

Special Concerns about Seizure Medications for Women

How to I know if I am taking the right medication for my seizures?

The choice of antiepileptic medication is based on seizure type, the pattern of your EEG, how well the medication controls your seizures, and how you tolerate the medication. Some types of epilepsy respond better to certain medications than others. Seizure patterns can change and medication may need to be altered. Choosing the appropriate medication is very individual. An antiepileptic may work well in one person, and not in another. You and your doctor can work together to find the best medication for you.

I've read about some new medications. Should I try one of these?

That depends on how well your seizures are controlled and how you feel on your current medicine. If you want better seizure control than you have, or feel you are having unpleasant side effects from the medication, talk to your physician about other options. Sometimes, there is no perfect solution and you will have to choose between some side effects and total seizure control, or no side effects and some seizures. Only you, with your doctor's advice, can decide what is the best choice for you.

Some of the newer medications seem to control seizures well with minimal side effects. If you are not happy with your current situation, it makes sense to take to your doctor about trying something else. However, any change in medication may put you at risk for break-through seizures and require some temporary limitations in lifestyle (not driving a car, for instance) until the effects of the medication are clear. Again, you will need to weigh the benefits versus possible risk and inconvenience.

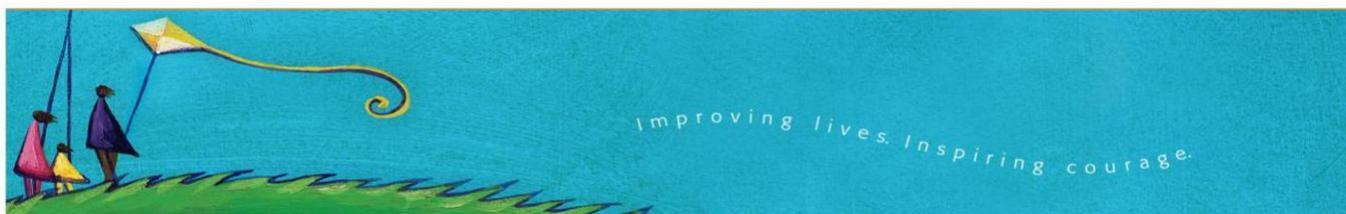
I tried three different medications before I found one that controlled my seizures. Why didn't my doctor try that one first?

There is no magic way to know which medication will work for a specific person. Although it feels frustrating to be switched from one medication to another, it is a good medical decision to keep trying to find the antiepileptic drug that best controls seizures with the least side effects. Keep in close contact with your nurse and doctor to be sure they understand your response to medication.

How do I know if I'm having side effects?

That's a good question. All medications can cause side effects. However, most people tolerate their medications very well. The best way to tell if you are having side effects is to notice any symptoms you feel when you first take a medication or when a dose is changed. Some side effects of seizure medication are symptoms you feel, and are related to your dose of medication. If you are taking more medication than you can tolerate, you may feel groggy, or dizzy or sick to your stomach. You may have poor balance or see double at times. The dose at which these symptoms occur varies and some people can tolerate a much higher dose than others.

In addition to side effects caused by the dose of medication, there may be symptoms that occur in some, but not all, people who take the drug. This is called an idiosyncratic side effect. Some people notice weight gain, unrelated to calories eaten, on certain seizure medications. Valproate (Epival) may be the most common drug to have this side effect, but it has been noted with carbamazepine (Tegretol) and gabapentin (Neurontin) as well. Topiramate (Topamax) can cause weight loss.



Phenytoin (Dilantin) may cause undesirable cosmetic side effects, such as gum thickening, excessive hair growth (including facial hair) and coarsening of the features. Again, this dose does not happen to everyone, and is more likely to occur after prolonged use.

Mood changes seem to be more common with phenobarbital, primidone (Mysoline) and levetiracetam, but any seizure medication can make some people feel depressed or irritable. Obviously, these symptoms may be caused by something other than epilepsy medicine, such as illness or stress. Give your doctor as much information as possible to help determine the underlying cause.

There are some dangerous side effects (including liver failure and blood disorders) that may initially show up only in a blood test. This is one reason that your doctor may order lab work when you first start a new medication. Most of the serious side effects (such as an allergic rash) show up in the first few months you take a medicine, are not dose-related and are unlikely to occur later.

I take birth control pills. Do they interact with my seizure medication?

There may be complex interactions between the hormones in birth control pills and some of the medications used to control seizures. Some of these medications increase the breakdown of contraceptive hormones in the body, making them less effective in preventing pregnancy. It is very important that all health care providers be aware of the medicine you take.

For more detailed information on this subject, contact the BC Epilepsy Society for the information sheet on Epilepsy and Contraception.

I am thinking of getting pregnant. Will there be any problems with my seizure medications?

It's a good idea to think about these complex issues prior to getting pregnant. Vitamins with a folic acid supplement are an important factor in reducing the risk of certain kinds of birth defects, and you need to take folic acid before you become pregnant. Uncontrolled seizures can have risks for both you and your unborn child, and multiple seizure drugs at higher doses are statistically related to an increased risk for some types of birth defects. Whenever possible, a single anticonvulsant at a lower dose that provides good seizure control should be used.

But it's important to remember that your chances of a normal, healthy child are excellent – greater than 90%. Talk through any potential problems now with a neurologist and a gynecologist/obstetrician so you can make reasonable decisions about this important part of your life.

For more detailed information on the subject, contact the BC Epilepsy Society for the information sheet like this one on Pregnancy and the Mother's Health and the one on Pregnancy and the Developing Child.

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