

Adverse Drug Reactions of Antiepileptic drugs in Patients with Solitary Cysticercus Granuloma

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Abstract

Introduction- *Taenia solium* infestation is a major public health problem in resource poor countries known as neurocysticercosis, with a high estimated prevalence worldwide. Seizures in NCC are managed in a manner similar to seizures of other etiologies with AEDs. Carbamazepine and Phenytoin are favored for treatment of partial seizures due to NCC. Drug rash with these conventional AEDs has been reported to be more frequent in patients with SCG.

Materials and Methods- The study was conducted at Post Graduate Institute of Medical Education and Research, Chandigarh from July 2007- December 2008. All patients, 15-60 years age group, presenting to outpatient department with recent onset seizures with solitary cysticercus granuloma on neuroimaging were enrolled for the study. Pregnant women, patients with Human Immunodeficiency Virus, concomitant infections, long standing history were excluded from the study. Total 196 patients were screened for the study and were started on antiepileptic drugs, in form of Carbamazepine, Phenytoin and Oxcarbazepine.

Results- All patients were followed up at 1, 3, 6 and 9 months in the outpatient department. Monthly follow up was done telephonically. All patients were enquired about any seizure recurrence or breakthrough seizures, compliance of drugs and any antiepileptic drug side effects. Total ten patients developed AED induced drug rash, seven patients were taking carbamazepine, six out of these had maculopapular rash and one had severe drug reaction in form of Steven's Jhonson syndrome. Two patients on Phenytoin had drug rash and one on carbamazepine. Ten patients on carbamazepine had other side effects other than cutaneous drug reactions in form of mild giddiness and sedation.

Conclusion- AED induced cutaneous reactions is a very common entity. Therefore a close supervision and regular follow is required to prevent life threatening situations and large pharmacogenetic studies may help in deciding which AED to used or avoided in any particular patient.

Key words: NCC- neurocysticercosis, SCG- solitary cysticercus granuloma, AED- antiepileptic drug.

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