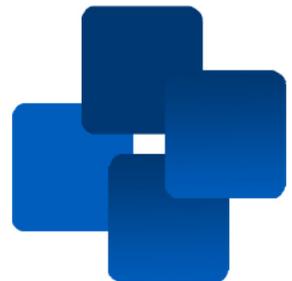


# **Patient Information**

## **Epilepsy in Pregnancy**

Women's Services



## **Contents**

- 3 Introduction
- 3 During pregnancy
- 5 Birthing plan
- 7 After baby is born
- 9 Caring for your baby when you have epilepsy
- 10 My epilepsy care plan and birth plan

## **Introduction**

This booklet provides information for women with epilepsy, and their families, to help understand about the care and support provided. This is in addition to other pregnancy information you are given. This booklet (and the plastic folder) should be kept together in your green folder.

If you have epilepsy and have become pregnant, you'll be attending an antenatal clinic which is held on Wednesday mornings. This clinic is run by a consultant obstetrician. You may also meet a neurologist in a separate appointment if required.

You will have the opportunity to discuss the contents of this booklet and other information throughout your pregnancy with your obstetrician and/or midwife.

## **During pregnancy**

### **Will my seizures get worse when I am pregnant?**

For some women there is no change but for others, pregnancy can change the number of seizures they have. Seizures are more likely to increase later on in the pregnancy.

It is important to always keep a diary and record your seizures so when you meet the maternity team, they can advise you on what is best to do.

### **Will I have to have more scans than other expectant mothers?**

All pregnant women are offered a scan between 8-14 weeks. This is called the dating scan. A further scan is offered between 18-21 weeks to check for structural abnormalities (anomalies) in the baby.

You may also be offered further scans to check the growth of the baby. This depends on what medication you are taking and if there are any other medical reasons. If you are on two or more epilepsy medications, the risk of structural abnormalities in the baby can increase. You may be offered a scan in the Fetal Medicine

department but your maternity team will discuss this with you.

### **Will my epilepsy medication have to be increased or decreased during my pregnancy?**

Your epilepsy medication dose is only changed during pregnancy if there is a change in your seizures. If you do have an increase of seizures, your dose may be increased.

You may need to have a blood test done to check if the level of medication in your blood has decreased due to your pregnancy.

Making changes to your medication after the first 3 months of pregnancy won't increase problems for your baby as all their major organs will have already developed.

### **Should I take folic acid tablets during my pregnancy?**

It is recommended that all women who are planning to have a baby should take folic acid prior to getting pregnant and then for 3 months of pregnancy. Folic acid can help prevent neural tube defects in babies.

If you take epilepsy medication you will be advised to take 5 milligrams not the normal 400 micrograms. Your GP can prescribe the higher dose for you.

### **Will seizures harm my unborn baby?**

There is no indication that focal seizures or altered state of awareness seizures can cause harm to your baby.

If you have a generalized tonic clonic seizure there is a slight risk to the baby if you fall, as there would be with any fall during pregnancy.

There is also a risk if you have a prolonged generalised seizure which lasts over five minutes; this would start to compromise your own health and your baby.

We can discuss your typical seizure pattern in clinic with you.

It is important to remember all the pre-pregnancy seizures safety recommendations, e.g. medication compliance, showers, avoid triggers, lifestyle choices.

## **Birth plan**

### **Where can I choose to have my baby?**

You will be recommended to have your baby in hospital but this will be discussed further at your clinic appointment. Although the risk of having a seizure during labour is small, it is advised that doctors can be close by; this is not possible for home births.

It is important to take your epilepsy care plan in your green folder with you to hospital.

### **Will I need to have my baby early?**

Having epilepsy, particularly if it is well controlled, is not a reason to have to have your baby early.

### **How will I have my baby?**

Women with epilepsy are encouraged to have a vaginal birth. Epilepsy on its own does not require a planned caesarian section or induction of labour.

For some women, if the labour is too prolonged, there may be a discussion to use a hormone drip (oxytocin) as being tired and exhausted may increase the chance of a seizure.

### **What should I do about my epilepsy medication during labour?**

It is very important to take your epilepsy medication during labour. It is important to bring the medication from home into the hospital.

Labour can go on for some time and different midwives will be taking care of you. Remember to tell the midwife when you need to take your epilepsy medication and if you have a birthing partner, it is advisable they know your medication and routine.

## **Can I have pain relief during labour?**

Breathing exercises, hypnobirthing and gas and air can all help you manage pain in labour. For some people hyperventilating can trigger seizures so try not to over-breathe.

TENS machines are often used and are suitable if you have epilepsy. You can also consider having an epidural. You will have the opportunity to talk to an anaesthetist on the labour ward if you wish to consider these options.

It is not advised to have high levels of pethidine as this can trigger seizures.

## **Can I have a water birth?**

This is not routinely recommended, but should be discussed with your consultant at your appointment, as the risk of you having a seizure in the water would be dangerous for you and your baby. If you have had no seizure activity in pregnancy, there may be capacity to consider this choice outside the recommendation, after discussion and risk assessment.

## **What happens if I have a seizure during labour?**

When arriving on the labour ward you will have an intravenous (IV) access tube (cannula) put in. IV access in labour is recommended in case you have a seizure during labour.

This is only as a precaution in case you have to be given emergency medication if you have a prolonged seizure. Some mothers have seizures during the first and second stage, although this is very rare, and they can then be given a benzodiazepine medication to prevent repeated seizures.

## **After baby is born**

At The Diamond Jubilee Maternity Unit, your baby will be offered vitamin K which helps with blood clotting. Sometimes babies can be born with low level of vitamin K and this can cause them to have bleeds. For mothers who are taking liver enzyme inducing epilepsy medication (Carbamazepine, Eslicarbazepine, Oxcarbazepine, Phenytoin, Phenobarbital), vitamin K is especially important for the baby to have.

### **Can I have extra privacy on the postnatal ward because of my seizures?**

We always advise you to have a bed close to the midwives in a bay and not a side room as they need to be able to see you at all times to make sure you are safe.

Many people close the curtains round their beds for privacy. Please make sure your curtains are always open when you do not have visitors.

### **Will my epilepsy medication change if it was increased during pregnancy?**

After you have given birth, if you had your medication increased during pregnancy we would advise a blood test. We would not advise a decrease in the medication unless it is too high or causing symptoms. You will be advised by the medical team in hospital if this is the case. Your dose should otherwise remain the same and be reviewed at your next neurology appointment.

### **Can I breastfeed my baby if I am taking epilepsy medications?**

Almost all mothers with epilepsy can breastfeed. Epilepsy medications can pass through breast milk, although most babies are not affected by the small amount that is passed through. Some epilepsy medications can have a higher concentration in breast milk which can cause the baby to be too sleepy and/or develop a rash; the midwives will advise you to be aware of this.

If your baby is jaundiced, born premature or has a low birth weight, your baby may be more at risk of toxicity from epilepsy medications. The neonatal doctors will examine your baby and talk to you about how certain epilepsy medications can affect baby if appropriate.

**How do I know what contraception to choose after my baby is born?**

Some hormonal contraception can be affected by epilepsy medications as they can interact and be made less effective. Prior to discharge the postnatal team can advise you on the most appropriate contraception.

# **Caring for your baby when you have epilepsy**

## **How do I make sure my baby is safe?**

- When caring for your baby always sit on the floor. For feeding, changing or dressing your baby, it is much safer to get into the habit of sitting on the floor to do this.
- It's best to never bathe your baby when alone.
- We do not recommend sharing a bed or falling asleep with your baby.
- Some women choose to wear a falls alarm on their wrist.
- When carrying your baby up and down stairs use a car seat or baby carrier.
- Try and get as much sleep as you can as sleep deprivation can trigger seizures. If you can share the care of your baby at night, this can help with your sleep.
- It is advised to try and get a pram that comes with a brake that comes on when you release the handle.

## **Remember to look after you!**

If you remember to care for your own health, you will feel more able to look after your baby.

## **What if I have any questions?**

If you have any questions or concerns, please speak to a member of the maternity team.





## Useful contact details

|   |                           |
|---|---------------------------|
| Antenatal Clinic, Lister Hospital   | ☎ 01438 314333 ext.4070   |
| Antenatal Appointments  | ☎ 01438 286031            |
| Consultant Led Unit, Lister Hospital  | ☎ 01438 284124 (24 hours) |
| Jasmin Chahal, Secretary<br>(for Miss K McNamee, consultant obstetrician with special interest in epilepsy) | ☎ 01438 284102            |

## Useful websites for more information

### Women with epilepsy

[www.womenwithpilepsy.co.uk/pregnancy-toolkit](http://www.womenwithpilepsy.co.uk/pregnancy-toolkit)

### Epilepsy Society

[www.epilepsysociety.org.uk/pregnancy-and-parenting](http://www.epilepsysociety.org.uk/pregnancy-and-parenting)

### Epilepsy Action

[www.epilepsy.org.uk/infowomen/having-baby](http://www.epilepsy.org.uk/infowomen/having-baby)

### NHS Website

[www.nhs.uk/conditions/pregnancy-and-baby/epilepsy-pregnant/](http://www.nhs.uk/conditions/pregnancy-and-baby/epilepsy-pregnant/)

## Further reading

There are other maternity information leaflets you may wish to read.

These are available on our East & North Herts NHS Trust website:

[www.enherts-tr.nhs.uk/patient-information/](http://www.enherts-tr.nhs.uk/patient-information/)

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