

Epilepsy Specialist formulary list








****Other indications for particular drugs may be included on completion of further specialist lists****










For information on use of unlicensed medicines or medicines used 'off-label' - [click here](#)




The following medicines are approved for prescribing by or on the recommendation of a prescribing neurology specialist:

In the event of a broken link please forward details to carol.walkinshaw@nhs.scot

Please include the location and full title of the link

MEDICINE	SUMMARY OF RESTRICTED INDICATION	CATEGORY	PROTOCOL
Brivaracetam tablets, oral solution, solution for injection/infusion (Briviact®)	Second-line adjunctive treatment of focal epilepsy in patients from 16 years of age who have been refractory to treatment e.g. where other treatment options such as levetiracetam have failed or not been tolerated. Brivaracetam solution for injection/infusion is an alternative for patients when oral administration is temporarily not feasible.	 Amber	SIGN 143 Diagnosis and management of epilepsy in adults, May 2015 Phenytoin Prescribing and Monitoring Guideline
Carbamazepine tablets, M/R tablets, liquid, suppositories	Treatment of focal epilepsy or as adjunctive treatment.	 Amber	
Oxcarbazepine tablets, oral suspension	Adjunctive treatment of focal epilepsy in patients who have been refractory to treatment. Used in patients who have Carbamazepine intolerance [unlicensed use 'off-label'].	 Amber	
Eslicarbazepine tablets	Adjunctive treatment of focal epilepsy. Restricted to patients with highly refractory epilepsy who have been heavily pre-treated and remain uncontrolled with existing anti-epileptic drugs. Used in patients who have Carbamazepine intolerance [unlicensed use 'off-label'].	 Amber	
Cenobamate (Ontozry®▼) tablets	Second-line adjunctive treatment of focal epilepsy in patients who have been refractory to treatment.	 Amber	
Ethosuximide capsules, syrup	Generalised epilepsy second-line monotherapy or adjunctive treatment. Option for absence seizures.	 Amber	
Lacosamide tablets, syrup	Adjunctive treatment of focal epilepsy in patients who have been refractory to treatment. Adjunctive treatment in refractory generalised epilepsy [unlicensed use 'off-label'].	 Amber	



Lamotrigine tablets, dispersible tablets	First-line treatment of focal epilepsy or as adjunctive treatment. Generalised epilepsy or adjunctive treatment.	 Amber
Levetiracetam tablets, oral solution	Treatment of focal epilepsy or as adjunctive treatment. Adjunctive treatment of generalised epilepsy.	 Amber
Perampanel tablets (Fycompa®)	Second-line adjunctive treatment of focal epilepsy in patients who have been refractory to treatment.	 Amber
Phenobarbital tablets, elixir, injection	For patients with highly refractory epilepsy who have been heavily pre-treated and remain uncontrolled with existing anti-epileptic drugs.	 Amber
Phenytoin tablets, capsules, suspension	Adjunctive treatment in patients with focal epilepsy. Restricted to patients with highly refractory epilepsy.	 Amber
Tiagabine tablets	Adjunctive treatment in patients with focal epilepsy. Restricted to patients with highly refractory epilepsy who have been heavily pre-treated and remain uncontrolled with existing anti-epileptic drugs.	 Amber
Topiramate tablets	Focal epilepsy or as adjunctive treatment. Generalised epilepsy or as adjunctive treatment.	 Amber
Sodium valproate e/c tablets, crushable tablets, liquid, M/R tablets	Generalised epilepsy or adjunctive treatment. Valproate must not be started in new patients (male or female) younger than 55 years, unless two epilepsy specialists independently consider and document that there is no other effective or tolerated treatment, or there are compelling reasons that the reproductive risks do not apply. For the majority of patients, other effective treatment options are available. As a precaution, male patients who are planning a family within the next year should speak to a healthcare professional about their treatment options. Women and girls of child bearing potential must be on the Pregnancy Prevention Programme and be reviewed by a specialist, at least annually, in line with MHRA advice . Provide patient information materials at each appointment (i.e. patient guide) or when they receive their medicines (i.e. patient card and leaflet (PIL)).	 Amber
Vigabatrin tablets, granules	Adjunctive treatment in patients with focal epilepsy. Restricted to patients with highly refractory epilepsy who have been heavily pre-treated and remain uncontrolled with existing anti-epileptic drugs.	 Amber

Zonisamide capsules	Adjunctive treatment in patients with focal epilepsy (with or without secondary generalisation). Refractory generalised epilepsy [unlicensed use 'off-label'].	 Amber	
Clobazam tablets, oral suspension	Adjunct in epilepsy for chronic therapy or acute deterioration.	 Amber	
Midazolam Buccal liquid 10mg/mL (Epistatus®) [unlicensed]	To prevent the development of <i>status epilepticus</i> in patients with highly refractory epilepsy who have been heavily pre-treated and remain uncontrolled with existing anti-epileptic drugs.	 Amber	Used according to an agreed administration protocol.

Management of prolonged seizures including *status epilepticus*:

See the [Protocol for management of status epilepticus in General Practice in adults](#) (for patients in the community) or the [Protocol for management of in-patient status epilepticus in adults](#) (for patients in hospital including convulsive and non-convulsive status epilepticus).

Other in-hospital treatment includes:

Levetiracetam IV	For management of status epilepticus if required after initial treatment with benzodiazepines [off-label] unless known severe renal failure.	 Red	Protocol for management of in-patient status epilepticus in adults (for patients in hospital including convulsive and non-convulsive status epilepticus)
Sodium Valproate IV	For management of status epilepticus if required after initial treatment with benzodiazepines [off-label] if known severe renal failure and indicated in preference to phenytoin if ECG monitoring or phenytoin not available. Valproate must not be started in new patients (male or female) younger than 55 years, unless two epilepsy specialists independently consider and document that there is no other effective or tolerated treatment, or there are compelling reasons that the reproductive risks do not apply. For the majority of patients, other effective treatment options are available. As a precaution, male patients who are planning a family within the next year should speak to a healthcare professional about their treatment options. Women and girls of child bearing potential must be on the Pregnancy Prevention Programme and be reviewed by a specialist, at least annually, in line with MHRA advice .	 Red	Protocol for management of in-patient status epilepticus in adults (for patients in hospital including convulsive and non-convulsive status epilepticus)

Provide patient information materials at each appointment (i.e. patient guide) or when they receive their medicines (i.e. patient card and leaflet (PIL)).

Phenytoin IV

Alternative to sodium valproate for management of status epilepticus if required after initial treatment with benzodiazepines, where IV levetiracetam not suitable (with ECG and blood pressure monitoring).



Red

[Protocol for management of in-patient status epilepticus in adults](#) (for patients in hospital including convulsive and non-convulsive status epilepticus)

[Phenytoin Prescribing and Monitoring Guideline](#)

Traffic light status information

- Red** To be prescribed by Hospital Specialists Only.
- Amber** Can be prescribed in General Practice under the direction of a Specialist.

Updated: 3rd May 2024

