Summary

Introduction. Topiramate (Topamax, TPM) is an effective AED, used to treat partial-simple, partial-complex and secondarily generalised to tonic-clonic seizures. The drug’s pharmacokinetic profile and the outcomes of clinical trials suggest that TPM may be used in both polytherapy and monotherapy.

Objective. The aim of the study was to conduct a one-year observation of the effectiveness and safety of topiramate in patients with drug-resistant epilepsy in the form of partial seizures with or without secondary generalisation.

Material and method. Eighty-six patients (36 F and 50 M) were studied. The mean age of the patients was 30 years (13-61) and the mean duration of epilepsy was 19 years (2-55). Thirty-seven (41.2%) of the total number of 86 patients with partial seizures had secondarily-generalised seizures, 8 (8.9%) had secondary generalised to tonic-clonic seizures and 41 (45.5%) had both types of seizures. The drug was administrated twice a day, mean daily dose was 5.2mg/kg (0.8-11.7/kg). The patients were observed for 12 months. The results were submitted to statistical analysis using the Student T test.

Results. In the group of 86 patients with one year add-on therapy with TPM, reduction of seizures by at least 50% was observed in 47 patients (54.7%), in which group 100% reduction was obtained in 14 patients (16.3 %), and seizure reduction higher than 50% was observed in 33 patients (38.4%). Reduction of seizures by less than 50% was observed in 39 (45.3%) patients. The figures were stable throughout the entire term of observation. Side effects were registered and treatment was discontinued in 20% of patients. Our clinical experience to date suggests that tolerance to TPM does not develop despite prolonged treatment with the drug. Only a small percentage of patients had to discontinue treatment due to clinical deterioration in the form of increased frequency of seizures.

Key words: Epilepsy – Topiramate – Treatment – Effectiveness of long-term antiepileptic treatment – Adverse events