- **Rare or very rare** Angioedema · arrhythmia · atrioventricular block · hepatitis · hypothyroidism · pancreatitis · severe cutaneous adverse reactions (SCARs) · systemic lupus erythematosus (SLE) · thrombocytopenia
- **Frequency not known** Agranulocytosis · bone disorders · bone marrow disorders · hypertension · inappropriate antidiuretic hormone secretion like-syndrome · neutropenia · speech impairment

- **ALLERGY AND CROSS-SENSITIVITY** Caution in patients with hypersensitivity to carbamazepine. Antiepileptic hypersensitivity syndrome associated with oxcarbazepine. See under Epilepsy p. 195 for more information.
- **PREGNANCY** See also *Pregnancy* in Epilepsy p. 195.
  Monitoring The dose should be monitored carefully during pregnancy and after birth, and adjustments made on a clinical basis.
- **BREAST FEEDING** Amount probably too small to be harmful but manufacturer advises avoid.
- **HEPATIC IMPAIRMENT** Manufacturer advises caution in severe impairment (no information available).
- **RENAL IMPAIRMENT**
  Dose adjustments Halve initial dose if estimated glomerular filtration rate less than 30 mL/minute/1.73 m^2, increase according to response at intervals of at least 1 week.
- **PRE-TREATMENT SCREENING** Test for HLA-B*1502 allele in individuals of Han Chinese or Thai origin (avoid unless no alternative—risk of Stevens-Johnson syndrome in presence of HLA-B*1502 allele).
- **MONITORING REQUIREMENTS**
  - Monitor plasma-sodium concentration in patients at risk of hyponatraemia.
  - Monitor body-weight in patients with heart failure.
- **PRESCRIBING AND DISPENSING INFORMATION** Patients may need to be maintained on a specific manufacturer's branded or generic oxcarbazepine product.
  Switching between formulations Care should be taken when switching between oral formulations. The need for continued supply of a particular manufacturer's product should be based on clinical judgement and consultation with the patient or their carer, taking into account factors such as seizure frequency and treatment history.
- **PATIENT AND CARER ADVICE**
  Blood, hepatic, or skin disorders Patients or their carers should be told how to recognise signs of blood, liver, or skin disorders, and advised to seek immediate medical attention if symptoms such as lethargy, confusion, muscular twitching, fever, rash, blistering, mouth ulcers, bruising, or bleeding develop.
  Medicines for Children: Oxcarbazepine for preventing seizures www.medicinesforchildren.org.uk/oxcarbazepine-preventing-seizures

- **MEDICINAL FORMS** There can be variation in the licensing of different medicines containing the same drug. Forms available from special-order manufacturers include: oral suspension

Oral suspension

CAUTIONARY AND ADVISORY LABELS 3, 8
EXCIPIENTS: May contain Propylene glycol

- **Trileptal** (Novartis Pharmaceuticals UK Ltd)
  Oxcarbazepine 60 mg per 1 ml Trileptal 60mg/ml oral suspension sugar-free | 250 ml PoM £48.96 DT = £48.96

Tablet

CAUTIONARY AND ADVISORY LABELS 3, 8

- **Oxcarbazepine (Non-proprietary)**
  Oxcarbazepine 150 mg Oxcarbazepine 150mg tablets | 50 tablet PoM £11.14 DT = £8.37
  Oxcarbazepine 300 mg Oxcarbazepine 300mg tablets | 50 tablet PoM £22.61 DT = £5.86
  Oxcarbazepine 600 mg Oxcarbazepine 600mg tablets | 50 tablet PoM £45.19 DT = £38.71
- **Trileptal** (Novartis Pharmaceuticals UK Ltd)
  Oxcarbazepine 150 mg Trileptal 150mg tablets | 50 tablet PoM £12.24 DT = £8.37
  Oxcarbazepine 300 mg Trileptal 300mg tablets | 50 tablet PoM £24.48 DT = £5.86
  Oxcarbazepine 600 mg Trileptal 600mg tablets | 50 tablet PoM £48.96 DT = £38.71

Perampanel

28-May-2019

- **INDICATIONS AND DOSE**

Adjunctive treatment of focal seizures with or without secondary generalised seizures

- BY MOUTH
- Child 12–17 years: Initially 2 mg once daily, dose to be taken before bedtime, then increased, if tolerated, in steps of 2 mg at intervals of at least every 2 weeks, adjusted according to response; maintenance 4–8 mg once daily; maximum 12 mg per day

Adjunctive treatment of primary generalised tonic-clonic seizures

- BY MOUTH
- Child 12–17 years: Initially 2 mg once daily, dose to be taken before bedtime, then increased, if tolerated, in steps of 2 mg at intervals of at least every 2 weeks, adjusted according to response, maintenance up to 8 mg once daily; maximum 12 mg per day

DOSE ADJUSTMENTS DUE TO INTERACTIONS

- Titrate at intervals of at least 1 week with concomitant carbamazepine, fosphenytoin, oxcarbazepine, or phenytoin.

- **INTERACTIONS** → Appendix 1: antiepileptics
- **SIDE-EFFECTS**
  - **Common or very common** Anxiety · appetite abnormal · back pain · behaviour abnormal · confusion · dizziness · drowsiness · dysarthria · fatigue · gait abnormal · irritability · movement disorders · nausea · vertigo · vision disorders · weight increased
- **PREGNANCY** Manufacturer advises avoid. See also *Pregnancy* in Epilepsy p. 195.
  Monitoring The dose should be monitored carefully during pregnancy and after birth, and adjustments made on a clinical basis.
- **BREAST FEEDING** Avoid—present in milk in *animal* studies.
- **HEPATIC IMPAIRMENT** Manufacturer advises caution in mild to moderate impairment; avoid in severe impairment.
  Dose adjustments Manufacturer advises maximum 8 mg per day in mild to moderate impairment.
- **RENAL IMPAIRMENT** Avoid in moderate or severe impairment.
- **PRESCRIBING AND DISPENSING INFORMATION**
  Switching between formulations Care should be taken when switching between oral formulations. The need for continued supply of a particular manufacturer's product should be based on clinical judgement and consultation with the patient or their carer, taking into account factors such as seizure frequency and treatment history.
  Patients may need to be maintained on a specific manufacturer's branded or generic perampanel product.
- **PATIENT AND CARER ADVICE**
  Driving and skilled tasks Manufacturer advises patients and carers should be cautioned on the effects on driving and performance of skilled tasks—increased risk of dizziness and drowsiness.