

# Considerations for Drug Choice in New Onset Epilepsy



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With the emergence of several new antiepileptic drugs (AEDs), choosing an agent to initiate monotherapy in newly diagnosed epilepsy has become increasingly complicated. Given their similar efficacy for partial seizure control, the choice of AED among first-line agents needs to be individualized because each patient has specific features that must be accounted for, including the type of seizure and epilepsy, medication-specific characteristics, patient drug tolerance, gender issues, co-morbid conditions, pharmacokinetics (drug-drug interactions), and cost. Considering superior efficacy of valproic acid than other broad-spectrum AEDs for generalized seizure control, the choice of initial AED is more complicated in women with generalized epilepsy of childbearing potential, given the accumulating evidence linking fetal valproic acid exposure to congenital malformations and cognitive impairments. The use of valproic acid in women of childbearing potential should be minimized. Alternative medications should be sought.

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