QUESTIONS ON THE PRESENTATION "Lamotrigine Case 2 Drug-Drug Interactions" (2-02-16)

Please select the single best choice.

1. Lamotrigine pharmacokinetics (e.g. co-treatment with an inducer) can explain a lack of efficacy:

    A. True

    B. False

2. Regarding lamotrigine pharmacokinetics:

    A. Valproate has relevant influence on lamotrigine metabolism.

    B. Glucuronidation is the most important pathway.

    C. Renal excretion may explain the mildly decreased clearance seen in older patients.

    D. All of the above are correct.

3. Regarding the effects of carbamazepine on lamotrigine pharmacokinetics:

    A. Discontinuing carbamazepine will not influence lamotrigine metabolism.

    B. Adding carbamazepine may decrease lamotrigine metabolism.

    C. Discontinuing carbamazepine will probably increase serum lamotrigine concentrations after a few weeks.

    D. All of the above are correct.

4. If you want to change a patient from the normal lamotrigine formulation to the extended release formulation, you should use the same doses since they are equivalent.

    A. True

    B. False

5. Regarding Stevens-Johnson syndrome:

    A. It is a potentially lethal adverse drug reaction associated with several anticonvulsants.

    B. Its manifestations include skin rash and mucosal area ulcers.

    C. It can be caused by lamotrigine; risk factors are valproate co-prescription and rapid titration.

    D. All of the above are correct.

6. Regarding dosing for lamotrigine patients:

A. Recommended doses are the same for patients on carbamazepine and on valproate.

B. The package insert recommends not increasing the initial dose during the first two weeks.

C. It does not need to consider changes after adding oral contraceptives.

D. All of the above are correct.

7. Regarding lamotrigine dosing:

A. After discontinuing carbamazepine you may need to decrease lamotrigine dose by half.

B. After adding valproate you may need to decrease lamotrigine dose by half.

C. The second and third pregnancy trimester may require doubling lamotrigine dose.

D. All of the above are correct.

8. Regarding interpreting lamotrigine dosing and serum concentrations:

A. It is important to ask about co-medications.

B. Carbamazepine co-prescription may decrease serum lamotrigine concentrations.

C. Valproate co-prescription may increase serum lamotrigine concentrations.

D. All of the above are correct.

9. Ginseng has been recently associated with inhibitory effects on lamotrigine metabolism, therefore if it is used, a slower lamotrigine titration, such as the titration recommended with valproate may be a good idea:

A. True

B. False

10. Taking or adding valproate during lamotrigine treatment requires that you carefully consider lamotrigine dosing to avoid Stevens-Johnson syndrome.

A. True

B. False