

Carbamazepine (Tegretol®)

Why is this medication prescribed?

- Carbamazepine treats nerve pain by blocking sodium channels. Carbamazepine is most commonly used to treat trigeminal neuralgia, a chronic pain condition that affects the trigeminal nerve (a nerve carrying sensation from your face to your brain), but may be used to treat other nerve pain conditions.
- Carbamazepine is also used in the management of epilepsy, the treatment of acute mania, and the prevention of bipolar disorder episodes.

How should this medication be used?

- Carbamazepine comes as:
 - an immediate release 200 mg tablet
 - a chewable tablet in 100 mg and 200 mg strengths
 - a 20 mg/mL oral suspension
 - a controlled release 200 mg and 400 mg tablet (do not chew or crush this format)
- Carbamazepine should be taken with food
- When treating nerve pain, carbamazepine is usually started at a low dose in an attempt to minimize side effects. The dose or frequency of administration is then gradually increased over time, often in 100 mg increments on a weekly basis until the desired dose is reached. A standard maintenance dose is 600 to 800 mg/day while the maximum dose is 1200 mg/day.
- Carbamazepine is **NOT** a "pain killer" to be taken whenever pain becomes severe or for managing minor aches and pains. Carbamazepine should be **taken on a consistent basis**, according to your doctor's orders to help you control long-term pain.
- Do **NOT** abruptly stop taking carbamazepine without talking to your doctor. If for some reason carbamazepine is no longer needed, your doctor will reduce your dose gradually.

When does this medication start to work?

The carbamazepine dose is slowly titrated to improve tolerability. This means it may take several weeks before you notice the pain management benefits of this medication.

What special precautions should I follow?

- Before using carbamazepine tell your doctor if you have any of the following health issues:
 - Hypersensitivity reactions to medications such as amitriptyline or phenytoin
 - Liver disease or hepatic porphyria (an uncommon enzyme deficiency condition)
 - A history of bone-marrow suppression (low blood counts) or serious blood disorder
 - Heart conditions (e.g. AV heart block)
 - Are pregnant or breastfeeding or this situation is likely in the near future
- Do not take carbamazepine with a monoamine oxidase inhibitor (MAOI) (e.g. antidepressants phenelzine, tranylcypromine, or moclobemide; Parkinson's disease medications selegiline or rasagiline), or within 14 days of discontinuing a MAOI medication.

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- Tell your doctor and pharmacist about all of the medications you take (prescription, non-prescription, herbals, over-the-counter products, etc.) so drug interactions can be minimized.
 - Caution: grapefruit juice can interact with carbamazepine.
- It is best to wait until your body adjusts to this new medication or a dose change before driving or operating machinery.
- If alcohol is used with carbamazepine it can result in more drowsiness. It is best not to drink alcohol when first starting carbamazepine and your body is adjusting to the new medication.

What should I do if I forget a dose?

- Take the missed dose as soon as you remember unless it is almost time for the next dose. In this case, skip the missed dose and continue your regular dosing schedule.
- Do **NOT** take a double dose to make up for a missed dose.

What side effects can this medication cause?

All medicines can cause side effects, which may range from mild to severe. More common possible side effects of carbamazepine include:

- Drowsiness/sedation, dizziness, confusion, trouble concentrating, nausea and vomiting
- Ataxia, which is a lack of muscle control or coordination of voluntary movements such as walking or picking up objects. Ataxia can affect various movements and create difficulties with speech, eye movement and swallowing.
- A decrease in the counts for various blood cells. Lower white blood cells can result in infections while lower platelet counts can result in bleeding and/or bruising. Bloodwork will be done prior to starting and periodically while taking carbamazepine to monitor the blood cell counts.
- A decrease in sodium levels in the blood or liver harm. This side effect is uncommon. Bloodwork will be done to check for these concerns. Signs/symptoms of liver harm can include nausea/vomiting, yellowing of the skin/eyes, abdominal pain, pale stools, dark urine.
- Serious skin rashes. Although rare, the risk of developing a serious rash is increased in patients of Asian ancestry, particularly those of Han Chinese ancestry that possess a specific gene (HLA-B*1502). Contact your health care provider if you develop a rash while taking this medication.
- Harm to the fetus if pregnancy occurs. Decisions about what to do about carbamazepine use if pregnant or planning a pregnancy will depend on the indication for use. Please talk to your doctor.

What storage conditions are needed for this medication?

- Keep this medication in the container it came in, tightly closed, and out of reach of children.
- Store at room temperature, away from excess heat/moisture (not in the kitchen or bathroom).
- If at any point carbamazepine is stopped by your doctor, return any remaining supply to your community pharmacist for proper medication disposal.

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