Topiramate

FDA-approved uses:
Migraine prevention; certain types of seizures.

Common off-label uses:
Neuropathic pain; other specialties use topiramate for other conditions.

Alternatives:
No medication is required. Non-medication modalities such as physical treatment and psychological treatment, pain interventions, and other medications are potential alternatives.

How it works:
Topiramate has multiple different mechanisms of action within the body. It works on voltage-dependent sodium channels, at GABA-A receptors, at glutamate receptors, and as a carbonic anhydrase inhibitor.

Side effects & General risks:
Common side effects of topiramate include weight loss, tingling of the fingers or toes, tiredness and similar effects. Because the medication reduces sweating, there is greater chance of heatstroke in hot situations. A small percentage of patients may develop kidney stones; the best way to prevent this is to drink plenty of fluid. Importantly, there have been some reports of glaucoma related to the medication use; when stopped, the condition typically reverses provided it has not been long-standing. Therefore, patients must watch for any visual disturbances or changes and patients should continue with regular eye examinations. The dose is changed if there is liver or kidney disease. Topamax can decrease birth control pill effectiveness and can cause birth defects if pregnancy occurs. And, no medication invented to prevent seizures should be stopped suddenly, including Topamax. There are some routine blood tests that are done occasionally while using Topamax. All medications in this category may worsen depression, possibly resulting in suicide. All patients should be aware and let the prescribing practitioner know immediately of any worsening of depression. Because Topamax can affect concentration, some patients prefer a nighttime only regimen.

This is a supplement to the standardized drug information sheets. Please see the standardized drug information sheet for detailed information about risks, side effects, interactions, and other important information. General risks: Any medication may interfere with the ability to drive, concentrate, or operate machinery; patients must be responsible for their own behavior and should not engage in any dangerous activity if there is any question of impairment. All medications have side effects and drug interactions, some serious, some fatal. Let all of your practitioners and pharmacist know about every substance used. Alcohol, herbals, or illegal drugs are not considered safe with these medications. Assume no medication is safe during pregnancy or while breast feeding. The medication may interfere with birth control. Almost any medication can cause sleepiness, insomnia, dizziness, confusion, hallucinations, anxiety, panic, constipation or diarrhea, headache, chest pain and nausea or vomiting, among others. These could cause physical injury, such as dizziness causing one to fall down stairs. Many reduce blood pressure, which could cause fainting, dizziness, stroke, or other problems. Most medications should NOT be stopped suddenly because of the risk of withdrawal.

Common doses & Time to effect:
Doses depend on what is being treated. For headache disorders, the usual titration is:

- 25mg at bedtime for 1 week, then
- 50mg at bedtime for 1 week, then
- 75mg at bedtime for 1 week, then
- 100mg at bedtime until headache control is achieved

Unfortunately, topiramate is a slow onset medication, often taking the 4 week titration above plus another 8 weeks before clear benefit may be seen.

Financial:
Dr. Anderson has never received payment in exchange for prescribing a medication. Dr. Anderson has no financial relationship with the makers of topiramate.
Insurance coverage:
Many medications, especially in painful conditions, are off-label as discussed above. Insurance companies do not need to cover medications used off label but typically do provide coverage for most medications that have good scientific evidence. There is no guarantee that any medication will be covered. In general, topiramate tends to be covered for headache disorders but may not be covered for neuropathic pain disorders.

Scientific evidence & References:
Some scientific evidence supportive of the use of the medication is listed in this section. Of course, scientific information changes rapidly and the information listed may become outdated or incorrect overnight. Topiramate is a recognized headache prophylactic medication and it now has grade A evidence, 3/3 (maximal) scientific evidence effect and 3/3 (maximal) clinical impression, at doses between 100-200mg per day (100mg target), and is currently FDA-approved for headache prevention in the United States. Topiramate may be helpful for dentally-related trigeminal pain and trigeminal neuralgia. Topiramate has evidence in relieving neuropathic pain syndromes such as neuropathy.

References:

Disclaimer:
This is for informational purposes only. This does not replace the instructions you received from Dr. Anderson or any other practitioner, constitute medical treatment, establishment of a patient-physician relationship, constitute any form of recommendation, prescription or medical advice, or imply that the medication is appropriate or FDA approved for any condition. This information may be outdated and is not a complete listing of instructions, doses, uses, or side effects. If this was prescribed to you, you must review this information with your pharmacist and prescriber before starting the medication.