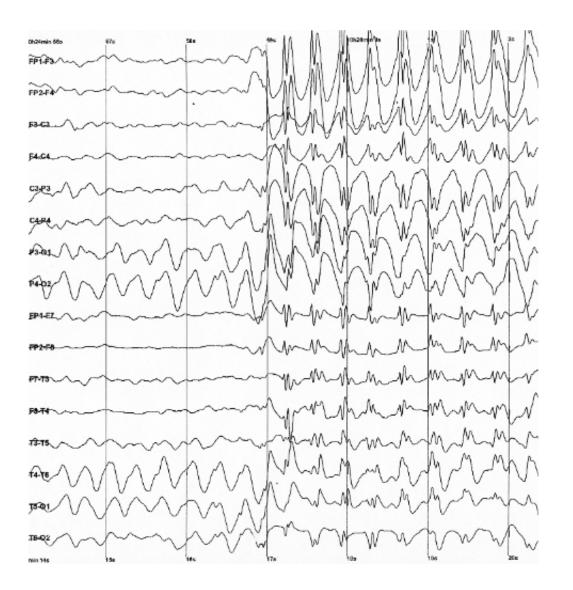


Some types of epilepsy may be associated with worse quality of life

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Generalized 3 Hz spike and wave discharges in a child with childhood absence epilepsy. Credit: Wikipedia.



A new study suggests that people with epilepsy associated with head injuries, especially the type not well controlled by medication, are more likely to have other health conditions like depression, post-traumatic stress disorder (PTSD), back pain and headache that may result in them reporting a lower quality of life. The research is published in the April 6, 2022, online issue of *Neurology*, the medical journal of the American Academy of Neurology. Other conditions included chronic conditions like high blood pressure, sleep disorders, and behavioral health conditions like anxiety.

"Our study suggests that people with <u>epilepsy</u> associated with traumatic brain injuries have complex health states that frequently include other conditions that are also associated with both <u>traumatic brain injury</u> and epilepsy and that may result in a greater chance of having both poor quality of life and lower life expectancy," said study author Mary Jo Pugh, Ph.D., of the VA Salt Lake City, and a Fellow of the American Academy of Neurology. "We believe a deeper understanding of the factors affecting quality of life in people with post-traumatic epilepsy may help us identify those at the greatest risk and then identify effective treatments."

The study looked at 529 <u>military veterans</u> with epilepsy who had an average age of 41. They were divided into four groups: 249 with epilepsy that was neither drug resistant nor associated with head injury that served as a <u>control group</u>, 124 with drug resistant epilepsy not associated with a head injury, 86 with epilepsy associated with a brain injury, and 70 with drug resistant epilepsy associated with a <u>brain injury</u>.

Each person responded to three different quality of life assessments to evaluate everything from mood and energy level to worrying about future seizures. From these assessments, researchers used six quality of life measures to examine different types of impact. They also identified the number of 17 additional conditions like depression, PTSD, headache,



anxiety and chronic diseases diagnosed for each participant.

Researchers also looked at the association between types of epilepsy and drug resistance. After adjusting for factors like age, sex and number of additional conditions each person had, researchers found 45% of the people with epilepsy associated with <u>head injuries</u> also had drug resistant epilepsy, compared to 33%, of those with epilepsy not associated with head injuries.

When looking at quality of life scores, those with drug resistant epilepsy associated with a head injury reported the lowest scores across all six measures, even after adjusting for the number of additional conditions. One of the measures rating quality of life for people with brain injuries has a maximum score of 100, indicating best possible quality of life. On average, participants in the control group scored 35.5, compared to 21.2 for those who had drug resistant epilepsy associated with a head injury. Increasing numbers of conditions also had a compounding effect on life expectancy.

"Our results suggest more research into the mechanisms behind drug resistant epilepsy is needed, because we know that drug resistance can dramatically lower quality of life, whether through worrying about future seizures or the injuries that result from seizures," Pugh said. "Those with drug resistant epilepsy associated with head injury should be the focus of future studies examining not only quality of life but also the impact of life expectancy. This will allow us to potentially find ways to help them live longer, more satisfying lives."

The study does not prove that people with drug resistant epilepsy associated with head injury will have poorer quality of life. It only shows an association.

A limitation of the study is that it only included veterans and the results



may not apply to the general population.

Provided by American Academy of Neurology

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