

CARBAMAZEPINE THERAPY

WHAT IS MANIC DEPRESSION?

Manic Depressive Disorder is an illness marked by severe and often dramatic mood swings.

These consist usually of periods of mania, which fluctuate with periods of depression and periods of stability during which the sufferer often behaves and reacts in a perfectly normal manner. Some of the more common symptoms of mania and depression are listed below.

COMMON SYMPTOMS OF MANIA

- ◆ Inability or unwillingness to sleep
 - ◆ Irritability and impatience
 - ◆ Constant flow of ideas
 - ◆ Constant wish to talk
 - ◆ Loss of judgement
 - ◆ Impulsive badly thought out decisions
 - ◆ Euphoria or out of place sexual interest
- (Advanced symptoms include hallucination)

COMMON SYMPTOMS OF DEPRESSION

- ◆ Lack of energy
- ◆ Lack of concentration
- ◆ Decreased interest in life
- ◆ Anxiety and lack of concentration
- ◆ Apathy and suicidal thoughts
- ◆ Loss of sexual interest
- ◆ Inability to concentrate
- ◆ Lack of energy

*This is not a comprehensive list of the information your doctor may need.
It is important that you mention any information which you feel may be relevant, however slight it may be.*

WHAT IS CARBAMAZEPINE?

Carbamazepine is used to treat patients with manic depressive disorder who fail to respond satisfactorily to other treatments such as lithium or who cannot tolerate those treatments. Carbamazepine may be used on its own or together with lithium. Carbamazepine is also used to treat epilepsy and pain syndromes.

DOES CARBAMAZEPINE CURE MANIC DEPRESSIVE DISORDER?

No, but it is an effective way to control it. It is thought to restore normal activity to brain chemicals. Carbamazepine may help in two ways:

- 1 Stopping an acute episode - Carbamazepine can help a person out of a state of mania back to a normal state. It may also be effective in some cases of acute depression.
- 2 Preventing further episodes - Carbamazepine can help prevent episodes of mania and depression from recurring.

Many people with manic depressive disorder experience frequent episodes of mania and depression **before beginning treatment with Carbamazepine**. If they stop taking Carbamazepine they will almost certainly have frequent episodes again. The manic depressive disorder would no longer be controlled.

Some people with manic depressive disorder experience several episodes of mania and depression in a year. People who have four or more episodes per year are called "rapid cyclers" and often do not respond to treatment with lithium alone. Carbamazepine may be especially helpful in treating these patients. Some people with manic depressive disorder however, experience infrequent episodes of mania and depression often years apart. Others have only a few such episodes and no further recurrences. Why this happens is as much a mystery as the cause of the illness itself!

BEGINNING CARBAMAZEPINE

Before beginning Carbamazepine therapy, it will be necessary to consult closely with your doctor to ensure that he/she is able to treat you safely and effectively. Some of the information your doctor will need includes:

Your Medical History - Do you have other medical conditions (e.g. heart disease, thyroid disease, kidney disease, psoriasis or epilepsy)? Do you have any history of psychiatric illness in your family, especially mania or depression? Do you have any allergic reactions to medication?

Your normal diet - How much alcohol do you normally consume? Do you drink large amounts of tea or coffee? Are you on a limited salt diet of any type? Are you on, or are you planning to begin, any special diet?

Your occupation & activities - Do they involve performing delicate tasks with your hands? Do you need to drive or operate dangerous machinery (sometimes lithium impairs co-ordination)? Have you easy access to a toilet? (Lithium can cause increased urination).

Of special note to women - Are you pregnant? Carbamazepine may cause some birth defects.

TESTS

Before starting Carbamazepine certain blood tests are necessary to ensure it's safe to use and to provide a base line assessment of the functioning of body systems affected by Carbamazepine. Blood tests to evaluate liver function are important because Carbamazepine is broken up in the liver and also because carbamazepine can cause changes in the liver function. A blood test of thyroid function is also important since an overactive or underactive thyroid gland may cause psychiatric symptoms that resemble mania or depression. Blood testing is also needed to determine counts of red and white blood cells and platelets.

HOW SHOULD CARBAMAZEPINE BE TAKEN?

Carbamazepine is usually taken in divided doses over the course of the day - usually 3 or 4 times daily. To minimise side effects most doctors will gradually increase the dose until the desired effect is achieved. Later the dose may be again adjusted with the goal of finding the 'minimal effective dose' i.e. the least amount of drug needed to obtain the desired affect. Many people prefer to take their medication with meals which not only help them to remember to take it, but also helps to avoid nausea that may occur if it is taken on an empty stomach.

HOW OFTEN IS CARBAMAZEPINE BLOOD TEST NEEDED?

Blood tests are needed more often when Carbamazepine therapy is started or when dosage is adjusted than when treatment has been stabilised. When first starting Carbamazepine, blood levels are determined rather frequently - once a week or every other week. Once blood levels have stabilised, a level may be needed only once a month or even less as determined by the doctor. A doctor may also request a blood level check at anytime a patient shows signs that the amount of Carbamazepine in the blood may be too low or too high.

- 1 A return of signs of manic depressive disorder indicating that the Carbamazepine level is too low
- or
- 2 An increase in side effects indicating that the Carbamazepine level is too high.

Usually blood levels are determined in blood drawn 8 - 12 hours after the patients last dose.

HOW CAN SOMEONE TELL IF CARBAMAZEPINE IS WORKING PROPERLY?

Carbamazepine is working properly if it effectively controls mood swings while producing few if any side effects.

HOW RAPIDLY DOES CARBAMAZEPINE WORK?

Carbamazepine is seldom effective immediately. It may take one to several weeks before improvement begins and further improvement may occur gradually over time.

HOW DOES CARBAMAZEPINE WORK?

Chemical imbalances in certain brain cells responsible for emotion and behaviour are felt to be at the root of manic depressive disorder. Experts think that Carbamazepine may act to correct these imbalances and therefore stabilise mood.

IF SOMEONE ON CARBAMAZEPINE HAS ANOTHER MANIC OR DEPRESSION EPISODE DOES THAT MEAN CARBAMAZEPINE ISN'T WORKING?

Not necessarily. Ideally Carbamazepine helps prevent further mood swings, but a partial response to Carbamazepine not uncommon. Recurrent episodes are usual and less severe, less frequent and may disappear completely with continued Carbamazepine use. Although not everyone responds to Carbamazepine many people do eventually , so it's essential the treatment is not stopped before the drug has adequate chance to work. In some people neither lithium or Carbamazepine alone may be effective in controlling mood swings. Sometimes mood swings can be controlled with a combination of lithium and Carbamazepine even though neither was fully effective when used alone.

ARE THERE ANY SIDE AFFECTS?

Like all medication Carbamazepine may cause side effects. It is important to recognise these side effects and know how to manage them.

COMMON SIDE EFFECTS	LESS COMMON SIDE EFFECTS	SERIOUS SIDE EFFECTS
<ul style="list-style-type: none"> ◆ Drowsiness ◆ Clumsiness or unsteadiness ◆ brief double vision ◆ nausea possibly with loss of appetite or mild stomach pains ◆ Dizziness or Lightheadedness 	<ul style="list-style-type: none"> ◆ Aching joints or muscle ◆ Constipation or diarrhoea ◆ Dry mouth ◆ Headache ◆ Increased sensitivity to sunlight ◆ Sore tongue ◆ Hair loss ◆ Sexual problems ◆ Increased sweating ◆ Vomiting 	<ul style="list-style-type: none"> ◆ Sore throat ◆ Unusual tiredness or weakness ◆ Pale stools ◆ Skin rashes ◆ Sores in the mouth ◆ Unusual bruising or bleeding ◆ Yellowing of the skin or eyes ◆ Confusion ◆ Fever ◆ Darkening of urine ◆ Pain, tenderness or bluish colour in a leg or foot ◆ Anything that makes the person feel very sick or behave quite abnormally
<p>Although the list may seem long, most people experience few, if any of these side effects. They reflect the body's initial response to Carbamazepine and most of them decrease or disappear in a few weeks.</p>		<p>A patient on Carbamazepine should contact the doctor IMMEDIATELY if any of these symptoms occur.</p>

SIGNS OF CARBAMAZEPINE POISONING

Severe Dizziness	Severe drowsiness	Persistent Double Vision
Usually fast or irregular heartbeat	Convulsions	Irregular, slow or shallow breathing
Severe trembling		