Carbamazepine

[OCARP] Carpine® 200mg/Tab

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適應症: 癲癇大發作、精神運動發作、混合型發作、癲癇性格及附隨癲癇之精神障礙、

三叉神經痛、腎原性糖尿病尿崩症。

藥理分類:Anticonvulsant, Miscellaneous.

用法用量: Administration: Should be taken with food.

Indications and dosage regimens:

Seizure disorders:

-Adults

Initial, 200 mg BID on the first day, may increase dosage by 200 mg/day at weekly intervals (usual MAX dosage: 1000 mg/day in children 12-15 yrs, 1200 mg/day in patients above 15 yrs, and up to 1600 mg/day in adults).

ATC Code: N03AF01

Maintenance, adjust to the minimum effective level, usually 800-1200 mg/day.

-Pediatric patients

Up to 6 yrs:

Initial, 10-20 mg/kg/day in 2-3 divided doses, may increase dosage by 100 mg/day at weekly intervals as needed.

Maintenance, < 35 mg/kg/day in 3 or 4 divided doses.

6-12 yrs:

Initial, 100 mg BID on the first day, may increase dosage by 100 mg/day at weekly intervals as needed.

Maintenance, adjust to the minimum effective dosage, usually 400-800 mg/day, MAX 1 g/day.

Trigeminal neuralgia:

- -Initial, 100 mg Q12H, may increase by 200 mg/day (divided into 2 doses) as needed (MAX 1200 mg/day).
- Maintenance, 400-800 mg/day (range 200-1200 mg/day); at least once every 3 months, make attempts to decrease dosage to the minimum effective level or to discontinue.

Bipolar disorder:

200-600 mg/day in 3-4 divided doses, may increase dosage gradually at weekly intervals up to a MAX of 1600 mg/day as needed.

Diabetes insipidus, Central or partial:

300-600 mg/day if used as sole therapy; OR

200-400 mg/day if used concurrently with other antidiuretic agents.

不良反應: 噁心、嘔吐、沒胃口、頭暈、視線模糊、嗜睡、動作不協調、言語不清、口 乾,過敏,白血球降低等。

交互作用: 1.Carbamazepine 經由 CYP3A4 酵素系統代謝。併用 CYP3A4 抑制劑或 CYP3A4 誘導劑,可能影響 carbamazepine 的血中濃度。

- 2. Carbamazepine 屬強效 CYP3A4 誘導劑,若與其他經由 CYP3A4 酵素系統代謝的藥品併用,可能降低該藥品的血中濃度。
- 3. 與 MAO 抑制劑或三環類抗抑鬱劑併用:毒性會增加。
- TENOFOVIR alafenamide, ranolazine, voriconazole, paclitaxel, warfarin, buprenorphine, metronidazole, nifedipine, risperidone, lamotrigine, zolpidem, dabigatran, hormonal contraceptive, verapamil, felodipine, chlorpromazine, amiodarone, phenytoin, quetiapine, topiramate, sildenafil, clonazepam, upadacitinib: ↓ above drugs' exposure, and ↓ efficacy.

- **APIXABAN**, rivaroxaban: ↓ exposure, and ↑ risk thromboembolic events.
- PAXLOVID: ↑ carbamazepine exposure and ↓ nirmatrelvir/ritonavir exposure..
- **ORLISTAT**: ↓ anticonvulsant effectiveness.
- VALPROIC ACID: ↓ carbamazepine exposure, ↑ carbamazepine-10,11-epoxide exposure and ↓ valproate exposure..
- **DEXTROMETHORPHAN**: ↑ risk of serotonin syndrome.
- LINEZOLID: ↑ risk of serotonin syndrome (hypertension, hyperthermia, myoclonus, mental status changes).
- **ERYTHROMYCIN**: ↑ exposure of carbamazepine; ↓ exposure of erythromycin.
- CLARITHROMYCIN: ↓ exposure of clarithromycin; ↑ exposure of carbamazepine.
- PHENOBARBITAL: ↓ carbamazepine exposure and efficacy; ↓ PHENobarbital exposure and efficacy.
- **FLUOXETINE**: ↑ carbamazepine exposure and risk of carbamazepine-related toxicity and ↑ risk of serotonin syndrome.
- **ADENOSINE**: may result in a higher degree of heart block.
- **VIGABATRIN:** may result in carbamazepine toxicity (ataxia, nystagmus, diplopia, headache, vomiting, apnea, seizures, coma).
- 注意事項: 1.本劑使用期間,應監測血中藥物濃度 therapeutic range: 4-12 mcg/mL。
 - 2.本劑禁用於對三環抗憂鬱劑過敏、房室阻斷、有骨髓機能降低病史、或急性 porphyria 之患者。
 - 3.用藥期間如出現喉嚨痛、嘴巴破、眼睛癢、皮膚紅疹等,應立即停藥並回診。
 - 4.用藥期間避免食用葡萄柚(汁)。
- 懷 孕 期: 1.須先衡量利弊之後才用於懷孕婦女,尤其是懷孕前三個月。
 - 2. Carbamazepine and its active metabolite cross the placenta.
 - 3. Carbamazepine may be associated with teratogenic effects, including spina bifida, craniofacial defects, and cardiovascular malformations.
 - 4. Therapeutic drug monitoring of carbamazepine is recommended in pregnant women (Harden 2009; Hiemke 2018).
 - 5. Carbamazepine is not recommended for the treatment of bipolar disorder in pregnancy (Larsen 2015).
- 授 乳 期: 1.Carbamazepine 會分泌至乳汁。接受本藥治療期間,須先衡量利弊之後才用於哺乳婦女。
 - 2. the decision to continue or discontinue breastfeeding during therapy should take into account the risk of exposure to the infant and the benefits of treatment to the mother.
 - 3.The WHO considers carbamazepine to be compatible with breastfeeding; infants should be monitored for adverse events (WHO 2002). When used for the treatment of bipolar disorder, carbamazepine is considered acceptable for use in breastfeeding women (Larsen 2015).
- 備 註: 新病患使用前應先檢查病患 IC 健保卡是否已註記曾檢測帶有 HLA-B 1502 基因,檢測結果陽性者,不得開立 carbamazepine 成分藥品之處方。且應先詢問病患是否對該藥品有過敏病史,若為不確認者或未檢測者,宜先行作 HLA-B 1502 基因檢測。