# Nalipsy
**Tablet**

**Composition :** Sodium Valproate BP 200mg.

**Indications :** It is indicated for the treatment of all types of epilepsy, e.g. partial seizures, absence seizures (petit mal), generalized tonic-clonic seizures (grand mal), myoclonic seizures, atonic seizures, mixed seizures that include absence attack.

**Dosage and administration :** **Epilepsy: Adults:** Initially 600mg daily in 2 divided doses, preferably after food, increased by 200mg at 3 days intervals to maximum 2.5gm per day in divided doses until control of seizure is achieved. Usual maintenance dose: 1-2gm daily (20-30mg/kg daily). **Children bodyweight up to 20kg:** Initially 20mg/kg daily in divided doses, may be increased provided plasma concentration monitored (dose above 40mg/kg daily also monitor clinical chemistry and haematological parameters). **Children under 12 years bodyweight over 20kg:** Initially 400mg daily in divided doses increased according to response (usual range 20-30mg/kg daily), maximum 35mg/kg daily. Or, as directed by the registered physician.

**Side effects :** The most common side effects are anorexia, nausea, vomiting, gastric irritation, diarrhea, weight gain, hyperammonaemia, thrombocytopenia, transient hair loss, hyperactivity, ataxia and tremor.

**Contraindication :** It is contraindicated in patients with known hypersensitivity to sodium valproate or any other components of this drug. It is also contraindicated for the patient with severe hepatic dysfunction.

**Use in pregnancy and lactation :** Sodium valproate crosses the placenta in humans; exposure to valproate in the first trimester causes neural tube defects such as anencephaly and spina bifida in newborn. Sodium valproate is excreted in human breast milk. It is not known what effect this would have on a breast-fed infant. This drug should be used during pregnancy & lactation only if clearly needed.

**Precautions :** Liver functions should be monitored before therapy and during first 6 months especially in patients most at risk, no undue potential for bleeding before starting and before major surgery must be ensured.Care should be taken in renal impairment & systemic lupus erythematosus. Sodium valproate is partially eliminated in the urine as a ketone metabolite, which may lead to a false interpretation of the urine ketone test. Sudden withdrawal of therapy should be avoided.

**Drug interactions :** Sodium valproate appears to act as a non specific inhibitor of drug metabolism. Drugs to which it interacts most significantly are Phenobarbital, phenytoin, warfarin, aspirin etc.

**Packing :** **Nalipsy Tablet**: Each box contains 10x10's tablets in blister pack.