ANTIEPILEPTIC DRUGS: PREVENTION OR TREATMENT? NOT A MERELY QUESTION OF TERMINOLOGY

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Epilepsy is a disease characterized by the occurrence of clinical events starting from the brain.

Considering the usual mode of occurrence of a seizure: paroxysmal, unpredictable and often involving the relational sphere, seizures quite frequently have significant psychological consequences for the safety and emotional stability of patients. Moreover, patients quite often express urgency for drugs to stop the events, a request almost always agreed by the neurologist involved in the decision-making process.

It is also well known that antiepileptic drugs prevent the recurrence of seizures and their effectiveness in the prevention is undisputed. Nevertheless there is no scientific evidence to support their validity as disease modifying therapy.

The awareness of these basic concepts should result in a more rational use of antiepileptic drugs in different clinical situations and their use calibrated to the severity of the symptoms and/or to the risk of recurrence rather than on diagnostic label of epilepsy.

In essence, the chronic use of the drug for an indefinite length of time should be considered more attentively and the beginning of therapy should be delayed when faced with a single or sporadic seizure with "minimal" manifestations.

A temporary anticonvulsant prophylaxis, instead, should be encouraged in case of clinical situations characterized by a high risk of seizures or in the presence of specific type of seizures symptomatic of diseases that can be treated even in the absence of a clear diagnosis of epilepsy.