

If you have epilepsy and you are thinking about getting pregnant, you probably have some important questions. Is it safe for me to get pregnant? Will having epilepsy make it harder for me to conceive? If I do get pregnant, how will I manage my seizures while I'm expecting? Could my antiseizure drugs harm my baby?

The most important thing you should know is that most women with epilepsy who have children give birth to normal, healthy babies. In fact, your chances of having a healthy child are greater than 90%. Experts say that you shouldn't let the fact that you have epilepsy discourage you from trying to have a family.

"There are increased risks, but these risks can be minimized by working carefully with your doctor. Don't let these risks keep you from having a family if that's what you really want," says epilepsy expert Mark Yerby, MD, MPH, associate clinical professor of neurology, public health and preventive medicine, Oregon Health Sciences University, Portland, Oregon.

Before you try to conceive, you should talk to your neurologist and your obstetrician. Most doctors recommend that women with epilepsy be cared for by a high-risk obstetrician during their pregnancy. Both will want to monitor you closely throughout.

Getting Pregnant With Epilepsy

It's possible that having epilepsy may make it more difficult for you to get pregnant. Women with epilepsy have fewer children than women in general. Their fertility rate is between 25% and 33% lower than average. Why is this? Here are some possible reasons:

- Women with epilepsy have higher rates of some conditions that can cause infertility. One of these is polycystic ovarian syndrome (PCOS).
- Women with epilepsy are more likely to have irregular menstrual cycles, which can make it more difficult to get pregnant.
- Women with epilepsy are also more likely to have menstrual cycles that do not produce an egg. These are called anovulatory cycles.
- Some antiseizure medications may affect the hormone levels in your ovaries, which can affect reproductive functioning.
- Women with epilepsy are more likely to have abnormalities in hormones involved in pregnancy.

If your seizures are not under control, that may affect your fertility as well. Experts say that if a woman is having seizures around the time her body is preparing to ovulate, it may disrupt the signals that make that process occur.

Once you become pregnant, it will be even more important to control your seizures. Having seizures during pregnancy can affect the health of your baby. You might fall, or the baby may be deprived of oxygen during the seizure, which can injure the baby and increase your risk of miscarriage or stillbirth.

Unfortunately, some of the most common drugs for controlling seizures have been found to increase the risk of birth defects. In the general population there is a 2%–3% chance that a child will have a birth defect. In women with epilepsy, this risk goes up to 4%–8%.

To help decrease the chance of birth defects, especially neural tube defects that can affect the brain and spinal cord, women with epilepsy should take at least 0.4 milligrams per day of folic acid supplements, starting before they get pregnant.

Which Drug to Take While Pregnant

Which medication should you take? Unfortunately, there is no clear answer. There are no antiseizure drugs that are completely without risk of causing birth defects. But some antiseizure medications appear to be more dangerous for a developing baby than others, and your doctor may be able to avoid prescribing them. Here's what doctors know so far:

- Valproic acid (Depakote) seems to carry the highest risk of damage to the baby, particularly neural tube defects, such as spina bifida.
- Doctors used to advise women to switch to phenobarbital during pregnancy because it appeared to be safer. Now, more recent research shows that it can also increase the risk of birth defects.
- Carbamazepine (Tegretol, Carbatrol) and lamotrigine (Lamictal) appear to carry lower risks of birth defects than Depakote and phenobarbital.

But that's not the whole story. Research has recently shown that women taking Lamictal have a higher risk of breakthrough seizures during pregnancy. That's because metabolism of Lamictal – as well as other antiepileptic drugs – increases during pregnancy. This can cause a drop in the level of antiseizure medication in your system. If that level gets too low, you could have a seizure. But if your doctor prescribes a higher dose of Lamictal to make sure that you don't have breakthrough seizures, there could be a higher risk of damage to your baby.

And both Tegretol and Depakote have been linked to an increased risk of spina bifida when taken during pregnancy. But the risk appears to be higher with Depakote than with Tegretol.

What makes things a bit more confusing is that information about the safety of antiseizure drugs during pregnancy is changing all the time. "This makes managing epilepsy during pregnancy very complicated," says Jacqueline French, MD, co-director of the Epilepsy Center at the University of Pennsylvania. "It's important that women with epilepsy who want to become pregnant make sure they are seeing a doctor who keeps up to date on all the newest research. What we know about epilepsy and pregnancy literally changes from month to month." You can also check with the Epilepsy Foundation if you have questions.

Prepare in Advance for Pregnancy

Depending on what your doctor says, you may want to change medications before you get pregnant, or it might be fine to stay with the one you are taking now. If you are taking more than one antiseizure drug, your doctor may recommend that you taper down to just one. That's because *combinations* of drugs to treat epilepsy have a higher risk of causing birth defects than just one drug alone.

If you are making any changes in your antiseizure medications at all, you should do that at least a year before getting pregnant. Switching medications has risks too. You may not respond well to the new drug and have breakthrough seizures, which could be harmful to a pregnancy.

When changing medications, doctors will usually add the new drug before stopping the old one. If you become pregnant during this time, the baby could be exposed to both drugs instead of just one.

Whether you change seizure medications or not, be sure to add folic acid to your daily schedule. Starting before you get pregnant, take prenatal vitamins with 0.4 milligrams of folic acid every day, and keep taking them throughout the pregnancy. Folic acid has been shown to reduce the risk of some birth defects by 60% to 70%. Because there are some extra risks associated with pregnancy when you have epilepsy, it's important to do everything you can to minimize those risks!

Epilepsy and Labor

Many women worry that they will have a seizure during labor. This is an understandable fear. As your pregnancy progresses, your metabolism changes. By the time you are nine months pregnant, the blood volume in your body is 50% greater than it was before you got pregnant. This means that the antiseizure medications in your body will be more diluted. That's why your doctor will be monitoring the levels of medication in your blood throughout your pregnancy, and might increase the dosage if it's getting too low.

So when labor starts, you may already be a little more vulnerable to a seizure. Then, you may miss a dose, because things don't always go exactly according to plan when a woman goes into labor. You will also be in pain and breathing hard, which can increase the chance of a seizure. This doesn't mean that seizures are common during labor and delivery, but it is possible.

What happens if you do have a seizure during labor? Your doctor may give you IV medication to stop the seizure. If that doesn't work, you may have to have a caesarean section. Although most women with epilepsy have normal vaginal deliveries, they do have a higher rate of C-sections than other women. Sometimes, anticonvulsant drugs can also reduce the ability of the muscles of your uterus to contract. If this happens, your labor might not progress as well and a C-section may be your best option.

All of these concerns can seem overwhelming. But don't panic! "Although women have to be aware of the risks, the vast majority of women with epilepsy get through pregnancy just fine," says French. Your chances of having a healthy child are excellent, especially if you talk with your doctor early and often, follow the advice you are given, and take good care of yourself. For more information, you can also request "Epilepsy and Pregnancy," a brochure from the Epilepsy Foundation. Email: WEIpamphlet@efa.org, or call 1-800-332-1000.

Also, if you are pregnant and take antiepileptic drugs, you might want to help researchers learn more about pregnancy and epilepsy. Call (888) 233-2334 (toll free) to sign up for the AED pregnancy registry.

Source: <http://www.webmd.com/epilepsy/women–pregnancy–epilepsy>