Indications

- Treatment resistant bipolar disorder (adjunct only)
- Weight loss or prevention of weight gain from antipsychotic or divalproex therapy
- Alcohol use disorder

Contraindications

- None

Precautions

- Acute myopia and secondary angle closure glaucoma, visual field defects
- Oligohydrosis
- Hyperthermia
- Metabolic acidosis
- Suicidal behavior and ideation
- Cognitive/neuropsychiatric dysfunction
- Fetal toxicity
- Withdrawal of AEDs
- Hyperammonemia and encephalopathy (with and without concomitant VPA use)
- Kidney stones
- Hypothermia with concomitant VPA use

Pregnancy and Breastfeeding

- Pregnancy Category D: Data from pregnancy registries indicate that infants exposed to topiramate in utero have an increased risk of cleft lip and/or cleft palate and for being small for gestational age (see Section 8.1 of package insert)
- Nursing mothers: Use with caution

Drug Interactions of Major Significance

- Phenytoin, carbamazepine, valproic acid, phenobarbital, primidone, lamotrigine
- Oral contraceptives
- Metformin
- Lithium (with high-dose topiramate)
- Carbonic anhydrase inhibitors (e.g., zonisamide, acetazolamide)
- CNS depressants

Special Populations

- Renal impairment (creatinine clearance < 70 mL/min/1.73 m2): Use one-half of the adult dose
- Hemodialysis: Dose adjust to avoid rapid drops in topiramate plasma concentration during hemodialysis
- Geriatric use: Dosage adjustments may be necessary for elderly with impaired renal function
- Pediatric: Monitor closely for decreased sweating and increased body temperature, especially in hot weather
### Adverse Reactions

- Paresthesia
- Anorexia
- Weight decrease
- Fatigue
- Dizziness
- Somnolence
- Nervousness
- Psychomotor slowing
- Difficulty with memory
- Difficulty with concentration/attention
- Cognitive problems
- Confusion
- Mood problems (depression, suicidal behavior and/or ideation)
- Fever
- Infection
- Flushing
- Taste perversion
- Metabolic acidosis
- Hyperthermia or hypothermia
- Oligohydrosis
- Nausea
- Diarrhea
- Abnormal vision
- Speech disorders/related speech problems

### Patient Monitoring Parameters

- Comprehensive Metabolic Panel (renal and hepatic function, serum bicarbonate) – baseline, 3 months, annually, and as clinically indicated
- Pregnancy test – as clinically indicated
- Eye exam – baseline and annually
- Monitor for the emergence of suicidal ideation or behavior
- If used for weight loss, monitor weight baseline, quarterly, and as clinically indicated

### Dosing

- Treatment resistant bipolar disorder (adjunct only) – initial oral dosages of 25 mg twice daily for 1 week, continue to increase in increments of 25 to 50 mg each week based on response and tolerability up to 300 mg/day
- Weight loss or prevention of weight gain from antipsychotic or divalproex therapy – initial oral dosages of 25 mg twice daily for 1 week, continue to increase in increments of 25 to 50 mg each week based on response and tolerability up to 300 mg/day
- Alcohol use disorder – 25 mg once daily initially; increase dose weekly to a maximum of 300 mg/day in 2 divided doses by weeks 5 to 14 or weeks 8 to 12