



The Brain Briefing, Episode 7

Dr. Parikh: Post Pregnancy Care and Counseling & Epilepsy, April 11, 2023

Credits:

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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 post-pregnancy care and counseling and epilepsy.

For persons with epilepsy, is it safe to breastfeed?

Dr. Prachi Parikh:

So the short answer for that would be yes, but the long answer would be, it really depends on the type of medications that you're taking. And for that, every person with epilepsy should discuss this with their provider. But in general, most of the medications that are pregnancy safe are safe for breastfeeding. And you may ask why? Well, the baby is already exposed to these medications when they're inside the womb and once they're outside, they're actually getting a lower concentration or a lower amount of medication in the mother's milk, which is then getting digested by them and getting absorbed in their system.

So it's kind of an auto-ween off the medication that they were already exposed to in their parents' womb. And additionally, for babies who were breastfed, there were studies that looked at the IQ, the intelligence quotient of babies that were exposed to the medications in the womb versus babies who were not exposed to any medications. And they found that at three years, the intelligence quotient of both these babies was pretty similar, so to speak, that the medications did not really play a role in their intelligence by the time they were three years old.

Maria Perrone:

So now that the baby is home, how does the care differ for persons with epilepsy?

Dr. Prachi Parikh:

That is an excellent question. Oftentimes when mothers leave the hospital, they feel like they've been thrown to the other end and they have no guidance about what to do. And I feel like this holds true more so in persons with epilepsy because there are certain things that they really should be careful about. What I always tell my patients with epilepsy is that you should not co-sleep with the baby because you might have a seizure right after giving birth, which is the time when you're at highest risk of having seizures.



Maria Perrone:

And just to clarify, how would you define co-sleeping?

Dr. Prachi Parikh:

So you're sleeping either in the same bed or even if you're sleeping in a bed that is attached to the baby's cot, it counts as co-sleeping.

Maria Perrone:

And what are some other risks and recommendations that you have for persons with epilepsy?

Dr. Prachi Parikh:

So I recommend that the parent with epilepsy should never bathe the baby alone because there's a risk of drowning if the parent were to have a seizure. They should not baby wear because if they have a seizure, it would be hard to remove the baby out of the wrap. They should always change the baby on a lower floor instead of a diaper changing table or in the middle of a big bed, because you don't want the baby to roll off if the parent has a seizure. They should always use an auto-lock stroller. Or you can attach an auto lock device to a regular stroller, so that if at all they're walking with the baby in a stroller on the street and they have a seizure, the stroller doesn't roll off onto traffic.

And then if you're placing the baby somewhere, you have to go do something, always place the baby on the ground, not at a height. And the last, but not the least, I recommend that they don't cook or use burners or use sharp instruments when they're around the baby, especially when they're alone at home.

Maria Perrone:

And then our last question, do babies who were exposed to anti-seizure medications while in the womb experience any disadvantages as they grow?

Dr. Prachi Parikh:

That is a great question. And again, I'm going to bring up the caveat that it really depends on what anti-seizure medication the parent was on when they were pregnant with the baby. So, in persons who were on the safer medications that have been studied – at six years, they really found that there was no disadvantage that these babies had over their peers who were not exposed to any of the anti-seizure medications. And really the one thing that helped these babies develop well was the amount of interaction that they had with their parents. So parents who really interacted and were engaged with the babies right from birth and as they grew up had a much better chance of succeeding and doing well as compared to parents who did not interact or who did not engage with the child.

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>.