Psychiatric comorbidities are common in people with epilepsy, but underestimated and often untreated

60 percent of people with epilepsy experience psychiatric comorbidities such as anxiety or depression. Experts at the Joint Congress of European Neurology in Istanbul criticized the fact that there is a lack of adequate treatment for many of them. New insights provided by a number of recent studies show that people with epilepsy whose underlying disease is not treated are especially bad off. Testing should improve early detection of anxiety disorders. Prejudice also makes it difficult for people with epilepsy to cope.

Istanbul, 2 June 2014 – “Up to 60 percent of people with epilepsy suffer from psychiatric comorbidities such as anxiety or depression, but the situation is still not getting the attention it deserves. This is very unfortunate, because the insufficient awareness ultimately impedes the development of appropriate assistance for the group of people affected and frequently results in inadequate care,” said Dr Hannah Cock from St. George's University, London, at the Joint Congress of European Neurology in Istanbul. “All the more important, therefore, are new research results that are being discussed at the Congress.”

New tests identify states of anxiety

Although there are a number of well validated screening questionnaires to help identify anxiety, most are not practical in a busy epilepsy clinic. However, a British study presented at the Congress in Istanbul shows that proven resources for screening for depression in this setting are also applicable for anxiety: the NDDI e-questionnaire (Neurological Disorders Depression Inventory for Epilepsy) and the ET (Emotional Thermometers). “We have tested these conventional analogue tools on more than 200 people with epilepsy without depression and conclude that both tests should be used as a screening tools as an initial first step to rule out patients who are unlikely to have anxiety, as we are now using routinely in our service” Dr Cock concluded.

Men with epilepsy: Two thirds untreated

A Norwegian study presented at the Congress in Istanbul confirms that epilepsy tends to be accompanied by mental suffering, especially when the underlying disease is not treated adequately. Accordingly, young men with epilepsy (mean age 31.8 years) suffer significantly more often from depression (3.9 per cent versus 2.5 per cent) compared to healthy men in their age group. They also live under more adverse socio-economic conditions and demonstrate greater dissatisfaction with their lives. In a cohort of over 71,000 men, 650 individuals with epilepsy were identified. “Only a third (36.9 per cent) took antiepileptic drugs, the rest was left untreated,” according to Prof Nils Erik Gilhus from the University of Bergen whose team had conducted the research. “That has unfortunate consequences. In all aspects related to mental health, untreated men with epilepsy fared worse than those treated.” Specifically, they suffered more often from anxiety (seven versus 4.6 per cent); from attention deficit disorders (3.4 versus 0.4 per cent); from bipolar disorders (2.2 versus 0.3 per cent); from non-specific psychiatric disorders (5.6 per cent versus 2.3 per cent) and from poor self-esteem (2.5 versus 1.3 per cent). Episodes of violence occurred more than twice as often (3.3 vs. 1.5 per cent) among untreated men with epilepsy.

During pregnancy, epilepsy medication does not protect against depression
Another Norwegian cohort study presented at the Congress shows that women with epilepsy suffer more often from depression during pregnancy but are rarely treated. Of the more than 100,000 women included in the study, 713 suffered from epilepsy. The depression prevalence at the 18th week of pregnancy was higher among women with epilepsy than in the reference group (14.1 versus 9.1 per cent), as was the incidence of depression during the third pregnancy trimester (8.4 versus 5.4 per cent).

“Regardless of this, just under seven per cent of the women with epilepsy received antidepressants. Women without epilepsy received appropriate medication more than twice as often. The use of antiepileptic drugs such as topiramate, oxcarbazepine, carbamazepine, and valproic acid was associated with an increased risk of depression, so the drugs do not protect against depressive symptoms,” Prof. Gillhus said. The study also showed that in all women – disregarding epilepsy – the same factors such as low household income or unplanned pregnancy contribute to the development of depressive symptoms. Psychiatric histories as well as physical or sexual abuse prior to pregnancy were found to be independent risk factors that double the danger of depression.

**Epilepsy stigma: Many sufferers conceal the illness in school, work and partnerships**

A Turkish study presented to the Joint Congress of European Neurology in Istanbul also showed just how urgent is the need to educate society about epilepsy and to raise awareness of the problems among those affected. That study surveyed 330 epilepsy patients with a mean age of 29 years, almost two-thirds of whom were women. More than 40 per cent claimed they feel "different" than people without epilepsy. Nearly 40 per cent of married respondents aware of their condition before marriage confessed to having concealed the epilepsy from their partners. Almost half (48 per cent) had concealed the disease from friends and teachers during their school years and more than 37 per cent hid their condition from colleagues at work. No wonder: nearly 45 per cent had a hard time finding a job because of their illness.

**Sources:**
Congress Abstracts Ozmen et al, Screening for anxiety in epilepsy clinics. A comparison of conventional and visual-analog methods; Reiter et al, Psychiatric disease, social aspects and life events in young men with epilepsy; Bjørk et al, Epilepsy during pregnancy: a prospective population-based cohort study of prevalence, incidence, treatment and predictors of depressive symptoms; Ataklı et al, What do ‘they’ perceive about epilepsy?

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