

Tiagabine Criteria

Revised: 09/01/2025

TIAGABINE (GENERIC FOR GABITRIL)

Length of Authorization: 1 year

CHILDREN – CRITERIA TO APPROVE

All the following:

- Age \geq 12 years of age
- Diagnosis of adjunctive treatment of partial seizures
- Prescriber is a neurologist or consult notes from a neurology office are provided.

ADULTS – CRITERIA TO APPROVE

All the following:

- Age \geq 18 years of age
- Diagnosis of adjunctive treatment of partial seizures
- Prescriber is a neurologist or consult notes from a neurology office are provided.

ADULTS AND CHILDREN – RENEWAL CRITERIA

All the following:

- Patient is responding well to therapy.
- Patient has not experienced any treatment-restricting adverse effects.

REVISION HISTORY

Date	Issues/Updates
09/01/2025	<ul style="list-style-type: none">Added children to renewal criteria. No clinical changes
07/10/2024	<ul style="list-style-type: none">Created document