embodiments, the allopregnanolone is provided at a concentration of 2.5 allopregnanolone. In some embodiments, the allopregnanolone is provided at a concentration of 1.25 mg/mL allopregnanolone.

In one ~~aspect~~embodiment, the present disclosure features a method of making a series of dosages, the method comprising combining a diluent and allopregnanolone in proportions to form dosage forms suitable for use as the first, second and one or more step doses for said third dose.

In one ~~aspect~~embodiment, the present disclosure features a method of adjusting the amount of diluents and / or allopregnanolone flowing into or out of a delivery device, *e.g.,* a catheter, reservoir, the method comprising altering, *e.g.,* decreasing, the flow rate of allopregnanolone flowing into the delivery device, so as to release in succession, two or more of a first dosage, a second dosage and one or more step doses of the third dose.

In one embodiment, the present disclosure features a method of treating a subject having seizure, epilepsy or status epilepticus by administering in combination to the subject a neuroactive steroid and a benzodiazepine or anesthetic/sedative. In some embodiments, the method further comprises administering at least one of the neuroactive steroid and benzodiazepine or anesthetic/sedative parenterally (*e.g.,* intranasally, buccally, intravenously or intramuscularly, for example, intravenously or intramuscularly). In some embodiments, both the neuroactive steroid and benzodiazepine or anesthetic/sedative are administered parenterally.

In some embodiments, the neuroactive steroid and benzodiazepine or anesthetic/sedative co-administered (*e.g.,* administered simultaneously, administered concurrently). In some embodiments, the neuroactive steroid and benzodiazepine or anesthetic/sedative are administered sequentially. In some embodiments, neuroactive steroid and benzodiazepine or anesthetic/sedative are administered in a single dosage form.

When the agents described herein (*e.g.,* the neuroactive steroid and a benzodiazepine or anesthetic/sedative) are administered in combination, both of the agents should be present at dosage levels of between about 1 to 100%, and more preferably between about 5 to 95% of the dosage normally administered in the absence of the combination regimen. The agents may be administered separately, as part of a multiple dose regimen. Alternatively, the agents may be part of a single dosage form, mixed together with the compounds of this disclosure in a single composition.

52. The use of claim 2, wherein the plasma concentration of said first dose is measured at a preselected time, *e.g.,* at 10, 15, 20, 30, 45, 60 minutes, 2, 3, 4, 5, 6, 8, 10, 12, 24 hours, 2, 3, 4 days after the initiation of said first dose.

53. The use of claim 2, said first dose is to be administered over a period of time that is not longer than 6, 5, 4, 3, 2, or 1 hour.

54. The use of claim 2, said first dose is to be administered over a period of time that is at least 10, 20, 30, 40, 50, 60, 70, 80, or 90 minutes in duration.

55. The use of claim 2, said first dose is to be administered over a period of time that is 30 to 120 minutes, 45 to 100 minutes, or 50 to 70 minutes, in duration.

56. The use of claim 2, said first dose is to be administered over a period of time that is 60 +/- 15 minutes, 60 +/- 10 minutes, 60 +/- 5 minutes, or 60 minutes, in duration.

57. The use of claim 2, said first dose is to be administered at a dosage rate of 200-3500 μg/kg/hour.

58. The use of claim 2, said first dose is to be administered at a dosage rate of 200-350 μg/kg/hour, 250-300 μg/kg/hour, 280-290 μg/kg/hour, 286 μg/kg/hour, 287 μg/kg/hour, or 288 μg/kg/hour, *e.g.,* for one hour.

59. The use of claim 2, said second dose is a maintenance dose.

60. The use of claim 2, wherein the administration said second dose is initiated within a preselected time period, wherein said time period begins with a time period selected from the group consisting of: the administration of said anesthetic; the induction of general anesthesia; the beginning of the first dose; the end of the first dose; and the achievement of a predetermined level of allopregnanolone, *e.g.,* in the plasma.

81. The use of claim 2, wherein said second dose results in a plasma concentration of 2300 to 2600 nM, 2400 to 2500 nM.

82. The use of claim 2, wherein said second dose results in a plasma concentration of 300 to 400 nM, 400 to 500, 600 to 700, 800 to 900, 1100 to 1200, 1300 to 1400, 1400 to 1500, 1600 to 1700, 1800 to 1900, 1900 to 2000, 2100 to 2200, 2300 to 2400 nM.

83. The use of claim 2, wherein said second dose results in a plasma concentration of 500 to 2500 nM, 500 to 1500 nM, 500 to 1000 nM, 500 to 800 nM, or 500 to 600~~,~~ nM.

84. The use of claim 2, wherein said second dose results in a plasma concentration of 50 to 250 nM, 100 to 200 nM, or 140 to 160 nM.

85. The use of claim 37, wherein said second dose results in a plasma concentration of 150 +/- 30 nM, 150 +/- 20 nM, 150 +/- 10 nM, or 150 nM

86. The use of claim 2, wherein the plasma concentration of said second dose is measured at a preselected time, *e.g.*, at 10, 15, 20, 30, 45, 60 minutes, 2, 3, 4, 5, 6, 8, 10, 12, 24 hours, 2, 3, 4 days after the initiation of said second dose.

87. The use of claim 2, wherein said second dose results in a plasma concentration of 150 nM, *e.g.*, as measured at a preselected time, *e.g.*, at 10, 15, 20, 30, 45, 60 minutes, 2, 3, 4, 5, 6, 8, 10, 12, 24 hours, 2, 3, 4 days after the initiation of said second dose.

88. The use of claim 2, wherein said second dose is to be administered at the same amount of allopregnanolone /unit time over the entire second dose.

89. The use of claim 2, wherein the amount of allopregnanolone delivered/unit time varies during the second dose.

103. The use of claim 96, wherein, after the completion of said third step dose, no allopregnanolone is to be administered to the subject for at least 10, 20, 30, 40, 50, or 60 days, or until the patient has a subsequent episode of SRSE.

104. The use of claim 96, said first step dose is to be administered at an amount of allopregnanolone/unit time of 25-1000 μg/kg/hour.

105. The use of claim 96, said first step dose is to be administered at an amount of allopregnanolone/unit time of 25-100 μg/kg/hour, 50-75 μg/kg/hour, 60-70 μg/kg/hour, 63 μg/kg/hour, 64 μg/kg/hour, or 65 μg/kg/hour.

106. The use of claim 96, said second step dose is to be administered at an amount of allopregnanolone/unit time of 10-700 μg/kg/hour.

107. The use of claim 96, said second step dose is to be administered at an amount of allopregnanolone/unit time of 10-70 μg/kg/hour, 25-55 μg/kg/hour, 40-50 μg/kg/hour, 42 μg/kg/hour, 43 μg/kg/hour, or 44 μg/kg/hour.

108. The use of claim 96, said third step dose is to be administered at an amount of allopregnanolone/unit time of 5-500 μg/kg/hour.

109. The use of claim 96, said third step dose is to be administered at an amount of allopregnanolone/unit time of 5-50 μg/kg/hour, 10-35 μg/kg/hour, 15-25 μg/kg/hour, 20 μg/kg/hour, 21 μg/kg/hour, or 22 μg/kg/hour.

110. The use of claim 96, wherein the administration of the third/taper dose begins no longer than 90, 80, 70, 60, or 30 minutes after the administration or end of the second dose.

129. The use of claim 117, wherein the cyclodextrin is present in the composition at 12% by weight of cyclodextrin per volume of composition and the allopregnanolone is provided at a concentration of 5 mg/mL allopregnanolone.

130. The use of claim 117, wherein the cyclodextrin is present in the composition at 12% by weight of cyclodextrin per volume of composition and the allopregnanolone is provided at a concentration of 3.75 mg/mL allopregnanolone.

131. The use of claim 117, wherein the cyclodextrin is present in the composition at 12% by weight of cyclodextrin per volume of composition and the allopregnanolone is provided at a concentration of 2.5 mg/mL allopregnanolone.

132. The use of claim 117, wherein the cyclodextrin is present in the composition at 12% by weight of cyclodextrin per volume of composition and the allopregnanolone is provided at a concentration of 1.25 mg/mL allopregnanolone.

133. The use of claim 1, wherein the subject is to be evaluated, wherein the evaluating comprises performing c-ECG.

134. The use of claim 1, wherein the subject is to be evaluated, wherein the evaluating comprises performing EEG.

135. The use of claim 1, wherein the subject is to be evaluated for serum chemistry (*e.g.*, one or more of albumin, AST, ALT, bicarbonate, bilirubin, BUN, calcium, chloride, creatine kinase, lipase, creatinine, magnesium, potassium, sodium, total protein, or glucose).

136. The use of claim 1, wherein the subject is to be evaluated for CBC (*e.g.*, one or more of RBC, hemoglobin, hematocrit, MCV, MCH, MCHC, platelet count, WBC with differential including neutrophils, eosinophils, basophils, lymphocytes, or monocytes).

137. The use of claim 1, wherein the subject is to be evaluated for serum allopregnanolone, progesterone, and 5α-dihydrotestosterone.

138. The use of any of claims 133-137, comprising comparing an observed value with a reference value.

139. The use of any of claims 133-137, wherein said subject is to be evaluated for a parameter described herein during ~~said~~ a weaning period in which said subject is weaned from said general anesthesia.

140. Use of allopregnanolone in the manufacture of a medicament for treating a subject having, status epilepticus (SE), refractory status epilepticus (RSE) or super-refractory status epilepticus (SRSE), wherein the medicament is to be administered as follows:

administering a first/load, *e.g.,* bolus, dose concurrent with general anesthesia, wherein administration of said first dose: begins 2-120 hours after induction of general anesthesia; lasts for 30-90 minutes; and results in a plasma level of allopregnanolone of 100-2000 nM allopregnanolone;

administering a second/maintenance dose, wherein, the administration of said second dose begins not longer than 1-60 minutes after the end of the second dose; lasts for 1-6 days; and results in a plasma level of allopregnanolone of 100-2000 nM allopregnanolone;

administering a third downward taper dose, wherein, the administration of said third downward taper dose begins not longer than 1-60 minutes after the end of the third dose; lasts for 10-100 hours; and results in a plasma level of allopregnanolone of 0-1500 nM allopregnanolone;

wherein, collectively, the administrations are provided in sufficient amount to treat said subject.

141. The use of claim 140, wherein:

administering a first/load, *e.g.,* bolus, dose concurrent with general anesthesia, wherein administration of said first dose: begins 2-120 hours after induction of general anesthesia; lasts for 60 +/-15 minutes;

administering a second/maintenance dose, wherein, the administration of said second dose begins not longer than 30 minutes after the end of the second dose; lasts for 70 to 110 hours;

149. The kit of claim 148, wherein the allopregnanolone is provided at a concentration of 0.5-7.5 mg/mL allopregnanolone.

150. The kit of claim 149, wherein the allopregnanolone is provided at a concentration of 1-6 mg/mL allopregnanolone.

151. The kit of claim 150, wherein the allopregnanolone is provided at a concentration of 5 mg/mL allopregnanolone.

152. The kit of claim 150, wherein the allopregnanolone is provided at a concentration of 3.75 mg/mL allopregnanolone.

153. The kit of claim 150, wherein the allopregnanolone is provided at a concentration of 2.5 allopregnanolone.

154. The kit of claim 150, wherein the allopregnanolone is provided at a concentration of 1.25 mg/mL allopregnanolone.

~~155. A method of making a series of dosages, the method comprising combining a diluent and allopregnanolone in proportions to form dosage forms suitable for use as the first, second and one or more step doses for said third dose.~~

~~156. A method of adjusting the amount of diluents and / or allopregnanolone flowing into or out of a delivery device, *e.g.*, a catheter, reservoir, the method comprising altering, *e.g.*, decreasing, the flow rate of allopregnanolone flowing into the delivery device, so as to release in succession, two or more of a first dose, a second dose and one or more step doses of the third dose.~~

~~157~~155. The use of claim 2, wherein the administration of said first dose is initiated while said subject is under general anesthesia.

~~158~~156. The use of claim 2, wherein the administration of said first dose is initiated prior to said subject undergoing general anesthesia.

~~159~~157. The use of claim 2, wherein the administration of the first dose is initiated prior to the initiation of the administration of an anesthetic.

~~160~~158. The use of claim 2, wherein the administration of the first dose is initiated after the initiation of the administration of an anesthetic.

~~161~~159. The use of claim 2, wherein the administration of the first dose, and the administration of an anesthetic, are initiated at the same time.

~~162~~160. The use of claim 2, wherein the administration of the first dose, and the administration of an anesthetic, are initiated within, 5, 10, 60, 120, 180, 240, or 300 minutes of one another.

~~163~~161. The use of claim ~~162~~160, wherein the administration of the first dose is initiated prior to the initiation of administration of an anesthetic.

~~164~~162. The use of claim ~~162~~160, wherein the administration of the first dose is initiated after the initiation of administration of an anesthetic.