## 119166

# Optimization of treatment of catamenial epilepsy in women

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#### Background and aims

Optimization of the treatment algorithm for catamenial epilepsy in women of fertile age.

#### Methods

All examined patients underwent included the study of the neurophysiological studies, laboratory studies of the level of female sex hormones during one cycle in the follicular and luteal phases. To optimize therapy, taking into account the minimal effect of topiramate on the development of oncological diseases of the female reproductive system, we gradually replaced the anticonvulsant drug valproic acid with topiramate at the rate of 3–5 mg/kg of body weight per day. At the same time, the average daily dose did not exceed 200 mg/day.

## Results

After 6 months of regular administration of topiramates at a dosage of 200 mg / day, the first group of patients showed a decrease in the frequency of attacks from 8 to 10 to 5 attacks per month. In addition, patients noted a decrease in the duration of seizures up to 1 min, with initial values up to 3–5 min In the second group, we also noted a decrease in the frequency of seizures up to 3–4 times a month. Studies have shown that the use of topiramates led to a decrease in estrogen levels and an increase in progesterone levels, which contributed to a decrease in the frequency of epileptic seizures.

#### Conclusions

The results of our studies of changes in hormonal status revealed fluctuations in indicators in the follicular and luteal phases, which were positive against the background of taking topiramate. In the second group, our studies showed no positive effect of valproic acid on the change in the progesterone/estradiol ratio.

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## 119167

# The frequency of epileptic seizures in persons of Uzbek nationality and the use of anxiolytics

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## Background and aims

Epilepsy is a chronic disorder, which is recurrent, unprovoked seizures. A person is diagnosed with epilepsy if they have two unprovoked seizures (or one unprovoked seizure with the likelihood of more) that were not caused by some known and reversible medical condition. The seizures in epilepsy may be related to a brain injury or a family tendency, but often the cause is unknown. Many people with epilepsy have more than one type of seizure and may have other symptoms of neurological problems as well.

### Methods

There were studied Uzbek patients which were hospitalized for the period 2018–2020. For researching were selected patients with prescription of the disease 10 and more years. Special attention was given to the age when the first signs appeared.

#### Results

Gender analysis determined that women's quantity dominated (55.07%, mean age  $24 \pm 5.3$  years), men's 44.93% (61.2%, mean age  $26 \pm 3.2$  and 38.7% with mean age  $46 \pm 4.8$  years). Average duration of seizures 8.5–12.1 min. The frequency of recurrent seizures in women from 25.43% to 30% per year. For men this indicator was equal to 17.2–20.3%. In 2.03% of men and 2.63% of women, convulsions recurred 2 times a month. In 2.15% of men and 3.5% of women were repeated 2 times a day. In each of the above cases, the anxiolytic (tranquilizer) "Sybasoni 0.5%" was used.

## Conclusions

The analysis of the register of epilepsy in Uzbek people demonstrated that epilepsy seizures was the most common disease in women (55.07%), in all patients used anxiolytic.

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## 119168

Comparative analysis of efficiency of some antiepileptic drugs monotherapy with the assessment of the dynamics of quality of life in patients with epilepsy

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## Background and aims

It is known that the frequency of seizures, working abilities and associated mental disorders are revealed to be risk factors for the QOL (quality of life). To evaluate the QOL of epilepsy patients with estimating its dynamics on the background of monotherapy with some AEDs (antiepileptic drugs) in the Republic of Uzbekistan.

Study included 52 patients aged 18–44 (23 men, 29 women). All patients completed a questionnaire QOLIE -31 before and after 4 months of beginning the therapy or its optimization.

## Results

All patients were receiving monotherapy with following AEDs: Carbamazepine- 37%, Valproate-37%, Topiramate - 15%, Lamotrigine - 11%. Comparing total score of QOL in groups showed that the largest number of patients rated their QOL as the highest observed in groups treated with Lamotrigine (80%), Topiromat (75%), Depakine (70%). At patients receiving Carbamazepine it was adequate to the good QOL (40%). The most significant anti seizure efficiency among all groups of drugs demonstrated Topiramate, the frequency of clinically significant side effects and negative impact on QOL were not observed, which does not distinguish it from Valproate, moreover, degree of changes in subscales "Emotional well-being", "Cognitive functioning" in the course of treatment was significantly higher than in patients receiving Carbamazepine, Lamotrigine and Valproate.

# Conclusions

A comparative evaluation of QOL before treatment, showed it was similar in all groups. The greatest anti seizure effect was detected in Valproates. The greatest influence on individual subscale, total score of QOL - at patients received monotherapy with Valproate or Lamotrigine, lower QOL were in other groups.

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