Epilepsy and Pregnancy

Obstetrics & Gynaecology
Women & Children's Services

This leaflet has been designed to give you important information and to answer some common queries that you may have.

Information for patients and visitors

Introduction

Epilepsy is common and it affects around 456,000 people in the UK. The main symptoms of epilepsy are repeated seizures. It is hard to predict how pregnancy will affect epilepsy. For some women their epilepsy is unaffected, others may see an improvement in their condition, while others may find their seizures become more frequent and severe.

Your care during pregnancy

As early in pregnancy as possible, you will be referred to an obstetrician who will discuss and plan your care during pregnancy. If necessary, a neurologist may also be involved in putting this plan together.

Drug treatment

Many women with epilepsy use drugs to keep their seizures under control. In general, these drugs increase the risk of physical defects in the developing baby. They can cause a range of conditions such as spina bifida, heart abnormalities and cleft lip. For a woman without epilepsy who is not taking medication, the chance of one of these kind of problems arising is around 1 in 50. For a woman who takes drugs to control epilepsy, that risk increases to between around 1 in 25 to 1 in 12. This means that most women taking anti-epileptic drugs will have a healthy child.

To minimize the risk to your baby's development it is sometimes possible to switch to safer drugs, cut the dose or change the way the drugs are given. **This should only be done by a professional who has specialised knowledge in the treatment of epilepsy.** It is usually better to make any changes to drug treatment before rather than during pregnancy. **Do not alter drug treatment or stop taking treatment without taking specialist advice, especially during pregnancy. A severe seizure during pregnancy could result in the death of both mother and baby.**

If you are taking drugs to control epilepsy it is recommended that you take a high (5mg) daily dose of folic acid as soon as you start trying for a baby. Your GP will need to prescribe this as it is a higher dose than you can buy over the counter. The folic acid may protect your baby against the effects of your anti-epileptic drugs. If you become pregnant unexpectedly and have not been taking folic acid, start taking it straight away.

UK Epilepsy and Pregnancy Register

This register has been established to gather information about the frequency of malformations in babies of mothers taking anti-epileptic drugs. Registration is completed by the mother (0800 389 1248, www.epilepsyandpregnancy.co.uk).

Antenatal Care

You will be offered ultrasound scans to help detect any physical or structural problems with your baby. **Please inform the sonographer that you are epileptic and which drugs you take.** You may be offered extra blood tests to check the levels of treatment drugs. If there is a strong history of epilepsy in your family or your partner's family, your care team will talk to you about the possibility of your baby inheriting the condition.

Labour, birth and after

Although there is only a low risk of having a seizure in labour, it is recommended that you give birth in hospital. A water birth is not advised. During labour you will be looked

after by a midwife, and doctors will be available if you need their help.

Because some anti-epileptic drugs reduce the ability of your baby's blood to clot you may be given vitamin K to take in the later stages of your pregnancy, although there is currently no preparation licensed for use in pregnancy. You will be offered a vitamin K injection for your baby.

There is usually no reason why you can't breastfeed your baby. Even if some of your medication gets into your milk, the benefits of breastfeeding often outweigh any risks. Your midwife or obstetrician can give you advice based on your circumstances.

References

NHS Choices: Epilepsy and Pregnancy
http://www.nhs.uk/Planners/pregnancycareplanner/Pages/Epilepsy.aspx

Epilepsy Action: Epilepsy and having a baby
http://www.epilepsy.org.uk/print/book/export/html/57937

National Institute for Clinical Excellence: The Epilepsies. Clinical Guideline 20
http://www.nice.org.uk/CG20NICEguidelines

Scottish Intercollegiate Guidelines Network: Guideline 70 Diagnosis and management of epilepsy in adults. Section 4 Contraception, pregnancy and HRT
http://www.sign.ac.uk/guidelines/fulltext/70/section4.html

Contact details within the Trust for patients to obtain additional information

Grimsby: Acorn Suite Manager 01472 874111 Ext: 7806

Scunthorpe: Antenatal Clinic Manager 01724 282282 Ext: 8182

Goole: 01405 720720

Concerns and Queries

If you have any concerns / queries about any of the services offered by the Trust, in the first instance, please speak to the person providing your care.

For Diana, Princess of Wales Hospital

Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01472) 875403 or at the PALS office which is situated near the main entrance.

For Scunthorpe General Hospital

Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01724) 290132 or at the PALS office which situated on C Floor.

Alternatively you can email: nlg-tr.PALS@nhs.net

Confidentiality

Information on NHS patients is collected in a variety of ways and for a variety of reasons (e.g. providing care and treatment, managing and planning the NHS, training and educating staff, research etc.).

Everyone working for the NHS has a legal duty to keep information about you confidential. Information will only ever be shared with people who have a genuine need for it (e.g. your GP or other professionals from whom you have been receiving care) or if the law requires it, for example, to notify a birth.

Please be assured however that anyone who receives information from us is also under a legal duty to keep it confidential.

Information for patients and visitors

Zero Tolerance - Violent, Threatening and Abusive Behaviour

The Trust and its staff are committed to providing high quality care to patients within the department. However, we wish to advise all patients / visitors that the following inappropriate behaviour will not be tolerated:

- Swearing
- Threatening / abusive behaviour
- Verbal / physical abuse

The Trust reserves the right to withdraw from treating patients whom are threatening / abusive / violent and ensuring the removal of those persons from the premises.

All acts of criminal violence and aggression will be notified to the Police immediately.

Risk Management Strategy

The Trust welcomes comments and suggestions from patients and visitors that could help to reduce risk.

Perhaps you have experienced something whilst in hospital, whilst attending as an outpatient or as a visitor and you felt at risk.

Please tell a member of staff on the ward or in the department you are attending / visiting.

Moving & Handling

The Trust operates a Minimal Lifting Policy, which in essence means patients are only ever lifted by nursing staff in an emergency situation.

Patients are always encouraged to help themselves as much as possible when mobilising, and if unable to do so, equipment may be used to assist in their safe transfer.

If you have any questions regarding moving and handling of patients within the Trust, please speak to a member of staff in the ward or department you are visiting.

Northern Lincolnshire and Goole NHS Foundation Trust

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Scartho Road
Grimsby
01472 874111

Scunthorpe General Hospital
Cliff Gardens
Scunthorpe
01724 282282

Goole & District Hospital
Woodland Avenue
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