Epilepsy

EFFICACY AND SAFETY OF LACOSAMIDE VERSUS LEVETIRACETAM MONOTHERAPY IN NEW ONSET FOCAL SEIZURE IN ADULT PATIENTS: A NON INFERIORITY RANDOMIZED CONTROLLED TRIAL

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Objective: To assess efficacy and tolerability of Lacosamide (LCM) monotherapy compared to Levetiracetam (LEV) in adult patients with new onset focal epilepsy.

Materials and methods: Open-label single centre randomized non-inferiority trial of adult patients with new onset focal seizures. Demographic, seizure details, LCM and LEV daily dose at baseline and at 6 months of follow-up were compared.

Results: 35 patients were enrolled in each group. The baseline characteristics (age, duration of illness, seizure frequency) were comparable in both the groups. The most common type of seizure was FBTCS 70% in both the group followed by FIAS and FAS. Structural abnormality was found in 21(60%) patient of LCM group and 22(63%) in 35 LEV group. The average daily dose of LCM was 385.71 ± 49.36 mg/day, and for LEV was 1885.71 ± 501.25 mg/day. In LCM group the seizure frequency decreased from 3.33 ± 1.88 to 0.85 ± 1.09 (p=0.001) at six months and from 3.61 ± 3.12 to 0.94 ± 1.24 (p=0.001) in LEV group and found non significant different between the two groups (p=0.74). At 6-month follow-up 78.9% in the LCM arm and 87.9% in the LCM and LEV arms attained seizure frequency. During the maintenance period, 43.3% of patients in both the LCM and LEV arms attained seizure freedom (p=1.0), showing that LCM recipients were noninferior to LEV. There was no significant adverse event in both the groups.

Conclusion: Treatment with lacosamide monotherapy was non inferior to levetiracetam monotherapy in seizure control in patient of new onset focal seizure.