Is there an advantage to continue trying new AEDs indefinitely in refractory patients? No

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This debate concerns the question if patients should be offered to try new antiepileptic drugs (AED) indefinitely. There are many reasons why continuing with AEDs without offering other alternatives can prevent the patient from achieving seizure freedom or at least a reduction in seizure frequency and severity. It is generally accepted that patients, after trying one or two appropriate AEDs, should be evaluated for epilepsy surgery possibilities. It is important not to delay this evaluation. Additional trials of AEDs can result in improvement but the statistics imply that this is most often not the case. By primarily concentrating on switching AEDs, there can be a delay is efforts to improve the situation in other ways as through diet or neuromodulation. Other activities include improving the social environment and consideration of side effects of AEDs.