

**Background for Health Care Provider:**

Zonisamide is rapidly and completely absorbed after oral administration and is not affected by food. Zonisamide is not significantly serum protein bound, however zonisamide has a high affinity for erythrocytes and will concentrate within them. Nevertheless, binding displacement interactions with zonisamide are of little clinical significance. Zonisamide is metabolized by CYP3A4 and subsequently by glucuronidation. There is potential for interactions if either inducers or inhibitors of CYP3A4 are co-administered with zonisamide, however, due to the long half life of zonisamide (approximately 65 hours), the clinical significance of such metabolic alterations is likely to be low. Inhibition of glucuronidation is not of clinical significance. Zonisamide has not been shown to have any inductive effects on CYP450 enzymes. The renal excretion of zonisamide is minimal and clinically insignificant.

**Effect of Other Drugs on Zonisamide Serum Levels:****Decrease Zonisamide Serum Levels**

- Carbamazepine
- Phenobarbital
- Phenytoin
- Primidone

**Increase Zonisamide Serum Levels**

- Cimetidine
- Cyclosporin
- Ketoconazole
- Miconazole

**Effect of Zonisamide on Other Drugs' Serum Levels:****Increase Other Serum Drug Levels**

- No known clinically significant interactions

**Decrease Other Serum Drug Levels**

- No known clinically significant interactions

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