

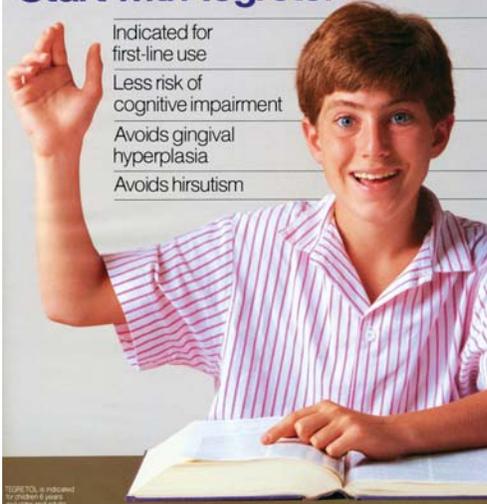
CARBAMAZEPINE

By the end of the World War II, antiepileptic drug discovery was largely conducted, not as before by the universities and clinical schools, but by pharmaceutical companies. *Carbamazepine* was developed in this way by the Swiss pharmaceutical firm Geigy, and was perhaps the first antiepileptic drug to produce large profits in the field. Carbamazepine, initially known as G32883, was manufactured in 1953. It has a tricyclic structure, similar to that of Tofranil, and was initially investigated as a drug for depression and psychosis. Its effects on neuralgic pain were discovered by animal screening, and it was in fact licensed and marketed, in 1962, initially for trigeminal neuralgia (although even then the blurb described it as a ‘new anticonvulsant drug’). Its first license as an antiepileptic was granted in 1965, in Britain, a year before its first controlled trial! Its antiepileptic effects had been investigated clinically in 1959, and first reported in 1963, and the drug rapidly gained a reputation in Europe as a very promising new antiepileptic. Most of the major clinical characteristics of carbamazepine were identified early on, and by the late 1960s, data were available on the pharmacokinetics, its potential for complex drug interactions, and its common neurologic and gastrointestinal side-effects. Its mode of action, blockade of sodium channels, was not recognized until 1983. Other important landmarks were the advent of serum level monitoring in around 1972, the quantification of its value in monotherapy in the 1980s and the introduction of delayed release formulations in the 1990s. By the mid-1980s, carbamazepine was the most prescribed antiepileptic drug in Europe and it is still so. Some 40 years after its introduction, it remains the

gold standard for comparative studies of antiepileptics and the drug to beat for any new compound. By 1989, 2,700 citations for carbamazepine had appeared in the medical literature, and carbamazepine is probably the most-cited and most-studied compound in the history of epilepsy.

To avoid phenytoin-related problems:
Start with Tegretol

- Indicated for first-line use
- Less risk of cognitive impairment
- Avoids gingival hyperplasia
- Avoids hirsutism



TEGRETOL is indicated for children 6 years and older for epilepsy. Because of the potential for serious hematologic adverse reactions, it is important that clinicians carefully monitor with TEGRETOL, and to report promptly to the manufacturer, CIBA-GEIGY.

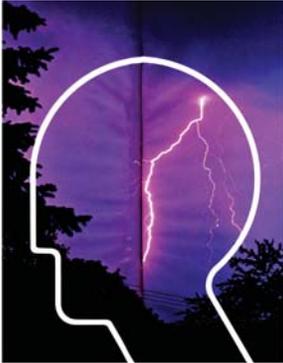
Tegretol 
carbamazepine USP

200 mg scored tablets
100 mg chewable tablets

...because after seizure control, there's a lot of living to do!

Tegretol
carbamazepine USP

Geigy



Avoids the excessive sedation associated with some currently used anticonvulsants. Improvement appears to be greater in patients with psychomotor (temporal lobe) epilepsy. Effective and compatible when used in combination with other anticonvulsants.

NOTE: Please see the important information on the inside of this container and the insert for the necessary precautions and directions.

For further details, please read the prescribing information accompanying this product.