## Topiramate in Mood Disorders

| # of Patients | Target Symptoms                                  | Type of Study                                      | Dose (mg/day)           | Monotherapy or<br>Adjunctive?   | Trial Duration                          | Number of Patients<br>Improved (%)                                     | Weight<br>Loss?  | Investigator(s)        |
|---------------|--|--|-------------------------|---------------------------------|---|--|--|------------------------|
| 18            | Refractory mood disorders                        | Open   | 200                     | Adjunct                         | 16 wks                                  | 23/44 (52%)  | Unknown  | Marcotte, 1998         |
| 20            | 18 Bipolar<br>2 Schizoaffective,<br>bipolar type | Open   | 100-300                 | Adjunct                         | 5 weeks                                 | 12/20 (60%)  | 9.4 lbs avg.   | Chengappa et al., 1999 |
| 5             | 4 Bipolar<br>1 Schizoaffective                   | Retrospective chart review                         | 100-375<br>(195 mean)   | Varied                          | Varied                                  | 5/5 (100%)   | 22 lbs avg.  | Gupta et al., 2000     |
| 54            | 30 Manic<br>11 Depressed<br>13 Euthymic          | Open   | 193 " 122               | Adjunct                         | 10 wks                                  | 19/30 (63%)<br>3/11 (27%)  | 4.9% at last evaluation  | McElroy et al., 2000   |
| 11            | Mania  | On-Off-On  | 25-200                  | Adjunct                         | 10 days on,<br>5 days off,<br>7 days on | 7/11 (64%), 1 <sup>st</sup> trial;<br>8/9 (89%), 2 <sup>nd</sup> trial | Unknown  | Grunze et al., 2001    |
| 76            | Bipolar disorder                                 | Retrospective chart review                         | 12.5-400<br>(96.1 mean) | Adjunct                         | 17.5 weeks                              | 10/76 (13%) moderate<br>to marked<br>improvement                       | 14.2 lbs (avg) in<br>50%                                       | Ghaemi et al., 2001    |
| 10            | Acute Mania                                      | Open   | 50-1300<br>(536 mean)   | Monotherapy                     | 28 days                                 | 5/10 (50%) mod. to marked improvement                                  | 4.7 lbs avg. (n=4)   | Calabrese et al., 2001 |
| 26            | Bipolar I or II children<br>or adolescents       | Retrospective chart review                         | 25-400<br>(104 mean)    | Monotherapy (n=3)<br>or Adjunct | 1-30 months<br>(mean = 4.1<br>months)   | 16/26 (62%) had<br>overall illness<br>improvement                      | 5 kg (n=9)   | DelBello et al., 2002  |
| 14            | Acute mania                                      | Open   | 150-700<br>(310 mean)   | Monotherapy (n=8)<br>or Adjunct | 4 weeks                                 | 8/13 (61.5%) ≥50%<br>reduction in mania<br>scores                      | Four patients lost<br>weight, two<br>patients gained<br>weight | Bozikas et al., 2002   |
| 36            | Bipolar Depression                               | Single-blind,<br>randomized study<br>vs. bupropion | 50-300<br>(176 mean)    | Adjunct                         | 8 weeks                                 | 10/18 (56%)<br>vs. 59% for bupropion                                   | 5.8 kg avg.  | McIntyre et al., 2002  |
| 34            | Refractory mood disorder                         | Open   | 100-400<br>(202 mean)   | Adjunct                         | 6 months                                | 10/17 (59%) manic;<br>6/11 (55%) depressed;<br>19/34 (56%) all groups  | 2.3 kg avg. (n=10)   | Vieta et al., 2002     |
| 16            | Female major<br>depression, obesity              | Retrospective chart review                         | 100-400<br>(277 mean)   | Adjunct                         | 40 weeks                                | 7/16 (44%)   | 6.1 % avg.   | Carpenter et al., 2002 |
| 14            | Refractory bipolar disorder                      | Retrospective chart review                         | 25-300<br>(100 mean)    | Adjunct                         | 1-64 weeks (22.4<br>mean)               | 9/14 (64%)   | 29.7 lbs avg.<br>(n=4)   | Guille and Sachs, 2002 |

## Topiramate in Mood Disorders (continued)

| # of Patients            | Target Symptoms  | Type of Study            | Dose (mg/day)         | Monotherapy or<br>Adjunctive? | Trial Duration | Number of Patients<br>Improved (%)   | Weight<br>Decrease?     | Investigator(s)                    |
|--------------------------|------------------|--------------------------|-----------------------|-------------------------------|----------------|--|-------------------------|------------------------------------|
| 19                       | Bipolar II       | Open                     | 117 (mean)            | Adjunct                       | 12 weeks       | 8/15 (53%) of<br>hypomanic patients<br>were responders;<br>2/4 (50%) of depressed<br>patients were<br>responders   | 2.4 kg avg.<br>(n=6)    | Vieta et al., 2003                 |
| 56                       | Bipolar disorder | Open                     | 200-400<br>(289 mean) | Adjunct                       | 1 year         | Statistically significant<br>reduction in number of<br>new episodes<br>(mania/depression) in<br>year on topiramate | 1-2 kg in five patients | Lykouras and<br>Hatzimanolis, 2004 |
| 4 Controlled<br>Studies: |                  |                          |                       |                               |                |  |                         |                                    |
|                          | Acute Mania      | Double-blind, controlled |                       | Monotherapy                   | 3-4 weeks      | Topiramate = Placebo;<br>Lithium > Topiramate  |                         | Sachs et al., 2004                 |

**Conclusion:** Topiramate may have useful properties for weight loss in addition to reports of mood stabilization when used as an open-label, adjunctive treatment. It is not an effective acute antimanic drug in monotherapy.

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