If you or someone you know is in crisis, please call 911 and/or the toll-free National Suicide Prevention Lifeline at 800-273-TALK (8255) to speak with a trained crisis counselor 24/7. A help line and other resources are also available through the National Alliance on Mental Illness at nami.org.

What is topiramate and what does it treat?
Topiramate is a medication that works in the brain and is sometimes used in patients with bipolar disorder (also known as manic depression). It is approved for the treatment of seizures (epilepsy) in adults and children in combination with other anticonvulsants and for preventing migraine headaches in adults. Bipolar disorder involves episodes of depression and/or mania.

Symptoms of depression include:
- Depressed mood – feeling sad, empty, or tearful
- Feeling worthless, guilty, hopeless, or helpless
- Loss of interest or pleasure in normal activities
- Sleep and eat more or less than usual (for most people it is less)
- Low energy, trouble concentrating, or thoughts of death (suicidal thinking)
- Psychomotor agitation (‘nervous energy’)
- Psychomotor retardation (feeling like you are moving in slow motion)

Symptoms of mania include:
- Feeling irritable or “high”
- Having increased self esteem
- Feeling like you don’t need to sleep
- Feeling the need to continue to talk
- Feeling like your thoughts are too quick (racing thoughts)
- Feeling distracted
- Getting involved in activities that are risky or could have bad consequences (e.g., excessive spending)

What is the most important information I should know about topiramate?
Bipolar disorder requires long-term treatment. Do not stop taking topiramate even when you feel better. With input from you, your health care provider will assess how long you will need to take the medication. Missing doses of topiramate may increase your risk for a relapse in your mood symptoms.

Do not stop taking topiramate or change your dose without talking to with your health care provider first.

In order for topiramate to work properly, it should be taken every day as ordered by your health care provider.

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Are there specific concerns about topiramate and pregnancy?
If you are planning on becoming pregnant, notify your health care provider so that he/she can best manage your medications. People living with bipolar disorder who wish to become pregnant face important decisions. It is important to discuss the risks and benefits of treatment with your doctor and caregivers.

Topiramate has been associated with an increased risk of oral cleft birth defects. There may be precautions to decrease the risk of this effect. Do not stop taking topiramate without first speaking to your health care provider. Discontinuing similar medications during pregnancy has been associated with a significant increase in symptom relapse.

Breastfeeding is not recommended in women who are taking topiramate.

What should I discuss with my health care provider before taking topiramate?
- Symptoms of your condition that bother you the most
- If you have thoughts of suicide or harming yourself
- Medications you have taken in the past for your condition, whether they were effective or caused any adverse effects
- If you experience side effects from your medications, discuss them with your provider. Some side effects may pass with time, but others may require changes in the medication.
- Any other psychiatric or medical problems you have
- All other medications you are currently taking (including over the counter products, herbal and nutritional supplements) and any medication allergies you have
- Other non-medication treatment you are receiving, such as talk therapy or substance abuse treatment. Your provider can explain how these different treatments work with the medication.
- If you are pregnant, plan to become pregnant, or are breastfeeding
- If you drink alcohol or use illegal drugs

How should I take topiramate?
Topiramate is usually taken one or two times a day with or without food.

Typically patients begin at a low dose of medication and the dose is increased slowly over several weeks.

The dose usually ranges from 25 mg to 400 mg. Only your health care provider can determine the correct dose for you.

Do not split or chew tablets as they have a bitter taste.

Sprinkle capsules: Swallow whole or sprinkle onto food, such as applesauce or pudding and eat immediately. Do not chew the sprinkle capsule or contents.

Extended-release capsules: Swallow whole. Do not sprinkle on food, chew, or crush capsule.

Use a calendar, pillbox, alarm clock, or cell phone alert to help you remember to take your medication. You may also ask a family member a friend to remind you or check in with you to be sure you are taking your medication.

What happens if I miss a dose of topiramate?
If you miss a dose of topiramate, take it as soon as you remember, unless it is closer to the time of your next dose. Discuss this with your health care provider. Do not double your dose or take more than what is prescribed.

What should I avoid while taking topiramate?
Avoid drinking alcohol or using illegal drugs while you are taking topiramate. They may decrease the benefits (e.g., worsen your symptoms) and increase adverse effects (e.g., sedation, dizziness).

What happens if I overdose with topiramate?
If an overdose occurs call your doctor or 911. You may need urgent medical care. You may also contact the poison control center at 1-800-222-1222.

A specific treatment to reverse the effects of topiramate does not exist.
What are the possible side effects of topiramate?

**Common side effects**
Thinking problems: slow thoughts, trouble finding the right word, confusion, trouble concentrating
Feel clumsy, unsteady, dizzy, tired, weak, or nervous
Loss of appetite, change in the way food tastes, weight loss, stomach pain
Numbness or tingling sensation in limbs and extremities

**Rare/Serious side effects**
Mood or behavior changes, such as aggression, agitation, apathy, irritability, and depression
Hearing problems (ringing, buzzing, and decreased hearing)
Fever, sore throat, upper respiratory infection
Itching, nosebleeds, pale skin, blisters, allergy (skin rash, swelling, troubled breathing), yellow eyes or skin, easy bruising and bleeding

Topiramate may cause eye problems. Serious eye problems include a sudden decrease in vision with or without pain/redness and increased pressure in the eye. These eye problems can lead to permanent vision loss if not treated.

Serious skin reactions (Stevens-Johnson Syndrome) have been reported with use of topiramate. At the first sign of a rash, topiramate should be discontinued unless the rash is clearly not drug related.

Topiramate may cause decreased sweating and increased body temperature. People, especially children, should be watched for signs of this – especially in hot climates. Some people may need to be hospitalized for this condition.

Topiramate can increase the level of acid in your blood (metabolic acidosis). If left untreated, metabolic acidosis can cause brittle or soft bones, kidney stones, can slow the rate of growth in children, and may possibly harm your baby if you are pregnant. Metabolic acidosis can happen with or without symptoms. Sometimes people with metabolic acidosis will feel tired, not feel hungry, feel changes in heartbeat, or have trouble thinking clearly.

Studies have found that individuals who take antiepileptic medications, including topiramate, have suicidal thoughts or behaviors up to twice as often as individuals who take placebo (inactive medication). These thoughts or behaviors occurred in approximately 1 in 500 patients taking the antiepileptic class of medications.

Are there any risks for taking topiramate for long periods of time?
To date, there are no known problems associated with long term use of topiramate. It is a safe and effective medication when used as directed.

What other medications may interact with topiramate?
Topiramate may decrease the levels and effects of oral contraceptives (birth control pills).

The following medications may decrease levels and effects of topiramate: carbamazepine (Tegretol®), phenytoin (Dilantin®), valproate (Depakote®) and phenobarbital

Combining valproate (Depakote®) with topiramate may increase ammonia levels in your blood. If this happens, you may get confused, disoriented, or have difficulty thinking.

Carbonic anhydrase inhibitors, including acetazolamide, dichlorphenamide, methazolamide, and dorzolamide, increase the risk of kidney stones when taken with topiramate.
How long does it take for topiramate to work?

It is very important to tell your doctor how you feel things are going during the first few weeks after you start taking topiramate. It will probably take several weeks to see big enough changes in your symptoms to decide if topiramate is the right medication for you.

Mood stabilizer treatment is generally needed lifelong for persons with bipolar disorder. Your doctor can best discuss the duration of treatment you need based on your symptoms and course of illness.

Summary of Black Box Warnings

There are no FDA Black Box Warnings for topiramate.

Important Disclosure: This information is being provided as a community outreach effort of the American Association of Psychiatric Pharmacists. This information is for educational and informational purposes only and is not medical advice. This information contains a summary of important points and is not an exhaustive review of information about the medication. Always seek the advice of a physician or other qualified medical professional with any questions you may have regarding medications or medical conditions. Never delay seeking professional medical advice or disregard medical professional advice as a result of any information provided herein. The American Association of Psychiatric Pharmacists disclaims any and all liability alleged as a result of the information provided herein.