Table 1: Tramadol Dosing*

In adults

- Start with 25 mg daily (at bedtime).
- Titrate in 25 mg increments as separate doses every three days up to 25 mg, four times daily.
- Thereafter, increase the daily dose by 50 mg every three days up to 50 mg, four times daily.
- After titration, 50 mg to 100 mg may be given every four to six hours (as needed), not to exceed 400 mg/day.

In patients with impaired renal function (CrCl < 30 ml/min)

- · Adjust the dosing interval to every 12 hours with the maximum daily dose not to exceed 200 mg/day.
- Dialysis patients may still receive their scheduled dose(s) on dialysis days.

In patients with impaired liver function (eg, cirrhosis)

• Adjust the dose to 50 mg every 12 hours.

In Older adults

- For patients aged 65 and older, titrate the dose more cautiously.
- For patients aged 75 and older, the maximum daily dose is 300 mg.

*Tramadol tolerability is improved by a slow titration regimen.

— Source: Ultram C IV (tramadol hydrochloride) tablets: full prescribing information. Janssen Pharmaceuticals website. http://www.janssenpharmaceuticalsinc.com/assets/ultram.pdf. Updated July 2014.

Table 2: Medications Known to Lower Seizure Threshold

| Anesthetics |
|---|
| Antidepressants |
| Antineoplastic agents |
| Antipsychotics |
| Antimalarials |
| Antituberculosis drugs |
| Beta blockers |
| Beta-lactam antibiotics |
| Central nervous system stimulants |
| Cytokines |
| Thyroxine |
| Immunosuppressant drugs |
| Interferon-alpha |
| Opioid analgesics |
| Drug withdrawal seizures (Benzodiazepine withdrawal) |
| Drugs inducing hypomagnesemia (diuretics, proton pump inhibitors, antimicrobials, and anticancer drugs) |
| Vaccines (Pertussis vaccine) |
| |

 $^{- \, {\}sf Source: Drug-induced seizures: pathogenesis and pathopsysiology. MedMerits website. \ http://www.medmerits.com/index.php/article/drug_induced_seizures/P4}$