Assessing The Long-Term Safety And To Explore The Long-Term Efficacy Of Zonisamide As Monotherapy In Newly Diagnosed Partial Seizures

This study has been completed.

Sponsor:
Eisai Inc.

Information provided by (Responsible Party):
Eisai Inc.

ClinicalTrials.gov Identifier:
NCT00848549

First received: February 19, 2009
Last updated: December 21, 2015
Last verified: November 2015
History of Changes

Results First Received: November 12, 2012

Study Type:	Interventional
Study Design:	Allocation: Randomized; Endpoint Classification: Safety/Efficacy Study; Intervention Model: Parallel Assignment; Masking: Double Blind (Subject, Investigator); Primary Purpose: Treatment
Condition:	Epilepsy
Interventions:	Drug: Zonisamide Drug: Carbamazepine

Participant Flow

Hide Participant Flow

Recruitment Details

Key information relevant to the recruitment process for the overall study, such as dates of the recruitment period and locations
E2090-E044-314 is a double-blind extension of E2090-E044-310 (NCT00477295) "base study." Assessment of eligibility took place at the Study Entry Visit (SEV), which was the same day as their final visit of Study 310. Subjects remained on the same investigational product as they were randomized to in Study 310 until unblinding of that study.

Pre-Assignment Details

Significant events and approaches for the overall study following participant enrollment, but prior to group assignment
No text entered.

Reporting Groups

	Description
Zonisamide	Subjects received the same study drug to which they had been randomized in the core study phase and remained on their

	final dose for the start of the extension phase (between 200 mg and 500 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.
Carbamazepine	Subjects received the same study drug to which they had been randomized in the core study phase and remained on their final dose for the start of the extension phase (between 400 mg and 1200 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.

Participant Flow for 3 periods

Period 1: E2090-E044-310 (Base Study) Disposition

	Zonisamide	Carbamazepine
STARTED	282	301
COMPLETED	161	192
NOT COMPLETED	121	109
Adverse Event	31	35
Withdrawal by Subject	35	24
Lack of Efficacy	23	23
Protocol Violation	3	8
Physician Decision	4	5
Lost to Follow-up	21	11
Not Specified	4	3

Period 2: E2090-E044-310 (Base Study) Transition

	Zonisamide	Carbamazepine
STARTED	161	192
COMPLETED	137	158
NOT COMPLETED	24	34
Chose not to enter 314 Extension study	24	34

Period 3: E2090-E044-314 (Extension Study)

	Zonisamide	Carbamazepine
STARTED	137	158
COMPLETED	120	134
NOT COMPLETED	17	24
Adverse Event	2	1
Protocol Violation	1	2
Withdrawal by Subject	8	12
Lack of Efficacy	1	1
Physician Decision	0	2
Not Specified	5	6

Baseline Characteristics

Hide Baseline Characteristics

Population Description

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or

another method. Also provides relevant details such as imputation technique, as appropriate.
No text entered.

Reporting Groups

	Description
Zonisamide	Subjects received the same study drug to which they had been randomized in the core study phase and remained on their final dose for the start of the extension phase (between 200 mg and 500 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.
Carbamazepine	Subjects received the same study drug to which they had been randomized in the core study phase and remained on their final dose for the start of the extension phase (between 400 mg and 1200 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.
Total	Total of all reporting groups

Baseline Measures

	Zonisamide	Carbamazepine	Total
Overall Participants Analyzed [Units: Participants]	**282**	**301**	**583**
Age [Units: Years] Mean (Standard Deviation)			
Base Study 310 (NCT00477295, n=583)	**37.1 (16.33)**	**35.6 (15.50)**	**36.35 (15.92)**
Extension Study 314 (NCT00848549, n=295)	**37.8 (16.13)**	**34.4 (14.93)**	**36.1 (15.53)**
Gender, Customized [Units: Participants]			
Female (Base Study 310, NCT00477295)	**107**	**128**	**235**
Male (Base Study 310, NCT00477295)	**174**	**172**	**346**
Female (Extension Study 314, NCT00848549)	**57**	**59**	**116**
Male (Extension Study 314, NCT00848549)	**80**	**99**	**179**

Outcome Measures

Hide All Outcome Measures

1. Primary: Percentage of Participants Remaining in the Study at Each Visit [Time Frame: At 3, 6, 9, 12, 15, 18, 21, 24, and 27 months]

Measure Type	Primary
Measure Title	Percentage of Participants Remaining in the Study at Each Visit
Measure Description	The retention rate is defined as the percentage of subjects remaining on the study at each visit, starting from the first dose of study drug in the extension phase.
Time Frame	At 3, 6, 9, 12, 15, 18, 21, 24, and 27 months
Safety Issue	No

Population Description

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.
The Intent-to-Treat (ITT) Population is defined as all subjects who received at least one dose of investigational product(IP)

Reporting Groups

	Description
Zonisamide	Subjects received the same study drug to which they had been randomized in the base study phase and remained on their final dose for the start of the extension phase (between 200 mg and 500 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.
Carbamazepine	Subjects received the same study drug to which they had been randomized in the base study phase and remained on their final dose for the start of the extension phase (between 400 mg and 1200 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.

Measured Values

	Zonisamide	Carbamazepine
Participants Analyzed [Units: Participants]	**137**	**158**
Percentage of Participants Remaining in the Study at Each Visit [Units: Percentage of Participants] Number (95% Confidence Interval)		
3 months	**95.6** **(92.2 to 99.1)**	**93.7** **(89.8 to 97.5)**
6 months	**87.6** **(82.0 to 93.2)**	**84.2** **(78.4 to 89.9)**
9 months	**76.6** **(69.5 to 83.8)**	**75.3** **(68.5 to 82.1)**
12 months	**58.4** **(50.1 to 66.7)**	**61.4** **(53.7 to 69.0)**
15 months	**38.7** **(30.5 to 46.9)**	**43.7** **(35.9 to 51.5)**
18 months	**27.7** **(20.2 to 35.3)**	**27.8** **(20.8 to 34.9)**
21 months	**13.1** **(7.4 to 18.8)**	**12.7** **(7.4 to 17.9)**
24 months	**5.8** **(1.9 to 9.8)**	**2.5** **(0.1 to 5.0)**
27 months	**1.5** **(0.0 to 3.5)**	**0.6** **(0.0 to 1.9)**

No statistical analysis provided for Percentage of Participants Remaining in the Study at Each Visit

2. Secondary: Time to Drop-out Due to Lack of Efficacy [Time Frame: Week 1 to Week 109 (in core study) and Month 1 to Month 27 (in extension study)]

Measure Type	Secondary
Measure Title	Time to Drop-out Due to Lack of Efficacy
Measure Description	Lack of efficacy was if the subject had poor seizure control (defined as experiencing a seizure despite being on the maximum dose for = 2 weeks). The subject could withdraw at any time due to lack of efficacy.
Time Frame	Week 1 to Week 109 (in core study) and Month 1 to Month 27 (in extension study)
Safety Issue	No

Population Description

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or

another method. Also provides relevant details such as imputation technique, as appropriate.
310 ITT Population (combined ITT Population from basecore study and extension phase). 24 participants were discontinued in each arm due to lack of efficacy; these were the participants that were evaluated in this outcome.

Reporting Groups

	Description
Zonisamide	Subjects received the same study drug to which they had been randomized in the base study phase and remained on their final dose for the start of the extension phase (between 200 mg and 500 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.
Carbamazepine	Subjects received the same study drug to which they had been randomized in the base study phase and remained on their final dose for the start of the extension phase (between 400 mg and 1200 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.

Measured Values

	Zonisamide	**Carbamazepine**
Participants Analyzed [Units: Participants]	**24**	**24**
Time to Drop-out Due to Lack of Efficacy [Units: Days] Mean (Standard Deviation)	**297.9 (170.03)**	**289.0 (108.93)**

No statistical analysis provided for Time to Drop-out Due to Lack of Efficacy

3. Secondary: Time to Drop-out Due to Adverse Event (AE) [Time Frame: Week 1 to Week 109 (in base study) and Month 1 to Month 27 (in extension study)]

Measure Type	Secondary
Measure Title	Time to Drop-out Due to Adverse Event (AE)
Measure Description	Adverse events in study subjects included any change in the subject's condition. This includes symptoms, physical findings, or clinical syndromes. All AEs that occurred after signing of informed consent through the last visit and for 15 days following study drug discontinuation were captured on the AE Case Report Form (CRF).
Time Frame	Week 1 to Week 109 (in base study) and Month 1 to Month 27 (in extension study)
Safety Issue	No

Population Description

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.
310 ITT Population (33 participants were discontinued in the Zonisamide arm and 35 were discontinued in the Carbamazepine arm; these were the participants evaluated for this outcome)

Reporting Groups

	Description
Zonisamide	Subjects received the same study drug to which they had been randomized in the base study phase and remained on their final dose for the start of the extension phase (between 200 mg and 500 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.

Carbamazepine	Subjects received the same study drug to which they had been randomized in the base study phase and remained on their final dose for the start of the extension phase (between 400 mg and 1200 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.

Measured Values

	Zonisamide	Carbamazepine
Participants Analyzed [Units: Participants]	**33**	**35**
Time to Drop-out Due to Adverse Event (AE) [Units: Days] Mean (Standard Deviation)	**131.9 (166.90)**	**97.2 (114.47)**

No statistical analysis provided for Time to Drop-out Due to Adverse Event (AE)

4. Secondary: Percentage of Participants That Are Seizure Free for at Least 24 Month Consecutive Period in the Base Study and Extension Phase [Time Frame: Week 5 to Week 109 (in base study) and Month 1 to Month 27 (in extension phase)]

Measure Type	Secondary
Measure Title	Percentage of Participants That Are Seizure Free for at Least 24 Month Consecutive Period in the Base Study and Extension Phase
Measure Description	The number of participants that have remained seizure free for at least a 24 month consecutive period from the start of the Flexible Dosing Period (FDP: the period following the Titration Period and leading into the Maintenance Period) in the base study through the treatment period of this study. Seizure freedom was defined as the absence of all seizure regardless of seizure type.
Time Frame	Week 5 to Week 109 (in base study) and Month 1 to Month 27 (in extension phase)
Safety Issue	No

Population Description

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.
310 ITT Population

Reporting Groups

	Description
Zonisamide	Subjects received the same study drug to which they had been randomized in the base study phase and remained on their final dose for the start of the extension phase (between 200 mg and 500 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.
Carbamazepine	Subjects received the same study drug to which they had been randomized in the base study phase and remained on their final dose for the start of the extension phase (between 400 mg and 1200 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.

Measured Values

	Zonisamide	Carbamazepine
Participants Analyzed [Units: Participants]	**281**	**300**
Percentage of Participants That Are Seizure Free for at Least 24 Month Consecutive Period in the Base Study and Extension Phase	**32.3**	**35.2**

[Units: Percentage of Participants] Number (95% Confidence Interval)	(26.5 to 38.0)	(29.5 to 40.9)

No statistical analysis provided for Percentage of Participants That Are Seizure Free for at Least 24 Month Consecutive Period in the Base Study and Extension Phase

5. Secondary: Change From Baseline in Quality of Life Assessed by Quality of Life in Epilepsy-Problems Questionnaire (QOLIE-31-P) Overall Score at Each Visit [Time Frame: Weeks 0, 26, 52, 78 and 117]

Measure Type	Secondary
Measure Title	Change From Baseline in Quality of Life Assessed by Quality of Life in Epilepsy-Problems Questionnaire (QOLIE-31-P) Overall Score at Each Visit
Measure Description	The QOLIE-31-P is a 31-item questionnaire evaluating a participant's QOL perception in 7 domains: seizure worry,emotional well being,energy/fatigue, cognitive functioning, medication effects, social functioning,overall QOL. The overall score is derived by weighing and then summing the 7 domain scores. Precoded numeric values for some domains are such that a higher number reflects a more favorable health state; others are such that a higher number reflects a less favorable state. Precoded values are converted to 0-100 point scores; higher converted scores always reflect better QOL.
Time Frame	Weeks 0, 26, 52, 78 and 117
Safety Issue	No

Population Description

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.
ITT Population

Reporting Groups

	Description
Zonisamide	Subjects received the same study drug to which they had been randomized in the base study phase and remained on their final dose for the start of the extension phase (between 200 mg and 500 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.
Carbamazepine	Subjects received the same study drug to which they had been randomized in the base study phase and remained on their final dose for the start of the extension phase (between 400 mg and 1200 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.

Measured Values

	Zonisamide	**Carbamazepine**
Participants Analyzed [Units: Participants]	**137**	**158**
Change From Baseline in Quality of Life Assessed by Quality of Life in Epilepsy-Problems Questionnaire (QOLIE-31-P) Overall Score at Each Visit [Units: Score on a scale] Mean (Standard Deviation)		
Week 0	**4.697 (16.254)**	**7.101 (13.781)**
Week 26	**6.101 (16.566)**	**10.956 (14.940)**
Week 52	**8.602 (14.326)**	**11.687 (13.653)**
Week 78	**4.287 (15.566)**	**1.902 (13.495)**
Week 117	**-0.292 (17.332)**	**15.849 (12.302)**

No statistical analysis provided for Change From Baseline in Quality of Life Assessed by Quality of Life in Epilepsy-Problems Questionnaire (QOLIE-31-P) Overall Score at Each Visit

Serious Adverse Events

Hide Serious Adverse Events

Time Frame	From the time the subject signed the informed consent form through the Final Visit/Early Termination Visit and for 15 days following study drug discontinuation.
Additional Description	Adverse events were assessed at clinical visits based on the subject's diary, vitals, weight, physical examination, neurological exam, and laboratory evaluations.

Reporting Groups

	Description
Zonisamide (Extension Study 314, NCT00848549)	Subjects received the same study drug to which they had been randomized in the core study phase and remained on their final dose for the start of the extension phase (between 200 mg and 500 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.
Carbamazepine (Extension Study 314, NCT00848549)	Subjects received the same study drug to which they had been randomized in the core study phase and remained on their final dose for the start of the extension phase (between 400 mg and 1200 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.
Zonisamide (Base Study 310, NCT00477295)	The starting dose in this arm was zonisamide 100mg daily. The dose during the Titration Period (4 weeks) ranged from 100 to 200mg daily. During the Flexible Dosing Period (FDP), the subjects were given doses ranging from 300 to 500mg daily or if they could not tolerate that dose, were allowed one down-titration or were withdrawn. If the subjects remained seizure-free for 26 weeks by the end of FDP (the subject was allowed 3 chances to achieve this), they entered the Maintenance Period (26 weeks), where they remained on the same dose they were taking at the end of the FDP.
Carbamazepine (Base Study 310, NCT00477295)	The starting dose in this arm was carbamazepine 200mg daily. The dose during the Titration Period (4 weeks) ranged from 200 to 400mg daily. During the Flexible Dosing Period (FDP), the subjects were given doses ranging from 600 to 1200mg daily or if they could not tolerate that dose, were allowed one down-titration or were withdrawn. If the subjects remained seizure-free for 26 weeks by the end of FDP (the subject was allowed 3 chances to achieve this), they entered the Maintenance Period (26 weeks), where they remained on the same dose they were taking at the end of the FDP.

Serious Adverse Events

	Zonisamide (Extension Study 314, NCT00848549)	Carbamazepine (Extension Study 314, NCT00848549)	Zonisamide (Base Study 310, NCT00477295)	Carbamazepine (Base Study 310, NCT00477295)
Total, serious adverse events				
# participants affected / at risk	**7/137 (5.11%)**	**7/158 (4.43%)**	**15/281 (5.34%)**	**17/300 (5.67%)**
Cardiac disorders				
Myocardial ischaemia [*1]				
# participants affected / at risk	**1/137 (0.73%)**	**0/158 (0.00%)**	**0/281 (0.00%)**	**0/300 (0.00%)**
Bradycardia [*1]				
# participants affected / at	**0/137 (0.00%)**	**0/158 (0.00%)**	**0/281 (0.00%)**	**1/300 (0.33%)**

risk				
Myocardial infarction [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	1/281 (0.36%)	0/300 (0.00%)
Ear and labyrinth disorders				
Vertigo [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	1/281 (0.36%)	0/300 (0.00%)
Gastrointestinal disorders				
Abdominal pain [*1]				
# participants affected / at risk	1/137 (0.73%)	0/158 (0.00%)	0/281 (0.00%)	0/300 (0.00%)
Duodenal ulcer haemorrhage [*1]				
# participants affected / at risk	1/137 (0.73%)	0/158 (0.00%)	0/281 (0.00%)	0/300 (0.00%)
Peptic ulcer haemorrhage [*1]				
# participants affected / at risk	1/137 (0.73%)	0/158 (0.00%)	0/281 (0.00%)	0/300 (0.00%)
Gastric ulcer [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
General disorders				
Death [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	1/281 (0.36%)	0/300 (0.00%)
Pyrexia [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	1/281 (0.36%)	0/300 (0.00%)
Hepatobiliary disorders				
Cholecystitis [*1]				
# participants affected / at risk	0/137 (0.00%)	1/158 (0.63%)	0/281 (0.00%)	0/300 (0.00%)
Cholelithiasis [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Infections and infestations				
Upper respiratory tract infection [*1]				
# participants affected / at risk	0/137 (0.00%)	1/158 (0.63%)	0/281 (0.00%)	0/300 (0.00%)
Viral infection [*1]				
# participants affected / at risk	0/137 (0.00%)	1/158 (0.63%)	0/281 (0.00%)	0/300 (0.00%)
Appendicitis [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	1/281 (0.36%)	0/300 (0.00%)
Chronic sinusitis [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
[*1]				

Sinusitis bacterial				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Typhoid fever [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	1/281 (0.36%)	0/300 (0.00%)
Injury, poisoning and procedural complications				
Clavicle fracture [*1]				
# participants affected / at risk	0/137 (0.00%)	1/158 (0.63%)	0/281 (0.00%)	0/300 (0.00%)
Subarachnoid haemorrhage [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Facial bones fracture [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	2/300 (0.67%)
Femur fracture [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Head injury [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Humerus fracture [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Joint dislocation [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	1/281 (0.36%)	0/300 (0.00%)
Muscle strain [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Radius fracture [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Skull fracture [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Investigations				
Electrocardiogram abnormal [*1]				
# participants affected / at risk	1/137 (0.73%)	0/158 (0.00%)	0/281 (0.00%)	0/300 (0.00%)
Hepatic enzyme increased [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Metabolism and nutrition disorders				
Hyponatraemia [*1]				
# participants affected / at risk	0/137 (0.00%)	1/158 (0.63%)	0/281 (0.00%)	0/300 (0.00%)
Hypokalaemia [*1]				

# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	1/281 (0.36%)	0/300 (0.00%)
Musculoskeletal and connective tissue disorders				
Osteoarthritis [*1]				
# participants affected / at risk	0/137 (0.00%)	1/158 (0.63%)	0/281 (0.00%)	0/300 (0.00%)
Bone pain [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	1/281 (0.36%)	0/300 (0.00%)
Musculoskeletal pain [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Neoplasms benign, malignant and unspecified (incl cysts and polyps)				
Prostatic adenoma [*1]				
# participants affected / at risk	1/137 (0.73%)	0/158 (0.00%)	0/281 (0.00%)	0/300 (0.00%)
Brain neoplasm [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	1/281 (0.36%)	0/300 (0.00%)
Prostate cancer [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Nervous system disorders				
Ataxia [*1]				
# participants affected / at risk	0/137 (0.00%)	1/158 (0.63%)	0/281 (0.00%)	0/300 (0.00%)
Carotid artery stenosis [*1]				
# participants affected / at risk	1/137 (0.73%)	0/158 (0.00%)	0/281 (0.00%)	0/300 (0.00%)
Somnolence [*1]				
# participants affected / at risk	0/137 (0.00%)	1/158 (0.63%)	0/281 (0.00%)	0/300 (0.00%)
Transient ischaemic attack [*1]				
# participants affected / at risk	1/137 (0.73%)	0/158 (0.00%)	0/281 (0.00%)	0/300 (0.00%)
Partial seizures with secondary generalization [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	4/300 (1.33%)
Complex partial seizures [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	1/281 (0.36%)	0/300 (0.00%)
Convulsion [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	1/281 (0.36%)	0/300 (0.00%)
Epilepsy [*1]				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Ischaemic stroke [*1]				

# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Partial seizures * 1				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	1/281 (0.36%)	0/300 (0.00%)
Pregnancy, puerperium and perinatal conditions				
Unwanted pregnancy * 1				
# participants affected / at risk	0/137 (0.00%)	1/158 (0.63%)	0/281 (0.00%)	0/300 (0.00%)
Psychiatric disorders				
Acute psychosis * 1				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	1/281 (0.36%)	0/300 (0.00%)
Suicidal ideation * 1				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Suicide attempt * 1				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Respiratory, thoracic and mediastinal disorders				
Nasal septum deviation * 1				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Respiratory disorder * 1				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	1/281 (0.36%)	0/300 (0.00%)
Rhinitis hypertrophic * 1				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)
Skin and subcutaneous tissue disorders				
Rash * 1				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	2/300 (0.67%)
Purpura * 1				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	1/281 (0.36%)	0/300 (0.00%)
Vascular disorders				
Hypertension * 1				
# participants affected / at risk	1/137 (0.73%)	0/158 (0.00%)	0/281 (0.00%)	0/300 (0.00%)
Hypotension * 1				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	0/281 (0.00%)	1/300 (0.33%)

* Events were collected by non-systematic assessment

1 Term from vocabulary, MedDRA V. 13.0

Other Adverse Events

Hide Other Adverse Events

Time Frame	From the time the subject signed the informed consent form through the Final Visit/Early Termination Visit and for 15 days following study drug discontinuation.
Additional Description	Adverse events were assessed at clinical visits based on the subject's diary, vitals, weight, physical examination, neurological exam, and laboratory evaluations.

Frequency Threshold

Threshold above which other adverse events are reported	5

Reporting Groups

	Description
Zonisamide (Extension Study 314, NCT00848549)	Subjects received the same study drug to which they had been randomized in the core study phase and remained on their final dose for the start of the extension phase (between 200 mg and 500 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.
Carbamazepine (Extension Study 314, NCT00848549)	Subjects received the same study drug to which they had been randomized in the core study phase and remained on their final dose for the start of the extension phase (between 400 mg and 1200 mg per day). Flexible dosing was permitted as symptoms changed as long as it stayed within the dosing range.
Zonisamide (Base Study 310, NCT00477295)	The starting dose in this arm was zonisamide 100mg daily. The dose during the Titration Period (4 weeks) ranged from 100 to 200mg daily. During the Flexible Dosing Period (FDP), the subjects were given doses ranging from 300 to 500mg daily or if they could not tolerate that dose, were allowed one down-titration or were withdrawn. If the subjects remained seizure-free for 26 weeks by the end of FDP (the subject was allowed 3 chances to achieve this), they entered the Maintenance Period (26 weeks), where they remained on the same dose they were taking at the end of the FDP.
Carbamazepine (Base Study 310, NCT00477295)	The starting dose in this arm was carbamazepine 200mg daily. The dose during the Titration Period (4 weeks) ranged from 200 to 400mg daily. During the Flexible Dosing Period (FDP), the subjects were given doses ranging from 600 to 1200mg daily or if they could not tolerate that dose, were allowed one down-titration or were withdrawn. If the subjects remained seizure-free for 26 weeks by the end of FDP (the subject was allowed 3 chances to achieve this), they entered the Maintenance Period (26 weeks), where they remained on the same dose they were taking at the end of the FDP.

Other Adverse Events

	Zonisamide (Extension Study 314, NCT00848549)	**Carbamazepine (Extension Study 314, NCT00848549)**	**Zonisamide (Base Study 310, NCT00477295)**	**Carbamazepine (Base Study 310, NCT00477295)**
Total, other (not including serious) adverse events				
# participants affected / at risk	**12/137 (8.76%)**	**10/158 (6.33%)**	**72/281 (25.62%)**	**69/300 (23.00%)**
Investigations				
Weight Decreased [*1]				
# participants affected / at risk	**8/137 (5.84%)**	**0/158 (0.00%)**	**19/281 (6.76%)**	**0/300 (0.00%)**
Metabolism and nutrition disorders				
Decreased appetite [*1]				

# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	22/281 (7.83%)	5/300 (1.67%)
Nervous system disorders				
Headache * 1				
# participants affected / at risk	6/137 (4.38%)	10/158 (6.33%)	29/281 (10.32%)	37/300 (12.33%)
Somnolence * 1				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	17/281 (6.05%)	23/300 (7.67%)
Dizziness * 1				
# participants affected / at risk	0/137 (0.00%)	0/158 (0.00%)	11/281 (3.91%)	23/300 (7.67%)

* Events were collected by non-systematic assessment
1 Term from vocabulary, MedDRA V. 13.0

Limitations and Caveats

Hide Limitations and Caveats

Limitations of the study, such as early termination leading to small numbers of participants analyzed and technical problems with measurement leading to unreliable or uninterpretable data

No text entered.

More Information

Hide More Information

Certain Agreements:

Principal Investigators are **NOT** employed by the organization sponsoring the study.

There is **NOT** an agreement between Principal Investigators and the Sponsor (or its agents) that restricts the PI's rights to discuss or publish trial results after the trial is completed.

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Responsible Party:	Eisai Inc.
ClinicalTrials.gov Identifier:	NCT00848549 History of Changes
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