Maria Perrone:
Welcome to the Brain Briefing. Brief conversations with neurology experts with information for everyday people. With us today is Dr. Prachi Parikh, a neurologist who specializes in management of difficult to treat epilepsy and the correlation of hormones and epilepsy. And today we'll be talking about pregnancy and epilepsy.
For persons with epilepsy who are considering conceiving, what are some of the common concerns or challenges they might face?

Dr. Prachi Parikh:
Women and other patients wanting to get pregnant can often face challenges trying to conceive. So one of the things that they might face trouble with is an issue called PCOS, which stands for polycystic ovarian disease or ovarian syndrome where the ovaries don't work like they're supposed to. The second challenge is the availability of misinformation out there regarding the safety of anti-seizure medications in pregnancy. Now there are a lot of anti-seizure medications that are safe in pregnancy, and the patients should discuss this with their provider when the time's right. Lastly, I wanted to talk about the importance of preconception counseling. So all persons who are wanting to get pregnant should meet with their provider at least six months prior to trying to conceive.

Maria Perrone:
And why is preconception counseling so important for persons with epilepsy?

Dr. Prachi Parikh:
The percentage of people who conceive and whose pregnancies are unplanned ranges from 50 to 75%. Now, in the general population it might not be as big of an issue, but in persons with epilepsy they're often on anti-seizure medications that might lower their level of folic acid. Now you might ask why is folic acid so important? Folic acid plays an important role in cell division, which means it plays a very important role in the growth of the baby. And we want to lower the risk of any harm to the baby by recommending enough vitamins, by doing our thorough workup prior to them conceiving.

Maria Perrone:
What are the chances of a patient having seizures during a pregnancy? And is there anything you can do to lower those risks?
Dr. Prachi Parikh:
So the chances of having a seizure during pregnancy is different from person to person. And the number one marker that can suggest whether or not they will have a seizure during pregnancy is their pre-pregnancy seizure rate. So for persons who have been seizure free for nine months prior to conceiving, the chances that they would have a seizure during pregnancy is low. The things that one can do to reduce the risk of having a seizure during pregnancy would be one, always take your medications on time. This can vary from provider to provider and based on the medications that the patient is on in persons who are pregnant, oftentimes due to increase or changes in volume of distribution of fluid.
So there can be increased amount of blood flowing through your system, there can be a change in metabolism. We often find that the levels of medications fluctuate. More often than not they tend to decrease as time goes on during the pregnancy. And I can suggest what we do in our practice, and it varies from patient to patient and provider to provider, but oftentimes we want to check the levels of anti-seizure medications frequently, at least about every four weeks, and make sure that the levels are not dropping too low or increasing the risk of having seizures.

Maria Perrone:
And lastly, for persons with epilepsy who are interested in conceiving, is there any way to know what the chances are to have a healthy baby?

Dr. Prachi Parikh:
These percentages are obviously very individualistic, and depending on the number of anti-seizure medications that the patient is on and the type of anti-seizure medication that the patient is on, the amount of preconception counseling and preparation that they get. But in a patient who is well supervised by their provider, who has gotten appropriate care, who is on the least number of medications that is safest for them during pregnancy, the chances that they would have a safe and healthy pregnancy are about 95%. So I always counsel my patients that even in the general population who is not on any medications, that the chances that they would have a baby with any birth defects is two to 3%. So for patients with epilepsy, a 95% chance of having a healthy pregnancy is pretty close to the general population.

Maria Perrone:
Thanks to Dr. Parikh for talking to us today. Thanks to our audio engineer Stephany Perez, and thanks to you for listening to this episode of the Brain Briefing. You can find more info about the Duke Comprehensive Epilepsy Center at https://neurology.duke.edu/DCEC.