



# Drugs Used in Epilepsy-II

### Carbamazepine

#### • Pharmacokinetics :

- > Available as capsules &Syrup only orally
- Well absorbed
- > Strong enzyme inducer including its own metabolism
- > Metabolized by the liver to active & inactive metabolites
- > Half life 18-35 hr
- Excreted in urine

## Carbamazepine

#### **Mechanism of action**

 Blockade of Na<sup>+</sup> & Ca<sup>++</sup> influx into neuronal axon

Inhibit the release of excitatory transmitters

Potentiate the action of GABA

### **Therapeutic uses:**

- Drug of choice in partial seizures.
- Tonic-clonic seizures (1ry & 2ry generalized) but <u>Not</u> in absence seizures.

#### Other uses:

- Bipolar depression.
- Trigeminal neuralgia

### Side effects

GIT upset

Hypersensitivity reactions

• Drowsiness, ataxia, headache & diplopia

Hyponatremia & water intoxication

Teratogenicity

## **Sodium Valproate**

Broad spectrum antiepileptic

• Pharmacokinetics:

- Available as capsules, Syrup, I.V
- Metabolized by the liver (inactive)
- **OEnzyme inhibitor**
- ○Half life 12-16 hr
- Excreted in urine

## Sodium valproate

#### **Mechanism of action**

- Blocks activated Na<sup>+</sup> channels.
- Enhances GABA synthesis & reduces degradation
- Suppress glutamate action.
- Blocks T-type Ca<sup>2+</sup> channels

#### [II] Other uses:

- Bipolar disorder and mania
- Prophylaxis of migraine
- Lennox-Gastaut syndrome

### **Therapeutic Uses**

#### [I] Epilepsy:

- It is effective for all forms of epilepsy
- Generalized tonic-clonic seizures (1<sup>ry</sup> or 2<sup>ry</sup> ).
- Absence seizures
- Complex partial seizures
- Myoclonic
- Atonic
- photosensitive epilepsy

## Sodium valproate, Side effects:

- GI (nausea, vomiting, heart burn)
- ➤ Weight gain (↑appetite)
- > Transient hair loss, with re-growth of curly hair
- > Thrombocytopenia (not used with aspirin or coumadin
- > Transient increase in liver enzymes & hepatotoxicity
- > Teratogenicity (neural tube defect)

### Ethosuximide

### • Pharmacokinetics:

- Absorption is complete
- Syrup & capsule forms
- Not bound to plasma proteins or tissues
- Metabolized in liver
- Half life 52-56 hr
- 10-20% of a dose is excreted unchanged the urine

### Ethosuximide

Mechanism of action

Inhibits T- type Ca<sup>2+</sup> channels in thalamo-cortical neurons

### Ethosuximide

### Therapeutic uses

Absence seizures

### **Adverse effects**

- Gastric distress
  - nausea
  - vomiting
- Drowsiness, fatigue, hiccups, headaches

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## Lamotrigine

- **Pharmacokinetics** 
  - Available as oral tablets
  - Well absorbed from GIT
  - Metabolized primarily by glucuronidation
  - Does not induce or inhibit C. P-450 isozymes
  - Half life approx. 24 hr

## Lamotrigine

Mechanism of action	Therapeutic Use
<ul> <li>Blockade of Na<sup>+</sup> channels</li> </ul>	<ul> <li>As <u>add-on</u> therapy or as <u>monotherapy</u> in partial seizures</li> </ul>
<ul> <li>Inhibits excitatory amino acid release (glutamate &amp; aspartate)</li> </ul>	<ul><li>Lennox-Gastaut syndrome</li></ul>

## Lamotrigine, Side effects:

- Influenza-like symptoms
- Skin rashes (may progress to Steven –Johnson syndrome)
- Somnolence
- Blurred vision
- Diplopia
- Ataxia



### **Topiramate**

### • Pharmacokinetics:

- Well absorbed orally (80 %)
- Food has no effect on absorption
- Has no effect on microsomal enzymes
- 9-17 % protein bound ( minimal )
- Mostly excreted unchanged in urine
- Plasma t½ 18-24 hrs

### **Topiramate**

- Mechanism of Action:
- Blocks sodium channels (membrane stabilization) and also potentiates the inhibitory effect of GABA.

- Clinical Uses:
- Can be used alone for partial, generalized tonic-clonic, and absence seizures.
- Lennox-Gastaut syndrome (or lamotrigine, or valproate).

### Topiramate, Side effects:

- Psychological or cognitive dysfunction
- Weight loss (can be desirable side effect)
- Sedation
- Dizziness
- Fatigue
- Urolithiasis
- Paresthesias (abnormal sensation )
- Teratogenecity (in animal but not in human)

## **Summary**

Type of seizur	е	Choice among drugs
Partial seizures:		
Carbamazepine or phenytoin or valproate or lamotrigine.		
Generalized seizures:		
Tonic-clonic (grand mal)	Valproate or carbamazepine or phenytoin or	
	Lamotrig	ine
Myoclonic	Valproate, clonazepam	
Absence	Valproate, ethosuximide	
Atonic	Valproate	

## Drugs used for treatment of Status Epilepticus

 Most seizures last from few seconds to few minutes. When seizures follow one another without recovery of consciousness, it is called "status epilepticus"

It has a high mortality rate

Death is from cardiorespiratory failure.

### Antiepileptics used in status epilepticus

### **❖** Intravenous injection of :

- Lorazepam, Diazepam (drugs of choice)
- Phenytoin
- Fosphenytoin
- Phenobarbital
- Valproate

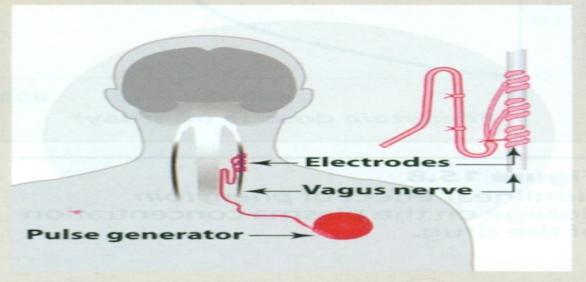
### Vagal nerve stimulation

 It is an alternative for patients who have been refractory to multiple drugs

Who are sensitive to the many adverse effects of anti epileptic drugs

• It is an expensive procedure

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  - An implanted pulse generator connects to electrodes that coil around the vagus nerve.
  - The vagal nerve stimulator generates an electrical pulse that stimulates the vagus nerve.



- This electrical stimulation prevents the abnormal electrical activity that can cause a seizure.
- The patient activates the stimulator when they anticipate a seizure.

## Pregnancy & antiepileptics

- Seizure is very harmful for pregnant woman
- NO antiepileptic drug is safe in pregnancy
- Monotherapy usually better than drug combination
- Valproate & phenytoin are contraindicated during pregnancy
- Patient has to continue therapy

## Summary

 Epilepsy is classified into partial or generalized according to the site of lesion

The exact mechanism of action of antiepileptics is not known

Phenytoin is mainly used for treatment of generalized tonic-clonic seizures

Carbamazepine is mainly used for treatment of partial seizures

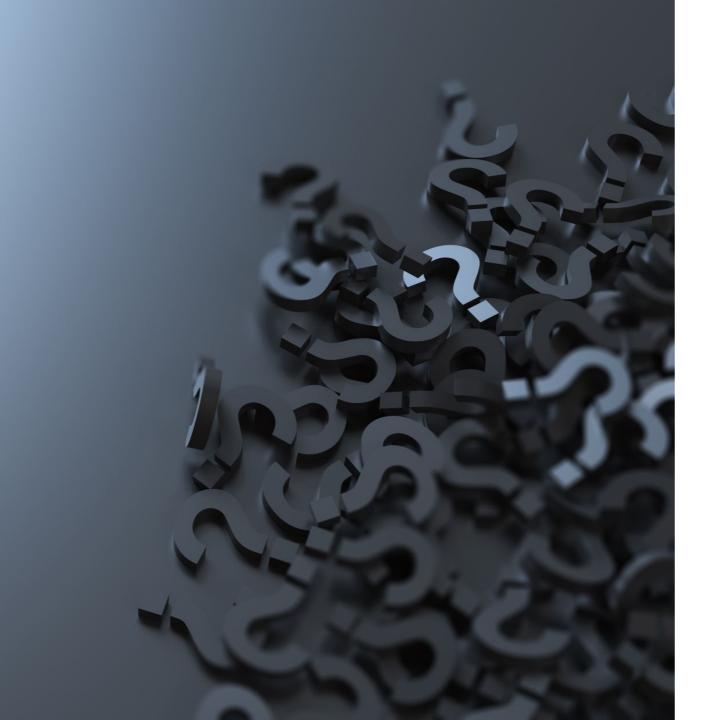
## Summary

• Sodium valproate is a broad spectrum antiepileptic drug

 Lamotrigine & levetiracetam are used as monotherapy or adjunctive therapy in refractory cases

 Lorazepam , diazepam , phenytoin are used intravenously for treatment of status epilepticus

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## Questions ???