth control pills or implants less effective. Use a barrier form of birth control (such as a condom or diaphragm with spermicide) to prevent pregnancy while taking this medicine.

Carbamazepine can pass into breast milk and may harm a nursing baby. You should not breast-feed while you are using this medicine.

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How should I take carbamazepine?

Take carbamazepine exactly as prescribed by your doctor. Do not take in larger or smaller amounts or for longer than recommended. Follow the directions on your prescription label. Your doctor may occasionally change your dose to make sure you get the best results.

Do not crush, chew, break, or open a carbamazepine extended-release tablet or capsule. Swallow the pill whole. Breaking the pill would cause too much of the drug to be released at one time.

You may open the extended-release capsule and sprinkle the medicine into a spoonful of pudding or applesauce to make swallowing easier. Swallow right away without chewing. Do not save the mixture for later use. Discard the empty capsule.

Shake the oral suspension (liquid) well just before you measure a dose. Measure the liquid with a special dose-measuring spoon or medicine cup, not with a regular table spoon. If you do not have a dose-measuring device, ask your pharmacist for one.

The chewable tablet must be chewed before you swallow it.

It may take up to 4 weeks before your symptoms improve. Keep using carbamazepine as directed and call your doctor promptly if this medicine seems to stop working as well in preventing your seizures.

While using carbamazepine, you may need frequent blood tests at your doctor's office.

Do not stop using carbamazepine without first talking to your doctor, even if you feel fine. You may have increased seizures or unpleasant withdrawal symptoms if you stop using carbamazepine suddenly.

Store carbamazepine at room temperature away from moisture, heat, and light.

What happens if I miss a dose?

Take the missed dose as soon as you remember. Skip the missed dose if it is almost time for your next scheduled dose. Do not take extra medicine to make up the missed dose.

What happens if I overdose?

Seek emergency medical attention or call the Poison Help line at 1-800-222-1222.

Overdose symptoms may include shallow breathing, urinating less or not at all, muscle twitching, tremors, slurred speech, or staggering walk.

What should I avoid?

This medication may impair your thinking or reactions. Be careful if you drive or do anything that requires you to be alert.

Drinking alcohol can increase some of the side effects of carbamazepine, and can also increase your risk of seizures.

Avoid exposure to sunlight or tanning beds. Carbamazepine can make you sunburn more easily. Wear protective clothing and use sunscreen (SPF 30 or higher) when you are outdoors.

Grapefruit and grapefruit juice may interact with carbamazepine and lead to unwanted side effects. Discuss the use of grapefruit products with your doctor.

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Carbamazepine side effects

Get emergency medical help if you have any of these signs of an allergic reaction to carbamazepine: hives; difficulty breathing; swelling of your face, lips, tongue, or throat.

Report any new or worsening symptoms to your doctor, such as: sudden mood or behavior changes, depression, anxiety, insomnia, or if you feel agitated, hostile, restless, irritable, or have thoughts about suicide or hurting yourself.

Call your doctor at once if you have a serious side effect such as:

- fever, tired feeling, pale skin, feeling light-headed or short of breath;
- easy bruising, unusual bleeding (nose, mouth, vagina, or rectum), purple or red pinpoint spots under your skin;
- slow, fast, or pounding heartbeats;
- confusion, vision problems, hallucinations;
- nausea, upper stomach pain, itching, loss of appetite, dark urine, clay-colored stools, jaundice (yellowing of the skin or eyes);
- little or no urinating;
- swelling, rapid weight gain;
- headache, slurred speech, vomiting, severe weakness, muscle cramps, loss of coordination, feeling unsteady, fainting, shallow breathing (breathing may stop);
- problems with your fingernails or toenails; or
- severe skin reaction -- fever, sore throat, swelling in your face or tongue, burning in your eyes, skin pain, followed by a red or purple skin rash that spreads (especially in the face or upper body) and causes blistering and peeling.

Common carbamazepine side effects may include:

- dizziness;
- drowsiness; or
- dry mouth, swollen tongue.

This is not a complete list of side effects and others may occur. Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

See also: [Side effects](#) (in more detail)

Carbamazepine dosing information

Usual Adult Carbamazepine Dose for Epilepsy:

Initial dose: 200 mg orally twice a day (immediate and extended release) or 100 mg orally 4 times a day (suspension).

Increase dose at weekly intervals in 200 mg/day increments using a twice daily regimen of extended release or a three times a day or four times a day regimen of the other formulations.

Maintenance dose: 800 to 1200 mg/day.

Dosage generally should not exceed 1200 mg/day.

However, doses up to 1600 mg/day have been used in rare instances.

Usual Adult Carbamazepine Dose for Trigeminal Neuralgia:

Initial dose: 100 mg orally twice a day (immediate or extended release) or 50 mg orally 4 times a day (suspension).

May increase by up to 200 mg/day using increments of 100 mg every 12 hours (immediate or extended release), or 50 mg four times a day. (suspension), only as needed to achieve freedom from pain. Do not exceed 1200 mg/ day.

Maintenance dose: 400 to 800 mg/day.

Some patients may be maintained on as little as 200 mg/day while others may require as much as 1200 mg/day. At least once every 3 months throughout the treatment period, attempts should be made to reduce the dose to the minimum effective level or to discontinue the drug.

Usual Adult Carbamazepine Dose for Bipolar Disorder:

Initial dose: 200 mg orally in tablet or capsule form every 12 hours or 100 mg of oral solution 4 times a day.

Tablets and solution:

Following autoinduction, higher doses will be necessary to maintain drug levels within the therapeutic range of 6 to 12 mcg/mL. The daily dose should be increased in 100 to 200 mg increments at 1 to 2 week intervals.

Maintenance dose: up to 1200 mg daily in 3 or 4 divided doses may be necessary to maintain plasma levels in the therapeutic range.

Extended release capsules:

The dose should be adjusted in 200 mg daily increments (increase by 100 mg twice daily) to achieve optimal clinical response. Doses higher than 1600 mg per day have not been studied.

Usual Adult Carbamazepine Dose for Diabetic Neuropathy:

Initial dose: 100 mg orally in tablet form every 12 hours or 50 mg of oral solution 4 times a day.

The daily dose should be increased in 100 mg increments at 1 to 2 week intervals.

Maintenance dose: 600 to 1200 mg daily in 3 or 4 divided doses may be necessary to maintain plasma levels in the therapeutic range.

Usual Pediatric Dose for Epilepsy:

<6 years:

Initial dose: 10 to 20 mg/kg/day orally in 2 to 3 divided doses (tablets) or 4 divided doses (suspension) .

Increase dose at weekly intervals to achieve optimal clinical response.

Maximum dose: 35 mg/kg/day.

If satisfactory response not achieved, measure levels to determine if in therapeutic range.

6 to 12 years:

Initial dose: 100 mg orally twice a day (immediate or extended release tablets) or 50 mg orally 4 times a day (suspension).

Increase dose at weekly intervals in 100 mg/day increments using a twice daily regimen of extended release or a three times a day or four times a day regimen of the other formulations.

Maintenance dose: 400 to 800 mg/day.

Maximum dose: 1000 mg/day.

>12 years:

Initial dose: 200 mg orally twice a day (immediate and extended release) or 100 mg orally 4 times a day (suspension).

Increase dose at weekly intervals in 200 mg/day increments using a twice a day regimen of extended release or a three times daily to four times daily regimen of the other formulations.

Maintenance dose: 800 to 1200 mg/day.

Dosage generally should not exceed 1000 mg in children 12 to 15 years and 1200 mg/day in patients >15 years.

Doses up to 1600 mg/day have been used in rare instances.

What other drugs will affect carbamazepine?

Sometimes it is not safe to use certain medications at the same time. Some drugs can raise or lower your blood levels of carbamazepine, which may cause side effects or make this medicine less effective. Carbamazepine can also affect blood levels of certain other drugs, making them less effective or increasing side effects.

Taking carbamazepine with other drugs that make you sleepy or slow your breathing can increase these effects. Ask your doctor before taking carbamazepine with a sleeping pill, narcotic pain medicine, muscle relaxer, or medicine for anxiety, depression, or seizures.

Many drugs can interact with carbamazepine. Not all possible interactions are listed here. **TELL YOUR DOCTOR ABOUT ALL OTHER MEDICINES YOU USE**, and any you start or stop using during treatment with carbamazepine, especially:

- theophylline (Aquaphyllin, Asmalix, Elixophyllin, Theolair, Theosol);
- birth control pills or hormone replacement therapy;
- an antibiotic, or drugs to treat tuberculosis;
- antifungal medication such as fluconazole (Diflucan) or ketoconazole (Nizoral);
- a blood thinner such as warfarin (Coumadin, Jantoven);
- cancer medicines;
- a diuretic or "water pill";
- heart or blood pressure medication;
- HIV or AIDS medications;
- medication to treat depression or mental illness, such as aripiprazole or lithium;
- medicines to prevent organ transplant rejection;
- other seizure medications, such as valproic acid;
- steroid medication; or
- thyroid replacement medication.

This list is not complete and there are many other drugs that can interact with carbamazepine. Tell your doctor about all medications you use. This includes prescription, over-the-counter, vitamin, and herbal products. Do not start a new medication without telling your doctor. Keep a list of all your medicines and show it to any healthcare provider who treats you.

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Where can I get more information?

- Your pharmacist can provide more information about carbamazepine.

Remember, keep this and all other medicines out of the reach of children, never share your medicines with others, and use carbamazepine only for the indication prescribed.

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