Efficacy and safety of eslicarbazepine acetate as add-on treatment in patients with focal-onset seizures

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Objectives: Eslicarbazepine acetate (ESL) is a once-daily antiepileptic drug (AED) that was approved as adjunctive therapy in adults with refractory partial-onset seizures, with or without secondary generalization. We wished to assess the efficacy and safety of ESL added to stable antiepileptic therapy (AED) in patients with focal epilepsy.

Materials and methods: ESL was introduced as add-on treatment in 34 consecutive patients (18 women, 18 – 70 years, mean (SD): 36.8 (5.1) years) with uncontrolled focal seizures. The follow-up ranged from 6 to 27 months. Efficacy, as measured by responder rates (>50% reduction in seizure frequency), exit rates, and adverse effects (AE), was analyzed.

Results: All patients were taking at least one AED (range: 1-3) when starting on ESL. The median dose of ESL was 1200 mg (range: 800-1600 mg). Twenty-four/27 (70.58%) patients were classified as responders, and 15 of these 24 (62.5%) patients experienced sustained seizure freedom. About one-third of patients complained side effects, and the most common were drowsiness, dizziness, and headache. AEs occurred mainly during the first weeks of treatment, they were transitory and usually of mild or moderate severity. Three/34 (8.82%) patients withdrew ESL during the study period, because of inadequate seizure control, while one of them withdrawing due to intolerable adverse effects. Exit rates for ESL were much lower than the historical control threshold, irrespective of baseline AED use, with no additional safety concerns identified.

Discussion and conclusion: Our results show that adjunctive therapy with ESL is well tolerated and can achieve clinically meaningful improvement in patients with focal epilepsy.

Reference: