What is Zarontin® (Ethosuximide)?
Zarontin® is an anti-epileptic drug that has been used to treat patients with epilepsy since 1960. It is helpful in the treatment of Absence seizures (also known as petit mal seizures) only.

Starting the Medicine:
We usually gradually increase the dose, until your body gets adjusted to the medication. Since each patient is unique in that he/she breaks down the medication differently or may need a higher or lower dosage to control their seizures, there is no standard dose that is appropriate for all patients.

What is the dosage of the pill and what does it look like?
It is a 250 mg tan gelcap, or a raspberry syrup at 250 mg/5cc.

What Side Effects Can Be Caused by Zarontin®?
Side Effects can be dose related (common) or Idiosyncratic (rare):

Common Dose-Related Side Effects:
Loss of appetite, nausea, cramps, gum swelling, sleepiness dizziness or headache may all occur. These side effects are most frequent at the start of treatment, and they are temporary and usually go away as your body gets adjusted to the medicine.

If you have these side effects, your doctor may:
• spread out the dose evenly throughout the day in four divided doses
- decrease the daily dose, and increase the bedtime dose
- instruct you to take your pill with food since this will slow the rate at which the medicine gets into the blood, but will not affect the total amount that is absorbed.

**Rare Side Effects:**
Zarontin® can reduce the body’s ability to manufacture certain blood cells which are important to fight infections and prevent bleeding. A reduction in these cells can cause fever, sore throat and ulcers in the mouth, or unusual bleeding and easy bruising. If these symptoms occur, contact your doctor immediately.

In a few patients with both absence and generalized tonic-clonic seizures, Zarontin® has worsened the frequency of the generalized seizures.

Zarontin® may rarely cause a liver disorder. Symptoms may include jaundice (yellow skin), rash, itching, poor appetite and fatigue. If these symptoms occur, contact your doctor immediately.

**Skin Rash:**
An allergic rash can occur with Zarontin®. It tends to occur during the first six weeks of therapy, and can be serious. If this occurs, contact your doctor immediately.

**Pregnancy:**
Women of child-bearing age should be aware that there is a small increase in risk for congenital malformations with epilepsy medications, up to 7% risk of malformations (incidence for mothers on no medication is 4%). This risk
increases in women taking more than one anti-epileptic drug. Discuss this with your doctor.

**How do I take this medication?**
It is very important to take your medication regularly since a stable blood level helps to reduce seizures. Therefore, the medication does not work when taken on an as needed basis. It is usually prescribed in two or three evenly divided doses taken at regular times.

**Can I Take Zarontin® with Other Medications?**
Yes, Zarontin® may be taken with most medications. However, valproic acid (Depakote®), and phenytoin (Dilantin®), can both change blood levels of Zarontin®. Always tell your doctor what other medicines you are taking.

**What Should I Do If I Miss a Dose?**
If you miss a dose, take it as soon as you remember. You may have to change your usual times taking Zarontin® when you are trying to make up the missing dose. If you have to “double up” on a dose, take that dose at bedtime.

**Why is My Blood Checked for Zarontin®?**
The blood sample is a more accurate way to measure Zarontin® in your body than counting the number of tablets that you take. This level is important in adjusting your daily Zarontin® dose.

It is sometimes preferred to have the Zarontin® level checked in the morning before you take your first dose so that your doctor can see what your level is at its lowest point in the day.
Why is My Blood Checked for a CBC with Differential and SGOT?

Although Zarontin® rarely causes problems with blood cells or liver problems, we periodically like to check the CBC to count the number of white and red blood cells and platelets. We check the SGOT and SGPT which are indirect tests of liver function.