

Oxcarbazepine

Trileptal / Oxtellar XR · check your exact formulation

A seizure medicine sometimes used for mood symptoms. Your treatment goal, blood tests and exact tablet type matter.

From Jeffrey Panko, PMHNP-BC's education collection ·

Draft for review · Clinical content has not been revalidated for this website.

CHECK YOUR TABLET TYPE

KEEP YOUR SODIUM BLOOD TESTS

Follow your own prescription; do not switch tablet types on your own.

What it is used for

Oxcarbazepine treats certain seizures. Your prescriber may also use it off-label for mood symptoms, meaning that use is outside its FDA approval.

Evidence for bipolar treatment is limited. Ask which symptoms you are targeting and how you will decide whether it is helping.

How it works

Your body converts it to an active medicine that reduces overactive electrical firing in nerve cells.

Its full effect on mood is not established. Feeling sleepy alone does not mean the underlying mood problem is improving.

What to expect over time

FIRST DAYS

Follow the starting schedule. Dizziness or sleepiness may appear before any benefit.

FIRST WEEKS

Review symptoms and side effects as the dose changes. Keep the planned blood tests.

ONGOING

Track the treatment goal. Low sodium can develop later, even after a long stable period.

Taking your medication

Regular tablets (IR): usually taken twice daily, with or without food. Follow the schedule on your label.

Oxtellar XR: taken once daily on an empty stomach, at least one hour before or two hours after food. Swallow whole; do not cut, crush or chew.

Increase only as prescribed. Check with your pharmacist if the tablet type, timing or instructions change.

When to get help

New rash: stop and call immediately. Blisters, peeling, mouth/eye sores or fever need urgent care. Breathing trouble or throat swelling: call 911.

Call today: worsening headache, nausea, weakness, confusion, bruising, persistent fever or yellow skin/eyes may signal sodium, blood or organ problems.

Call 911: severe confusion, seizure, collapse or immediate suicide danger. Other new suicidal thoughts need prompt help.

Early side effects

Dizziness, sleepiness, nausea, headache, double vision and unsteadiness can occur. Do not drive until you know your response. Persistent slowing or poor balance deserves assessment, not simply more time.

Other effects to discuss

Sodium can fall, and rare serious blood-count or liver problems can occur. Weight gain is possible. Tests help detect problems, but warning symptoms still matter between appointments.

What to keep track of

Keep sodium and kidney checks, with other tests as needed. Genetic testing may help assess rash risk; a negative result does not rule it out. Drug levels sometimes help, but do not replace symptom review.

Before you start

Tell your team about previous reactions to carbamazepine, oxcarbazepine or eslicarbazepine; kidney/liver disease; low sodium; and all medicines. Discuss pregnancy plans, nursing and contraception before changes whenever possible.

Medicines & interactions

Birth control

Some hormonal methods may become less effective. Arrange reliable alternative or backup contraception with your team; do not assume a lower dose avoids this interaction.

Prescription medicines

Other seizure medicines, some psychiatric medicines and medicines for transplant or blood pressure can interact. Check every new prescription and every planned stop.

Low-sodium risks

Water pills and some antidepressants add to low-sodium risk. Your team may adjust testing. Do not try to correct sodium yourself with extra salt or changes in fluid intake.

Alcohol & sedating products

Alcohol, sleep aids and other sedating products can worsen drowsiness and balance. Ask before combining them; include nonprescription medicines and supplements.

Everyday tips

Use reminders for doses and laboratory appointments.

Keep a brief record of sleep, mood or seizures, depending on your goal.

Bring your full medicine list to every visit.

Report symptoms promptly rather than waiting for the next blood test.

Your questions, answered

What if I miss a dose?

Take it when remembered unless nearly time for the next. Skip then; never double. After several missed doses, ask before restarting.

Can I stop when I feel better?

Not on your own. Sudden stopping can cause seizures or return of symptoms. Your team will plan a gradual reduction unless a serious reaction requires urgent stopping.

What if I still feel foggy?

Tell your prescriber. Dose effects, low sodium or another problem may need checking; persistent slowing is not something you must accept.

What about pregnancy or nursing?

Contact your team early, without stopping abruptly. Discuss benefits, risks, folate and monitoring. Breastfeeding may be possible with attention to the baby's feeding, alertness and weight.

Storage & safety

Store securely at room temperature, away from moisture and children; do not share. For overdose, call Poison Control at 1-800-222-1222 immediately. Call 911 for collapse, seizure, breathing trouble or inability to wake.

About this information

For general information only; not a substitute for individualized medical advice. This sheet does not cover every risk or interaction. Ask your prescriber or pharmacist before changing how you take this medication.

Sources

1. <https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=4c5c86c8-ab7f-4fcf-bc1b-5a0b1fd0691b>
 2. <https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=aa610e56-1d1d-11e1-8bc2-0800200c9a66>
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Educational inclusion does not mean this medication or its indications are treated at this practice. Review the guide for your exact product with your prescriber or pharmacist.

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