



 $\begin{array}{l} \textbf{Presentation} \\ \text{Lamogin}^{\text{Im}} \ 25\text{: Each tablet contains Lamotrigine BP 25 mg} \\ \text{Lamogin}^{\text{Im}} \ 50\text{: Each tablet contains Lamotrigine BP 50 mg} \\ \end{array}$

Description

The precise mechanism(s) by which lamotrigine exerts its anticonvulsant action are unknown. Lamotrigine has an effect on sodium channels. Lamotrigine inhibits voltage-sensitive sodium channels, thereby stabilizing neuronal membranes and consequently modulating presynaptic transmitter release of excitatory amino acids (e.g., glutamate and aspartate).

The mechanisms by which lamotrigine exerts its therapeutic action in bipolar disorder have not been established.

Indications

Lamotrigine is indicated for:

- i) Epilepsy—adjunctive therapy in patients aged 2 years and older:
 partial-onset seizures.

 - · primary generalized tonic-clonic seizures.
 - generalized seizures of Lennox-Gastaut syndrome

 -monotherapy in patients aged 16 years and older
- iii) Bipolar disorder

Dosage and administration

Table 1. Escalation Regimen for Lamotrigine in Patients Aged 2 to 12 Years with Epilepsy in Patients taking Valproate

	In Patients not taking Carbamazepine, Phenytoin, Phenobarbital, Primidone, or Valproate		In Patients TAKING Carbamazepine, Phenytoin, Phenobarbital, or Primidone and not takking Valproate
Weeks 1 and 2	0.15 mg/kg/day in 1 or 2 divided doses	0.3 mg/kg/day in 1 or 2 divided doses	0.6 mg/kg/day in 2 divided doses
Weeks 3 and 4	0.3 mg/kg/day in 1 or 2 divided doses	0.6 mg/kg/day in 2 divided doses	1.2 mg/kg/day in 2 divided doses
Week 5 onward to maintenance	The dose should be increased every 1 to 2 weeks	The dose should be increased every 1 to 2 weeks	The dose should be increased every 1 to 2 weeks
Usual maintenance dose	1 to 5 mg/kg/day (maximum 200 mg/day in 1 or 2 divided doses) 1 to 3 mg/kg/day with valproate alone		5 to 15 mg/kg/day (maximum 400 mg/day in 2 divided doses)
Maintenance dose in patients less than 30 kg	May need to be increased by as much as 50%, based on clinical response.	increased by as much as	May need to be increased by as much as 50%, based on clinical response.

Table 2. Escalation Regimen for Lamotrigine in Patients Older than 12 Years with Epilepsy in Patients taking Valproate

	In Patients not taking Carbamazepine, Phenytoin, Phenobarbital, Primidone, or Valproate		In Patients TAKING Carbamazepine, Phenytoin, Phenobarbital, or Primidone and not takking Valproate
Weeks 1 and 2	25 mg every other day	25 mg every day	50 mg/day
Weeks 3 and 4	25 mg every day	50 mg/day	100 mg/day (in 2 divided doses)
Week 5 onward to maintenance	Increase by 25 to 50 mg/day every 1 to 2 weeks.	Increase by 50 mg/day every 1 to 2 weeks.	Increase by 100 mg/day every 1 to 2 weeks.
Usual maintenance dose	100 to 200 mg/day with valproate alone 100 to 400 mg/day with valproate and other drugs that induce glucuronidation (in 1 or 2 divided doses)	225 to 375 mg/day (in 2 divided doses)	300 to 500 mg/day (in 2 divided doses)

Common side effects of Lamotrigine include-dizziness, tremor, headache, rash, blurred vision, fever, lack of coordination, abdominal pain, infections, sleepiness, back pain, vomiting, diarrhea, tiredness, insomnia, dry mouth, stuffy nose, sore throat.

Contraindications

Lamotrigine is contraindicated in patients who have demonstrated hypersensitivity to the drug or its ingredients.

Precaution

Serious skin rashes, Blood Dyscrasias, Suicidal Behavior, Aseptic Meningitis can occur in both adult and pediatric population

Use in pregnancy and lactation

Pregnancy Pregnancy Category C.

Nursing mothers: Lamotrigine is excreted in human milk. Because of the potential for serious adverse reactions in nursing infants from Lamotrigine, a decision should be made whether to discontinue nursing or discontinue the drug, taking into account the importance of the drug to the mother.

Pediatric Use

The safety and effectiveness of Lamotrigine in the adjunctive treatment of partial onset seizures in pediatric patients' age 1 month to 24 months old with epilepsy have been established.

Drug interaction

Lamotrigine interacts with Oral contraceptives, Atazanavir/ritonavir, Carbamazepine, Levetiracetam, Lithium, Lopinavir/ritonavir, Olanzapine, Phenobarbital/primidone, Phenytoin, Pregabalin etc.

Overdose has resulted in ataxia, nystagmus, seizures (including tonic-clonic seizures), decreased level of consciousness, coma, and intraventricular conduction delay.

 $\label{eq:lamogin} Lamogin^{\mbox{\tiny IM}} 25: Each \ box \ contains \ 3 \ blister \ strips \ of \ 10 \ tablets.$ $Lamogin^{\mbox{\tiny IM}} 50: Each \ box \ contains \ 3 \ blister \ strips \ of \ 10 \ tablets.$

