

# Lamotrigine (say: lam-ot-ree-jean)

## What is lamotrigine used for?

- Lamotrigine (also called Lamictal®) is mainly used to help treat epilepsy and to help stop the symptoms of bipolar depression returning
- It comes as plain and chewable or dispersible tablets.

## What is the usual dose of lamotrigine?

- Because it can cause skin problems, you **must** start at no more than 25mg a day for two weeks, then increase to 50mg a day for two weeks
- Only then can the dose be increased, every week or two after that
- This start needs to be half that speed (e.g. starting at 25mg every other day) if you are also taking valproate
- The usual final dose is around 50-200mg a day, but can be higher sometimes.

## How should I take lamotrigine?

- Swallow the tablets with at least half a glass of water whilst sitting or standing, so they do not stick in your throat
- The dispersible tablets can be chewed or dispersed in water and then swallowed
- Do not break the dispersible/chewable tablets to try to make a smaller dose as this is **not** reliable.

## When should I take lamotrigine?

- Take your lamotrigine at regular times each day
- It can be taken with or after food
- If you take it once a day this is usually best at bedtime as it may make you sleepy at first
- If you are taking more than 100mg a day this should usually be taken twice a day.

## What are the alternatives to lamotrigine?

- There are many other medicines for epilepsy; and other medicines (e.g. quetiapine), talking therapies and treatments for bipolar depression.

- ☞ See our "Handy chart" for bipolar depression to help you compare the medicines available
- ☞ This will help you talk to your prescriber, nurse, pharmacist or other healthcare professional.

## How long will lamotrigine take to work?

- This will depend on what you are taking it for. It may take a month or two to start to work
- The effect builds over the next few months.

## How long will I need to keep taking it for?

- This will depend on what you are taking it for
- If it works you may want to take it for several years or longer.

## Is lamotrigine addictive and can I stop taking it suddenly?

- Lamotrigine is not addictive
- It is unwise to stop taking it suddenly, even if you feel better as your symptoms can return if stopped too early, and may occur some weeks or even months after it has been stopped
- When the time comes, you should withdraw lamotrigine by a gradual reduction in the dose over several weeks.

See our handy fact sheet on 'Coming off medicines'

## What should I do if I forget to take a dose of lamotrigine at the right time?

- Take the missed dose as soon as you remember unless it is within about 4-6 hours of your next dose.
- After this time, just take the next dose as normal
- Do **not** try to catch up by taking two doses at once as you may get more side-effects
- If you stop or miss taking lamotrigine for 7 days or more (or 2 weeks if you're also taking valproate) you will need to start again slowly at 25mg a day for 2 weeks, 50mg a day for 2 weeks then increasing by 50-100mg a day every 1-2 weeks
- If you don't start it again slowly you risk getting the nasty skin rashes.

If you have problems remembering your doses (as many people do) ask to see our Handy Fact Sheet "Remembering to take your medicines".

### Can I drink alcohol while I am taking it?

- If you drink alcohol while taking lamotrigine it may make you feel more sleepy
- This is important if you need to drive or operate machines and you must seek advice on this.

### Will lamotrigine affect my other medication?

The main interactions with lamotrigine include:

- Lamotrigine's effects may be increased by valproate (e.g. Epilim®, Convulex®, Depakote®)
- The effect of lamotrigine can be decreased by carbamazepine (Tegretol®), lopinavir/ritonavir (Kaletra®) and phenytoin
- Oral Contraceptives (OCs, "The Pill") and lamotrigine are complicated. Make sure your prescriber knows exactly what you are taking. In summary:
  - If you start lamotrigine while on an OC, normal lamotrigine doses should be used but your final lamotrigine dose may need to be a bit higher
  - If you start an OC while on lamotrigine, the lamotrigine dose may need to be increased (maybe even doubled)
  - If you have a 7-day tablet-free interval from your OC, you may get more side effects from lamotrigine during that week. You may be asked to take the Pill during the 7-day break to get round this problem
  - If you completely stop your OC, then your dose of lamotrigine may almost certainly need to be reduced (maybe by up to a half), starting during the first week after you stop
  - You might think about other contraception that is more reliable with lamotrigine e.g. the Coil or a depot/long-acting injectable contraceptive.

You **must** also see the Patient Information Leaflet (PIL) for the full list. Some of these medicines can still be used together but you must follow your doctor's instructions carefully.

### Can I drive or cycle while I am taking it?

- You may feel a bit sleepy at first when taking it
- You should be careful as it may slow down your reaction times
- Until this wears off, or you know how lamotrigine affects you, do not drive or operate machines.

### Will I need any blood or other tests if I am taking lamotrigine?

- You may need some blood tests while you are taking lamotrigine to check on your blood.

If you have a long-term mental health problem, your physical health is very important. NHS GP guidance urges regular checks on your blood pressure, weight, blood glucose and blood fats. This may first be done by a hospital, but your GP should then arrange for these checks **at least every year**. And then act if anything needs treating.

### What about pregnancy and lamotrigine?

- You must get **expert help** if you want to be, or find you are, pregnant while taking lamotrigine
- Your dose may need to be changed. See our fact sheets (general one plus one for lamotrigine).

## What sort of side-effects might I get if I am taking lamotrigine?

This table shows some of the most common side effects and any you might need to take action on. You **must** also see the maker's Patient Information Leaflet for the full list of possible side effects but do not be worried by this. Some people get no side effects at all. Some side effects are the brain getting used to a medicine and these usually wear off in a few days or weeks. Starting at a low dose (no more than 25mg a day) and increasing slowly is **vital**. If you think you might have a side effect to this medicine, you should ask your prescriber, pharmacist or other healthcare professional.

Side effect	What happens	What to do about it
<b>VERY COMMON</b> ( <i>more than about 1 in 10 people might get these</i> )		
Sleepiness	You feel sleepy or sluggish. It can last for a few hours after taking your dose, or longer.	Don't drive or use machines. Discuss with your prescriber if you can take the drug at a different time of the day. Some people, however, find it makes it harder to get to sleep.
Dizziness	Feeling light-headed and faint.	Don't stand up too quickly. Try and lie or sit down if you feel it coming on. Don't drive.
Headache	Your head is pounding and painful.	Try paracetamol. Your pharmacist will be able to advise if this is safe to take with any other medicines you may be taking.
Nausea	Feeling sick.	If it is bad, contact your prescriber.
Itchy skin rash	Usually a maculopapular rash, with red, flat and raised skin bumps. More likely if you are under 13, female, start too quickly, have had a rash with medicines before or are also taking valproate.	These are usually short-lived, mild and non-serious, and can be helped by a much slower increase in dose. Sometimes starting again at very low dose helps. You must be very careful in case the rash gets worse (see below).
<b>COMMON</b> ( <i>fewer than about 1 in 10 people might get these</i> )		
Blurred vision	Things look fuzzy and you can't focus your eyes properly.	Don't drive. See your prescriber if you are worried.
<b>RARE but important</b> ( <i>can be serious if not dealt with quickly</i> )		
Skin rashes	Red rashes across the face and body, blisters and inflammation in the nose, mouth and eyes. It may look a bit like serious burning or sunburn.	Stop taking lamotrigine and contact your prescriber <b>straight away</b> . This can be dangerous as it might be the start of the rare Stevens-Johnson syndrome or Toxic Epidermal Necrolysis (TEN). This is very rare if your dose is increased slowly to start with e.g. starting at no more than 25mg a day for the first two weeks, then 50mg a day for the next two weeks. <i>See our handy fact sheet on the rare but important 'Lamotrigine rash' for some practical advice.</i>
Bone marrow suppression	Unexpected bruising, infections, and anaemia	Stop taking and contact your prescriber straight away.
Seizures	Having a fit or convulsion, or a worsening of your symptoms.	Stop taking and contact your prescriber straight away.
Suicidal ideation	Thoughts of harming yourself	This is rare. See your prescriber in the next day if this happens.

**The small print:** This leaflet is to help you understand more about lamotrigine. You **must** also read the manufacturer's Patient Information Leaflet (PIL). You may find more on the internet but beware as internet-based information is not always accurate. Do not share medicines with anyone else. The 'Handy charts' will help you compare the main medicines for each condition, how they work and their side effects. Go to our website for fuller answers to these and many other questions.

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